

Title:	Green Plan
Reference No:	C22
Owner:	Ruth Nutbrown – Assistant Chief Officer
Author:	Ian Plummer – Health and Safety Manager
First Issued On:	03/03/2021
Latest Issue Date:	03/03/2021
Operational Date:	03/03/2021
Review Date:	March 2023
Consultation Process:	OE – 06/11/2020 AQuA – 09/02/2021 GB – 03/03/2021
Ratified and Approved by:	Governing Body
Distribution:	All staff and GP members of the CCG
Compliance:	Mandatory for all permanent & temporary employees of Rotherham CCG.
Equality & Diversity Statement:	In applying this policy, the organisation will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

## Contents

1	Introduction	3
	1.1 Net Zero	3
	1.2 Green Plan	4
2	Drivers for Change	5
	2.1 Legislation	5
	2.2 NHS Mandatory Drivers	6
	2.3 Health Specific Requirements	6
3	Organisational Vision	8
4	Areas of Focus	8
	4.1 Corporate Approach	8
	4.2 Asset Management and Utilities	9
	4.3 Travel and Logistics	9
	4.4 Adaptation	10
	4.5 Commissioning & Procurement	11
	4.6 Green Space and Biodiversity	11
	4.7 Sustainable Models of Care	12
	4.8 Our People	12
	4.9 Sustainable Use of Resources	13
	4.10 Carbon / Greenhouse Gases (GHG's)	13
5	Equality Statement	14
6	Monitoring and Review	14
7	References	14
	Appendix A – About NHS Rotherham Clinical Commissioning Group (CCG)	15
	Appendix B – Waste Matrix	16
	Appendix C – Green Action Plan	18
	Appendix D – Equality Impact Assessment	25

## 1. Introduction

In January 2020, the campaign for a greener NHS was launched to mobilise our 1.3 million staff and set an ambitious, evidence-based route map and date for the NHS to reach net zero. This report sets out the initial results of this work, reaching net zero emissions (the NHS Carbon Footprint) for the care we provide by 2040, and zero emissions across the entire scope of our emissions (the NHS Carbon Footprint Plus) by 2045.

The current global COVID-19 pandemic has further reinforced the connection between global public health and healthcare systems and populations across the world. The NHS response to the pandemic has demonstrated an impressive capacity to adapt and respond in an emergency. It also highlights the importance of preparedness for future pandemics, and the wider health implications of climate change.

The NHS aims to provide health and high quality care for all, now and for future generations. This requires a resilient NHS, currently responding to the health emergency that COVID-19 brings, protecting patients, our staff and the public. The NHS also needs to respond to the health emergency that climate change brings, which will need to be embedded into everything we do now and in the future.

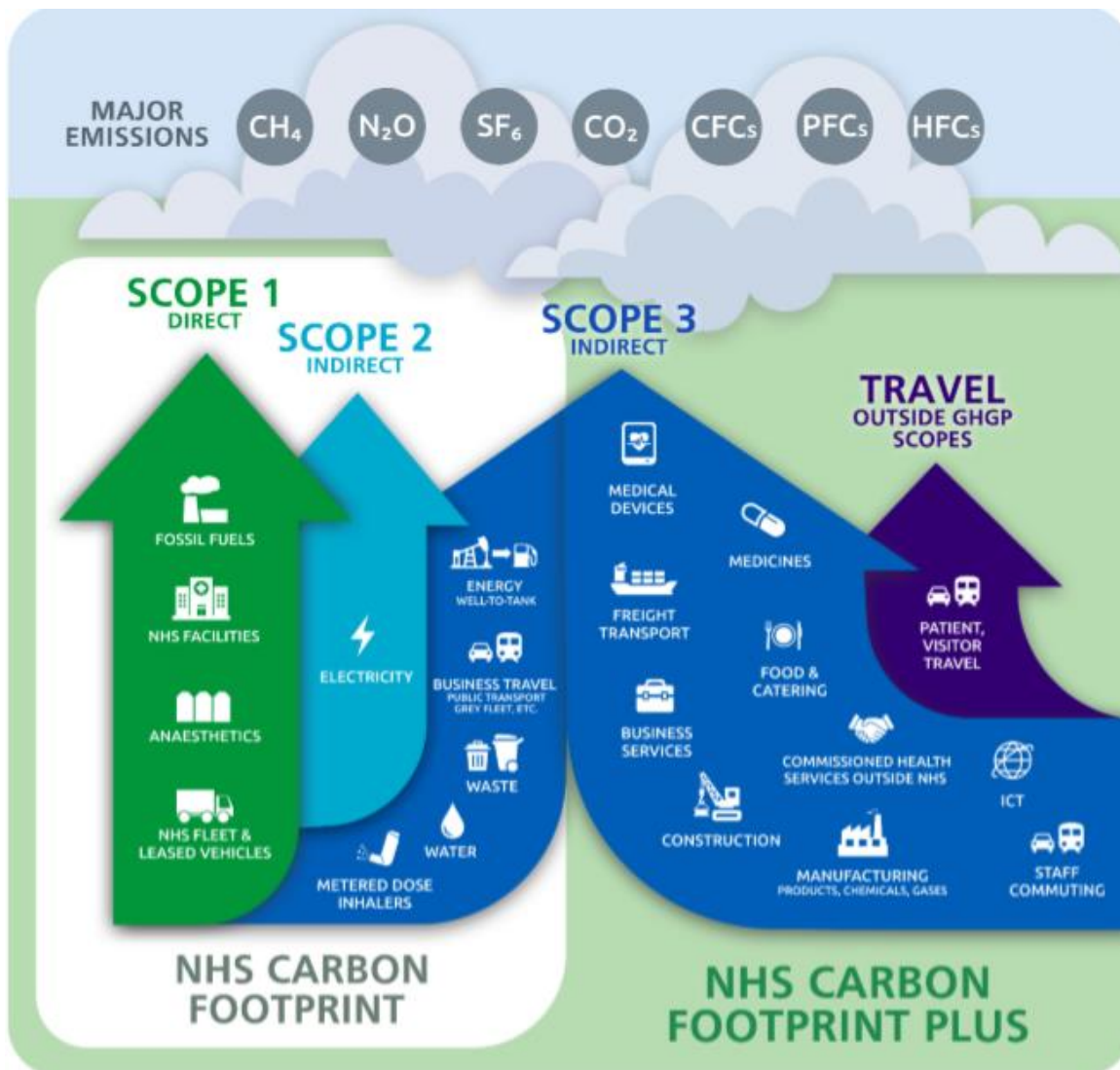
More intense storms and floods, more frequent heatwaves and the spread of infectious disease from climate change threaten to undermine years of health gains.

Action on climate change will affect this, and it will also bring direct improvements for public health and health equity. Reaching our country's ambitions under the Paris Climate Change Agreement could see over 5,700 lives saved every year from improved air quality, 38,000 lives saved every year from a more physically active population and over 100,000 lives saved every year from healthier diets.

## **1.1 Net Zero**

Net Zero refers to the balance between the amount of greenhouse gas produced by the NHS and the amount removed from the atmosphere. Net zero is reached when the amount we add is no more than the amount taken away.

The NHS aim to reach net zero by 2040, for the emissions we control directly and indirectly (the NHS Carbon Footprint) with an ambition to reach an 80% reduction by 2028 to 2032. For the emissions we can influence (our NHS Carbon Footprint Plus) the NHS aims to reach an 80% reduction by 2036 to 2039, with a net zero target by 2045.



**Scope 1:** Direct emissions from owned or directly controlled sources, on site

**Scope 2:** Indirect emissions from the generation of purchased energy, mostly electricity

**Scope 3:** All other indirect emissions that occur in producing and transporting goods and services, including the full supply chain, patient and visitor travel

## 1.2 Green Plan

A Green Plan is a Governing Body approved, live strategy document outlining the CCG's aims, objectives, and delivery plans for sustainable development. This includes the implementation of the NHS Long Term Plan deliverables.

Developing a Green Plan will help Rotherham CCG to:

- Deliver on the NHS Long-Term Plan
- Improve the health of the local community
- Achieve its financial goals

- Meet its legislative requirements

It is important to recognise that these NHS Long Term Plan deliverables may not be applicable to every NHS organisation.

In England, the carbon footprint of the NHS was estimated to account for 4-5% of the country's climate emissions and transporting NHS products and services accounts for more than half of our carbon footprint.

However, the NHS has already made considerable progress on climate change, with carbon emissions being reduced by 18% in the decade since 2007 at the same time as the NHS has significantly expanded the number of patients treated. This is equivalent to cutting annual emissions equal to those of a country the size of Mauritius or Cyprus. In addition, 85% of NHS provider waste is avoiding going directly to landfill and 23% of waste was recycled in 2017. The NHS water footprint was reduced by more than one fifth (21%) between 2010 and 2017.

Prior to the implementation of this Green Plan, NHS Rotherham CCG was working towards its previous Sustainability Strategy and action plan which was agreed in September 2018 and is documented in the CCG's Annual Reports located on the CCG website. (<http://www.rotherhamccg.nhs.uk/annual-report.htm> )

## 2. Drivers for Change

### 2.1 Legislation

<p style="text-align: center;"><b><u>Civil Contingencies Act (2004)</u></b></p>	<p>The Civil Contingencies Act 2004 requires certain organisations to prepare for adverse events/incidents. Our changing climate is a major driver of many of the emergencies and extreme events that the UK must be better-prepared for. Heat-waves, flooding and cold weather can disrupt the operation of the health and care system and have direct impacts on health. These situations are recognised as relevant to the Act, alongside major incident situations.</p>
<p style="text-align: center;"><b><u>Climate Change Act (2008)</u></b></p>	<p>The Climate Change Act (2008) was introduced to ensure the UK cuts its carbon emissions by 80% by 2050 to become a low carbon economy. The 80% target is set against a 1990 baseline. The Act sets in place a legally binding framework allowing the government to introduce measures which will achieve carbon reduction and mitigate and adapt to climate change. As the largest public sector emitter of carbon emissions, the health system has a duty to respond to meet these targets.</p>

<p><b><u>Public Services (Social Value) Act (2012)</u></b></p>	<p>The Public Services (Social Value Act) requires all public bodies in England and Wales to consider how the services they commission and procure might improve the economic, social and environmental well-being of the area. The legislation affects a range of organisations including those in the NHS, public health, local authorities, government departments and housing associations.</p>
--	---

## 2.2 NHS Mandatory Drivers:

<p><b><u>NHS Standard Contract</u></b></p>	<p>The NHS Standard Contract is mandated by NHS England for use by commissioners for all contracts for healthcare services other than primary care.</p>
<p><b><u>EU Directive on Public Procurement</u></b></p>	<p>The EU Directive on Public Procurement sets new rules for public bodies when purchasing goods and services, including clinical services. It includes a number of positive drivers for sustainable development.</p>
<p><b><u>HM Treasury's Sustainability Reporting Framework</u></b></p>	<p>The guidance is applicable to all central government bodies that fall within the scope of the Greening Government Commitments. It sets out the minimum reporting requirements for the production of annual reports and accounts in accordance with HM Treasury's Government Financial Reporting Manual (FRoM). These bodies are required to report on sustainability unless exempt.</p>
<p><b><u>Public Health Outcomes Framework</u></b></p>	<p>The Framework sets out a high-level overview of public health outcomes at both national and local level and is supported by a set of indicators.</p>

## 2.3 Health Specific Requirements

<p><b><u>Sustainable Development Strategy for the Health and Social Care System 2014-2020</u></b></p>	<p>The Sustainable Development Strategy for the Health, Public Health and Social Care System 2014-2020 (gateway No 01011) was launched in January 2014. It describes the vision for a sustainable health and care system by reducing carbon emissions, protecting natural resources, preparing communities for extreme weather events and promoting healthy lifestyles and environments.</p> <p>The challenge is how to continually improve health and wellbeing and deliver high quality care now and for future generations within available financial, social and environmental</p>
---	--

	<p>resources.</p> <p>Understanding these challenges and developing plans to achieve improved health and wellbeing and continued delivery of high quality care is the essence of sustainable development. It is important that plans factor in:</p> <p>The environmental impact of the health and care system and the potential health co-benefits of minimising this impact.</p> <p>How the health and care system needs to adapt and react to climate change, including preparing and responding to extreme events.</p> <p>How the NHS, public health and social care system maximises every opportunity to improve economic, social and environmental sustainability.</p>
<p><b><u>The NHS Carbon Reduction Strategy for England (CRS)</u></b></p>	<p>The NHS Carbon Reduction Strategy for England (CRS) sets an ambition for the NHS to help drive change towards a low carbon society. The strategy shows the scale of reduction in carbon required for the NHS to meet its legal targets set out in the <u>Climate Change Act</u>. It also recommends key actions for the NHS to become a leading sustainable and low carbon organisation.</p>
<p><b><u>NHS Long Term Plan</u></b></p>	<p>While wider action on air pollution is for our government to lead, the NHS will work to reduce air pollution from all sources. Specifically, we will cut business mileages and fleet air pollutant emissions by 20% by 2023/24. Almost 30% of preventable deaths in England are due to non-communicable diseases specifically attributed to air pollution. More than 2,000 GP practices and 200 hospitals are in areas affected by toxic air. In 2017, 3.5% (9.5 billion miles) of all road travel in England was related to patients, visitors, staff and suppliers to the NHS. At least 90% of the NHS fleet will use low-emissions engines (including 25% Ultra Low Emissions) by 2028, and primary heating from coal and oil fuel in NHS sites will be fully phased out. Redesigned care and greater use of ‘virtual’ appointments will also reduce the need for patient and staff travel.</p>
<p><b><u>Greener NHS Campaign</u></b></p>	<p>National ambition</p> <p>The UK was the first major economy in the world to pass a law to end its contribution to climate change. This means that the UK will aim to balance any emissions generated through emission cutting or removal efforts – so called ‘Net Zero’.</p> <p>Given the importance of the NHS in our national life, how quickly the NHS can advance to Net Zero will affect how quickly the country as a whole succeeds. The health and care system</p>

	in England is responsible for an estimated 4-5% of the country's carbon footprint. That is why we are committed to reaching Net Zero.
--	---

### **3. Organisational Vision**

NHS Rotherham CCG's overall organisational vision is to put the needs of patients, carers and service users at the centre of our business. We aim to be lean, efficient, responsive and free from unnecessary bureaucracy.

We recognise the importance of encouraging sustainable development and are committed to leading by example. This plan sets out Rotherham CCG's approach to promoting and facilitating sustainable development through positive action.

### **4. Areas of Focus**

Due to the Covid-19 pandemic, we have continued to follow government guidance and work from home, only travelling to work if it is absolutely necessary; this has had a positive effect on our Green Plan by reducing the need to travel which has virtually eliminated our particulate emissions to atmosphere which has helped to improve our air quality. As a result of working from home, the CCG's energy consumption has also reduced; which further reduces the CCG's carbon foot print.

The following areas of focus will form the basis of our Green Action Plan. The following sections set out the CCG's key aims and objectives for each area of focus.

#### **4.1 Corporate Approach**

Sustainability forms part of the culture that transforms health, public health and social care delivery towards more integrated and enabling services. Sustainable and resilient services will only emerge from a culture that understands and values environmental and social resources alongside financial.

We will achieve this through strong leadership from within the CCG coupled with our staff values and engage with staff and stakeholders to ensure we can fulfil our green commitments.

We will monitor our impact on the environment and develop an ambitious Green Plan to reduce our negative impacts (carbon emissions and air pollution) as required by the NHS Standard Contract.

Our Green Plan key performance indicators will be reported to our Governing Body, encompassing the measurement of areas such as the use of resources, recycling, and carbon and air pollution.



## **4.2 Asset Management and Utilities**

Due to the Covid-19 pandemic, we have continued to follow government guidance and work from home; this has had a positive effect by reducing our energy usage which in turn reduces our greenhouse gas emissions to atmosphere.

However, we must continue to be mindful that when we return to work, these figures will rise, we will continue to develop plans internally and with our stakeholders to maintain this reduction as well as aiming to keep our energy and water usage to a minimum which will improve our water and energy efficiency, in line with the NHS Sustainable Development Strategy and the Climate Change Act (2008).

- We will report our energy and water usage/performance in our annual report.
- Through an internal media campaign we will ask staff to help conserve energy and water when it is safe to return to work. (Turn equipment off at the end of the day; turn the lights off in meeting rooms when not in use, keep doors closed to conserve heat).
- We will demonstrate through the collation of data that our approach is leading to a reduction in our levels of energy and water use and waste reduction; which will result in the reduction of our carbon footprint.
- We will support our community with energy efficiency advice and warm homes support to patients, users, carers and the local community to improve their health and wellbeing.
- We will encourage staff to be more sustainable at home and promote healthy sustainable lifestyles (e.g. home energy and waste efficiency advice (<https://footprint.wwf.org.uk/#/>), active travel support etc.).

## **4.3 Travel and Logistics**

Our health and the health of the environment are damaged by pollutants released and resources used in delivering care. The world's first combined health, public health and social care carbon footprint for a national health system estimates the health and care system carbon footprint to be 32 million tonnes of carbon dioxide equivalent (MtCO<sub>2</sub>e).

The NHS aims to reach every individual and community in the country. Consequently travel, by patients, staff and visitors, is a crucial part of the way the NHS delivers services. The NHS accounts for 5% of all road traffic in England and travel is responsible for 18% of the NHS carbon footprint in England. This is an important area for reducing carbon impact, improving sustainability, convenience and safety, as well as saving time and money.

Reducing the use of private cars, either travelling to the NHS or on NHS business, is one of the big opportunities to reduce our carbon related to travel. In total they account for over 50% of carbon emissions in the UK domestic travel sector. 56% of all journeys by car are less than five miles and 23% are less than two miles.

During the COVID-19 pandemic, government guidance has been to work from home and only return to work if absolutely necessary and for a minimal amount of time.

This has had a positive effect with regards the reduction of our travel emissions to atmosphere.

However; when the restrictions are over and greater numbers of staff will be returning to work, our aim will be to try to minimise the impact the increase in travel will have on our emissions.

To try to maintain our reduced emissions:

- We will calculate our pre-Covid carbon footprint for our transport and travel; this will form our benchmark which we will aim not to exceed.
- We will continue to use virtual meeting platforms where possible to avoid business travel mileage which will save staff travel time and improve health and wellbeing.
- We will promote and encourage active travel if our staff are required to travel to site and ensure our staff are provided with information about the cost savings and personal benefits of sustainable modes of commuting (e.g. commuter travel club, cycle to work scheme).
- We will meet with our stakeholders and discuss the feasibility of installing electric vehicle charging points at our sites or increasing the numbers if they are already in place if practicable which can be accessed by staff and visitors.

#### **4.4 Adaptation**

Climate Change is recognised as one of the biggest public health threats this century.

The impacts of climate change are already being felt in the UK and these impacts will increase in the future.

To help combat climate change we engage with our local stakeholders, such as Local Authority, community groups, Local Health Resilience Partnerships and other healthcare providers/commissioners; to identify risks posed by current weather and climate. We have developed local protocols aligned to national heat wave plans, cold weather plans and multiagency flood plans) in relation to Civil Contingencies Act and National Adaptation Plan to ensure our vulnerable communities and patients are supported in the event of major and extreme weather events.

According to the UK Climate Change Risk Assessment (UK CCRA 2012), the UK is projected to see an increase in the frequency and intensity of weather-related hazards including heat waves and floods. While winters are projected to become warmer and wetter, cold spells will still occur.

The UK CCRA 2012 highlighted several key health risks from climate change including:

- Heat (increased summer temperatures and heat wave events).
- Cold (reduced deaths and illness but with continued risk from cold 'snaps').
- Ground level ozone.

- Flooding and Storms (resilience and continuity of health and social care services, mental health impacts and injuries).
- Incidence and exposure to marine and freshwater pathogens.
- Sunlight (UV risk).

#### **4.5 Commissioning and Procurement**

In England over £88 billion of public money is spent on health and care services commissioned for local people. Delivering health and care services in turn involves the procurement of a large amount of goods, services and infrastructure, with the health and care system spending over £40 billion each year. Every pound spent enables positive health, social and environmental outcomes. The commissioning of services and the procurement of products are powerful levers to influence the delivery of sustainable services.

NHS Rotherham CCG recognises that it can develop and use criteria to stimulate more ambitious and innovative approaches to delivering care that costs less, creates less environmental harm and reduces inequalities. Sustainable commissioning takes a whole system approach to improving health and wellbeing of the people it buys services for. The CCG understands that commissioning services in a way that utilises local assets, improves the local environment and empowers local people and communities can achieve wider benefits from the same investment.

Our key deliverables are:

- Securing the needs of the people who use our services;
- Improving the quality of the services; and
- Improving efficiency in the provision of the services

#### **4.6 Green Space and Biodiversity**

Green space and biodiversity can play a key role in improving patient recovery rates and patient experience, as well as supporting staff health and wellbeing.

Urban green space is a necessary component for delivering healthy, sustainable and liveable cities accordingly to a new report published by the World Health Organisation (WHO) Regional Office for Europe.

The CCG can help to increase or improve urban green space which can deliver positive health, social and environmental outcomes for all our population groups, particularly among lower socioeconomic status groups by the potential integration of green space into the clinical and working environments for example; tree planting (NHS Forrest), integrated allotment space, bee boxes on site roofs.

[\(https://www.sduhealth.org.uk/news/544/world-health-organisation-report-highlights-importance-of-urban-green-space-for-health/ \)](https://www.sduhealth.org.uk/news/544/world-health-organisation-report-highlights-importance-of-urban-green-space-for-health/)

#### **4.7 Sustainable Models of Care**

We aim to be able to deliver the best quality of care with the resources that are available. This will always be a challenge and will become increasingly so as costs escalate, resources diminish and weather patterns become more unpredictable.

To be prepared for changing times, climates and events it is increasingly important that we continue to consider new ways the environmental and social impact of how our services can be delivered and look for new ways of working which could reduce our overall emissions to atmosphere.

#### **4.8 Our People**

Our workforce is key to ensuring the CCG is sustainable; every person within the CCG has a part to play to ensure we meet our targets and help to fulfil our obligations to reduce our carbon footprint and promote a healthy lifestyle for staff and members of the public.

To accomplish this:

- We conduct annual staff surveys and report back on their findings. We have used this data to develop an action plan on staff wellbeing.
- We have an equality and diversity policy that is aligned to the requirements under the Equality Act (2010).
- We have a clear and publically available Modern Slavery Statement.
- We have analysed the training needs of our workforce and produced a working plan to up skill our staff.
- We have an action plan to promote and support health choices in all parts of the workplace, including off site, (e.g. managing sick absence policy, alcohol, drug and substance misuse policy, procedure for managing stress in the workplace and the promotion of healthy food choices).
- Our staff are given information during their induction about the organisation's sustainability plans and how they can support them.
- The CCG supports our staff to use smoking cessation services.
- We have visible processes and support to improve the health of our workforce (e.g. offering fitness classes, enabling active travel).
- We offer flexible working and support to accommodate specific personal needs of all staff (e.g. parent, carers, accessibility etc.) to enhance staff health and wellbeing.
- We are a living wage employer.
- We can demonstrate that the health and wellbeing of our workforce is improving as a result of our action to reduce sickness absences, staff health and wellbeing surveys and stress avoidance/management.
- We have clear processes in place to manage our duty of care (e.g. health and safety) to all contractors and third party personnel working on our site or on our behalf.

- We support our staff volunteering in the community and with our local charities (e.g. collecting for food banks, dress down day for charity).

#### **4.9 Sustainable Use of Resources**

NHS Rotherham CCG will develop a clear process with our stakeholders for reducing our overall carbon footprint. We will capture and monitor waste outputs and their associated costs closely across the organisation and over time such as reducing the need for single use plastics, continuing to purchase recycled copier paper from FSC (Forest Stewardship Council) certified sources.

We will explore initiatives and discount schemes that allow our staff to procure more sustainable products (e.g. NHS staff discounts programme with a sustainable products category).

Where possible we will avoid disposal costs and donate goods to voluntary and third sector organisations.

#### **4.10 Carbon / Greenhouse Gases (GHG's)**

As a responsible organisation where we can we will measure / monitor the carbon impact of each of our activities and set targets where practicable and set SMART targets in partnership with our stakeholders E.g.

- Building energy use
- Building water use
- Waste generation
- Travel, transport and logistics activities
- Procurement and logistic activities
- Information Technology (IT)
- Other gases e.g. anaesthetic gases, inhalers and air conditioning gases (F-gas)

We will review our sustainability impacts and develop an ambitious Green Plan to reduce negative impacts (carbon emissions and air pollution) and promote benefits (health promotion, illness prevention and social value) as required by the NHS Standard Contract, and set SMART carbon targets in relation to various carbon hotspots (e.g. energy, travel,), with a baseline year and clear target date (e.g. aligned to or exceeding the Climate Change Act targets).

- We will report our sustainability key performance indicators to Governing Body quarterly, encompassing the measurement of areas such as our carbon footprint, recycling, energy usage and waste.
- We will promote the Rotherham staff values and encourage innovation, new ideas and support new technologies that could help reduce our carbon footprint and improve the health of our staff and patients e.g. the Rotherham Health App.

## **5 Equality Statement**

In applying this strategy, NHS Rotherham CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

## **6 Monitoring and Review**

This plan will be reviewed every two years and in accordance with any changes to relevant legislation, good practice guidelines or after a significant change in the structure of the CCG. Where review is necessary due to legislative change, this will happen immediately.

Following ratification, the Green Plan will be disseminated to staff via the intranet.

## **7 References:**

- [Greener NHS Campaign](#)
- [Sustainable Development Unit](#)
- [NHS Long Term Plan](#)
- [Natural Resource Footprint](#)
- World Health Organisation – [Urban Green Space Interventions and Health](#)
- [Civil Contingencies Act \(2004\)](#)
- [Climate Change Act \(2008\)](#)
- [Public Services \(Social Value\) Act \(2012\)](#)

## Appendix A

### **About NHS Rotherham Clinical Commissioning Group (CCG)**

NHS Rotherham Clinical Commissioning Group (CCG) was formally established on the 1 April 2013 and is run and led by a team of local GPs, Consultants and Nurses.

CCGs are overseen by NHS England, which is a national body formed under the 2012 Act.

We are responsible for planning, organising and commissioning (also known as buying) health and care services for the people of Rotherham, including:

- Most local hospital care for example A&E, outpatients, tests and operations.
- Most mental health care including both GP-based services and hospital-based services.
- Most community services for example district nurses, matrons and physiotherapy.

The CCG has approximately. 125 employees as of 30<sup>th</sup> September 2020, and operates from Oak House; Bramley in Rotherham.

Oak House is a multi-occupancy NHS building and our landlord is NHS Property Services Ltd. NHS Property Services were established on the 1 April 2013 and are responsible for the Oak House premises and grounds as follows:

- Grounds
- Pest Control
- Security
- Waste
- Energy & Water
- Mechanical & Electrical services
- Fire arrangements

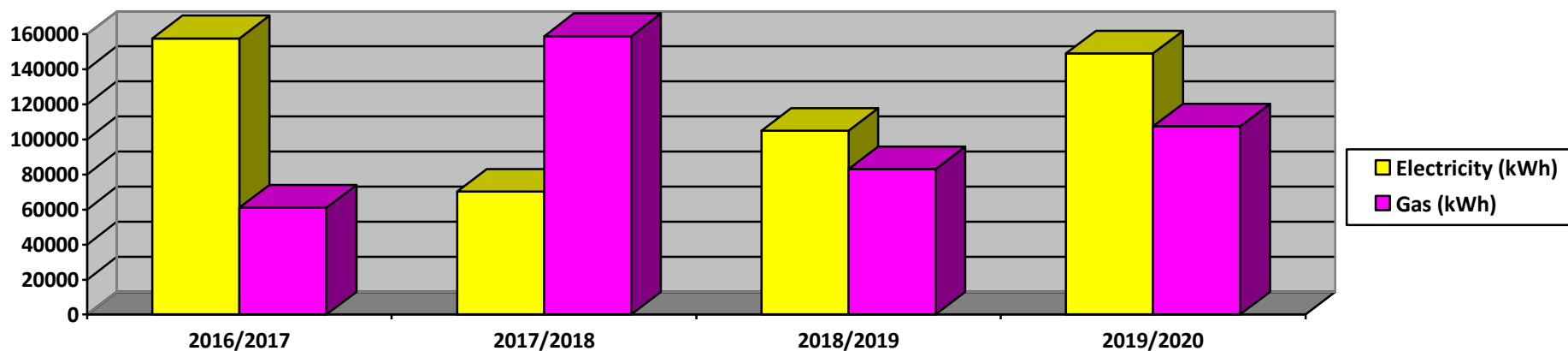
Costs associated with the above services are re-charged back to each tenant based on the size of each tenants demised areas and a percentage of any shared areas. Prior to 1 April 2013, the owner and landlord was NHS Rotherham Primary Care Trust.

## Appendix B – NHS Rotherham CCG, Oak House - Waste Metrics

Figures provided by NHS PS Ltd.

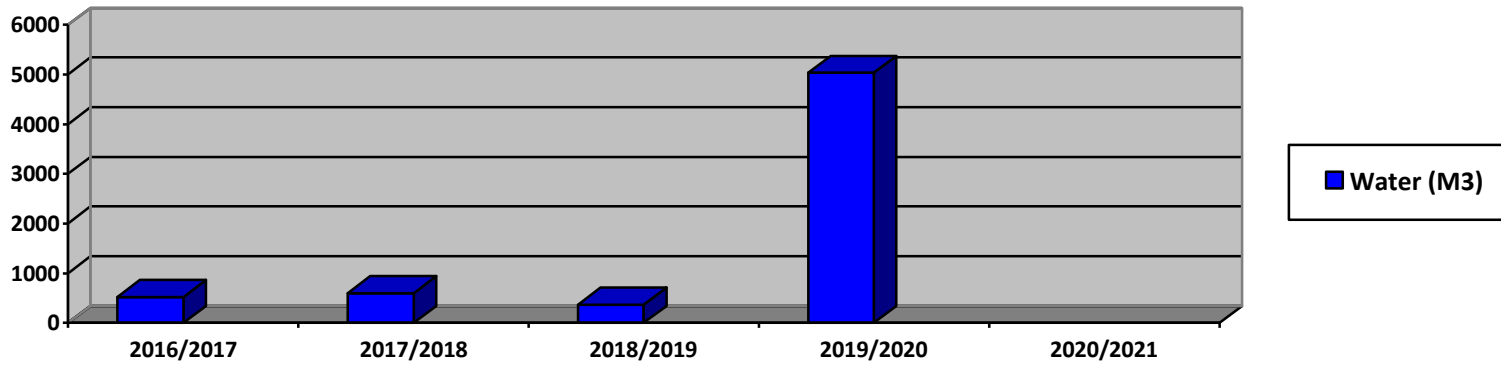
	Consumption			CO <sub>2</sub> Emissions to atmosphere (ton)		
	Electricity (kWh)	Gas (kWh)	Water (m <sup>3</sup> )	Electricity	Gas	Total CO <sub>2</sub> to atmosphere
2019/2020	148,916	107,234	5,035	79.968tn	19.838tn	99.806tn
2018/2019	104,746	83,038	370	56.249tn	15.362tn	71.611tn
2017/2018	70,234.74	158,785.09	604.06	37.716tn	29.375tn	67.091tn
2016/2017	157,504	61,114	521	84.580tn	11.306tn	95.886tn

### NHS Rotherham CCG - Electricity & Gas usage (kWh)

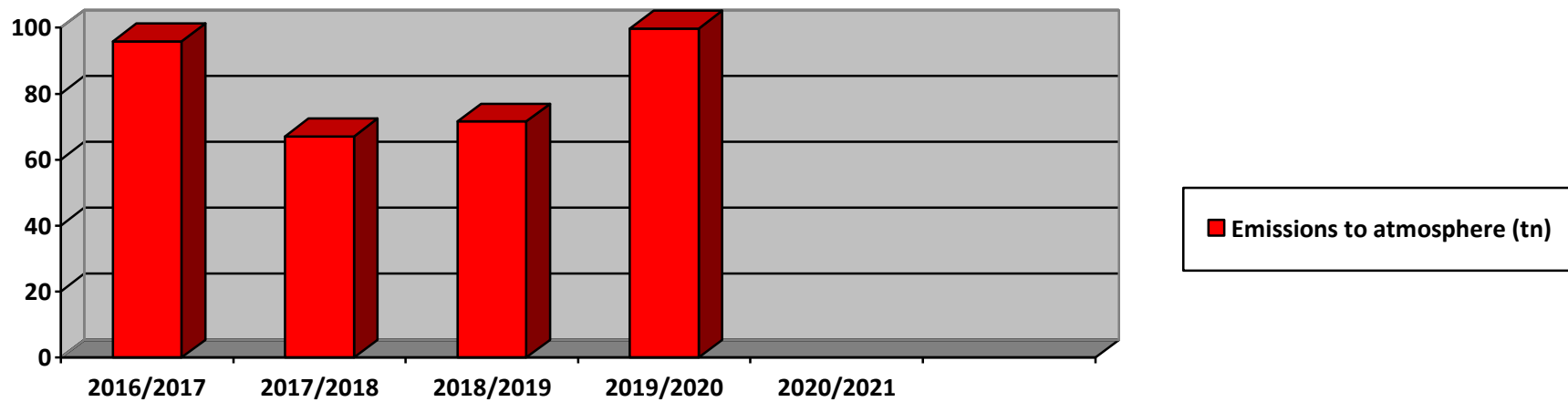




**NHS Rotherham CCG - Water usage (M<sup>3</sup>)**



**NHS Rotherham CCG - CO<sub>2</sub> total emissions to atmosphere (ton)**



## Appendix C

### NHS Rotherham CCG Green Action Plan

Area for Development	Action	Lead	Time Scale	Actions completed / in progress	Priority
Corporate Approach	Lead from the top, encourage from within	Chief Officer	Mar 2021		
	Include sustainability into everyone's job description	Head of HR	Mar 2022	Include a statement in the standard format job description	Low
	Include a section on sustainability in staff induction checklist	Assistant Chief Officer	Completed	Sustainability included in the H&S induction for new starters	
	Create a sustainable forum with members from each department to discuss the action plan and promote sustainability within the CCG and with external stakeholders	Executive Leads	Mar 2021		
	Review workforce policies to ensure they promote sustainable behaviour where applicable	Head of HR / Executive Leads	Mar 2026	Add a standard statement to all employment policies	Low
	Promote staff health and wellbeing within the workplace	Executive Leads / Head of Communications	Mar 2024		

	Introduce a green suggestions system to encourage staff to feed in sustainable ideas for consideration	<b>Executive Leads /Head of Communications</b>	<b>Mar 2021</b>		
	Complying with environmental and other appropriate legislation	<b>Executive Leads</b>	<b>On-going</b>		
	Participate in national sustainability campaigns e.g. Sustainability Day, Climate Change Week, Energy Saving Week	<b>Executive Leads /Head of Communications</b>	<b>On-going</b>		
Asset Management and Utilities	Introduce recycling schemes e.g. Stationary recycling	<b>Assistant Chief Officer</b>	<b>Mar 2021</b>	<b>H&amp;S manager to explore relevant recycling schemes for the CCG</b>	<b>High</b>
	encourage staff to take glass and plastics home rather than disposing of them in general waste	<b>Head of Communications</b>	<b>On-going</b>		
	Switching off lights when leaving meeting rooms	<b>Head of Communications</b>	<b>On-going</b>		
	Increase awareness of printing costs to the CCG, encourage staff to only print if necessary	<b>Assistant Chief Officer</b>	<b>On-going</b>	<b>Quarterly printer usage to be presented at OE for dissemination to their staff.</b>	<b>Low</b>
	Continue to work with NHSPS to better understand our energy usage and seek ways to utilize our facilities more efficiently.	<b>Assistant Chief Officer</b>	<b>On-going</b>	<b>Continuation of building user meetings between NHS PS and tenants</b>	<b>High</b>

				<b>of Oak House. Section on sustainability to be tabled for future meetings</b>	
	Increase the awareness of medicines waste	<b>Head of Prescribing</b>	<b>On-going</b>		
	Analyse usage of shredding bins to reduce numbers and save costs	<b>Assistant Chief Officer</b>	<b>Mar 2022</b>		
	Discuss with staff the potential waste saved if magazine subscriptions can be accessed electronically instead of being delivered to Oak House	<b>Head of Communications</b>	<b>Mar 2022</b>		
	Promote healthy sustainable lifestyles. E.g. home energy and waste efficiency advice ( <a href="https://footprint.wwf.org.uk/#/">https://footprint.wwf.org.uk/#/</a> ), active travel support.	<b>Head of Communications</b>	<b>On-going</b>		
	Collate CCG energy and waste reduction data and publish the information on our website	<b>Assistant Chief Officer</b>	<b>March 2021</b>	<b>H&amp;S Manager to contact NHS PS for energy cost figures.</b>	<b>Low</b>
	Support our community with energy efficiency advice and warm homes support to patients, users, carers and the local community to improve their health and wellbeing	<b>Head of Communications</b>	<b>On-going</b>		
	Encourage the bike to work scheme	<b>Head of Communications / Head of HR</b>	<b>Dec 2021</b>	<b>Salary sacrifice bike scheme to remain in place</b>	<b>Low</b>

Travel and Logistics	Encourage staff to utilise the First Bus <u>Corporate Travel Club scheme</u>	<b>Head of Communications</b>	<b>Dec 2021</b>		
	Review the provision of care with the aim of providing services as close to home as possible and moving care close to home when appropriate. Therefore reducing the need to travel for patients and their families.	<b>Chief Nurse</b>	<b>Mar 2022</b>		
	Promote electric car use	<b>Head of Communications</b>	<b>Mar 2030</b>		<b>Low</b>
	Ensure stationery orders are placed in bulk, ideally on a monthly basis to limit the number of journeys the supplier has to make	<b>Assistant Chief Officer</b>	<b>On-going</b>		
	Delivery of training to staff via online platforms wherever possible	<b>Executive Leads</b>	<b>On-going</b>		
	Encourage the continual use of virtual staff meetings to reduce travel time	<b>Head of Communications</b>	<b>Mar 2022</b>		
Adaptation	Involve members of the local community in the planning and delivery of healthcare	<b>Chief Nurse</b>	<b>On-going</b>		
	Measure how well the CCG's activities support sustainability inside the organisation and outside in the community	<b>Assistant Chief Officer</b>	<b>On-going</b>		

Commissioning & Procurement	Ensure compliance against sustainable development clauses in the NHS standard contract. i.e. Embed relevant policies in contracts	<b>Head of Co-Commissioning</b>	<b>Mar 2022</b>		
	Ensure procurement supports and facilitates a reduction in resource use and waste	<b>Head of Co-Commissioning</b>	<b>Mar 2022</b>		
Green Space and Biodiversity	Explore the benefits of signing up to the NHS Forrest scheme.	<b>Assistant Chief Officer</b>	<b>March 2022</b>	<b>H&amp;S manager to contact NHS Forrest</b>	<b>Low</b>
Sustainable Models of Care	Continue our membership of the Joint Clinical Commissioners Board across the SYB footprint and seek opportunities to commission in partnership	<b>Head of Co-Commissioning</b>	<b>Mar 2026</b>		
Our People	Support staff to improve their health and well-being. E.g. Fitness classes, active travel.	<b>Head of Communications</b>	<b>On-going</b>		
	Promote staff volunteering in the community and with our local charities (e.g. collecting for food banks, dress down day for charity)	<b>Head of Communications</b>	<b>Mar 2024</b>		
	Support staff to obtain maximum benefit from using IT. E.g. Workshops to ensure portable devices and installed programs are being used to their full potential.	<b>Head of Informatics</b>	<b>Mar 2021</b>		

	Encourage daytime activities while working from home. E.g. lunch time walking, desk exercises, virtual coffee mornings. Etc.	<b>Head of Communications</b>	<b>On-going</b>		
	Collate health & well-being data from the staff survey, identify any trends and produce a plan to improve staff mental health and wellbeing. Communicate the action plan to all members of staff	<b>Head of HR / Head of Communications</b>	<b>Aug 2021</b>		<b>Med</b>
<b>Sustainable Use of Resources</b>	Enter discussions with our landlord to reduce the need for single use plastics and reducing our water usage	<b>Assistant Chief Officer</b>	<b>Mar 2022</b>	Continuation of building user meetings between NHS PS and tenants of Oak House.  Section on sustainability to be tabled for future meetings	<b>Med</b>
	Reduce disposal costs and sending items to landfill by donating unused / old equipment to voluntary and third sector organisations where applicable.	<b>Assistant Chief Officer</b>	<b>On-going</b>		
	Promote new initiatives and discount schemes that allow our staff to procure more sustainable products (e.g. NHS staff discounts programme with a sustainable products category).	<b>Assistant Chief Officer / Head of Communications</b>	<b>On-going</b>		
	Review local, regional and national best practice and guidance and consider for NHS Rotherham CCG	<b>Assistant Chief Officer</b>	<b>On-going</b>	H&S Manager to share knowledge and best practice from discussions at other sustainable group	<b>Med</b>

				meetings.	
Carbon / Greenhouse Gases (GHG's)	Work with our landlord to promote the reduction in energy usage. E.g. motion sensor lights in meetings rooms, replacing broken light bulbs with LEDs	<b>Assistant Chief Officer</b>	<b>Mar 2024</b>	Continuation of building user meetings between NHS PS and tenants of Oak House.	<b>Med</b>
	Determine cost per kWh for our energy used, communicate to staff the potential cost savings and reduction in our carbon footprint by turning off lights in meeting rooms	<b>Assistant Chief Officer</b>	<b>Mar 2022</b>	H&S Manager to produce a report to OE when the energy costing's have been obtained from NHS PS	<b>Med</b>
	Consider reducing the thermostat settings by 1°C. This will reduce our emissions to atmosphere and save the CCG money	<b>Assistant Chief Officer</b>	<b>May 2022</b>		



## Appendix D

### Equality Impact Assessment

<b>Title of policy or service</b>	Green Plan	
<b>Name and role of officers completing the assessment</b>	Ian Plummer, Health and Safety Manager	
<b>Date assessment started/completed</b>	October 2020	
<b>Type of EIA completed</b>	Initial EIA ' screening <b>X</b>  'Full' EIA process	

<b>1. Outline</b>	
<p><b>Give a brief summary of your policy or service</b></p> <ul style="list-style-type: none"> <li>• Aims</li> <li>• Objectives</li> <li>• Links to other policies, including partners, national or regional</li> </ul>	<p>The NHS' aim is to reach net zero by 2040, for the emissions we control directly and indirectly with an ambition to reach an 80% reduction by 2028 to 2032. For the emissions we can influence the NHS aims to reach an 80% reduction by 2036 to 2039, with a net zero target by 2045.</p> <p>NHS Rotherham CCG is required to contribute to meeting this target.</p> <p>The aim of the Green Plan is to comply with the NHS Carbon Reduction Strategy for England (2009) which requires the CCG to identify a clear strategy for tackling these significant challenges.</p>

**Identifying impact:**

- **Positive Impact:** will actively promote or improve equality of opportunity;
- **Neutral Impact:** where there are no notable consequences for any group;

- **Negative Impact:** negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible, it is justified, eliminated, minimised or counter balanced by other measures. This may result in a 'full' EIA process.

<b>2. Gathering of Information</b>					
This is the core of the analysis; what information do you have that might <i>impact on protected groups, with consideration of the General Equality Duty.</i>					
	What key impact have you identified?			For impact identified (either positive or negative) give details below:	
	Positive Impact	Neutral impact	Negative impact	How does this impact and what action, if any, do you need to take to address these issues?	What difference will this make?
Human rights		X			
Age		X			
Carers		X			
Disability		X			
Sex		X			
Race		X			
Religion or belief		X			
Sexual orientation		X			
Gender reassignment		X			

<b>Pregnancy and maternity</b>		X			
<b>Marriage and civil partnership</b> (only eliminating discrimination)		X			
<b>Other relevant group</b>					

**IMPORTANT NOTE:** If any of the above results in '**negative**' impact, a 'full' EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.

Having detailed the actions you need to take please transfer them onto the action plan below.

<b>3. Action plan</b>				
<b>Issues/impact identified</b>	<b>Actions required</b>	<b>How will you measure impact/progress</b>	<b>Timescale</b>	<b>Officer responsible</b>

<b>4. Monitoring, Review and Publication</b>				
<b>When will the proposal be reviewed and by whom?</b>	<b>Lead / Reviewing Officer:</b>		<b>Date of next Review:</b>	

Once completed, this form **must** be emailed to Alison Hague, Equality Manager for sign off: [alisonhague@nhs.net](mailto:alisonhague@nhs.net)

<b>Alison Hague signature:</b>	
--------------------------------	--