HUC Green Plan

2022-2025

Our green agenda for 2022-2025

02 Contents

03 Foreword

04 Introduction

05 Delivering Sustainable Healthcare

08 Our Progress to date

09 Our Emissions

16 Our Action Plan

26 Resource and Delivery

28 Governance and Communication

Foreword

David Archer – Chief Executive Officer of HUC

The NHS is one of the largest contributors to global warming and air pollution in the UK. The climate crisis and air pollution status are recognised as a public health emergency, with both having serious consequences for individuals and communities. Disadvantaged and, vulnerable parts of the population are disproportionately affected, and therefore have a worsening impact on health inequalities.

The Government, the entire NHS family, local authorities and other legislative bodies are now increasingly focusing on this issue and the Climate Change Act of 2008 legally compels us to take action as an NHS commissioned organisation.

HUC's carbon reduction strategy has been developed in response to the need for NHS provider organisations to take action on climate change and sets out our ambitions to deliver a net zero outcome.

HUC's vision in respect to sustainability is to be:

A leading provider of high-quality, low-carbon healthcare, which incorporates sustainability and resource efficiency throughout the organisation

We will achieve our sustainability vision by:

- Demonstrating a clear commitment to reducing CO2 emissions and enhancing sustainable delivery throughout our clinical services and business operations.
- Establishing, monitoring and measuring quantifiable CO2 emissions reductions and targets.
- Actively engaging all members, colleagues, and patients in securing carbon reduction and sustainability goals by embedding knowledge and understanding of CO2 emissions and the associated contribution to climate change.
- Effectively monitoring, evaluating, and reporting on our progress
- Securing and maintaining the organisation's reputation as a leading sustainable healthcare provider by effectively engaging, contributing, and reporting on continuous improvement in sustainability performance at a national and local level.

HUC is genuinely committed to being net zero and the challenging NHS climate serves only to reinforce the need to achieve our aims and deliver on our commitments.

I am immensely proud of the initiatives already undertaken by HUC which have had a positive impact on both patient care and the environment as well as the individual carbon reduction measures colleagues reported undertaking at our workshops.

Both I and the Board will give our full support to work together to resource and support our journey to Net Zero carbon

Introduction

Our responsibility

HUC is an NHS service provider that specialises in both Primary Care Services and Integrated Urgent Care, which combines NHS 111 and Out of Hours services with a Clinical Assessment Service. Formed in 2007 as Herts Urgent Care, in 2008 we began offering Out of Hours services in Hertfordshire. Today, HUC, offers a variety of care services to our patients, and business support services to our partners, including: NHS 111, General Practitioner (GP) Out of Hours Service, Luton Town Centre GP Services, and Acute In Hours Visiting Service (AIHVS). We provide access to these high quality services to the communities of Hertfordshire, West Essex, Cambridgeshire, Peterborough, as well as Bedfordshire and Luton.

At HUC we believe in our mission, “to provide high quality, fair, sustainable healthcare services to the communities we serve,” as a result, we will always strive to deliver highly responsive and effective healthcare to our patients with urgent but non-life-threatening conditions. Our three NHS 111 contact centres are located in Welwyn Garden City, Bedford, and Peterborough with 27 treatment centres and a fleet of visiting cars across the communities we serve. Our 1,100 clinical, non-clinical and support employees work tirelessly alongside contracted clinicians serving over 3.5 million people across our patch.

As a close partner of the NHS, we recognise our responsibility to reduce emissions and deliver high quality and sustainable care to our communities, minimising our environmental impact. We are committed to achieving this by embedding sustainability into our core values and thus, by definition, our services.

This Green Plan will illustrate our sustainability goals and strategy for the next three years (2022-25), outlining steps we can take to reduce our emissions as laid out by the baselining exercise we have undertaken, and recommitting us to further action.

Our aim is to reduce our emissions year on year to achieve net zero by **2040** for the emissions we control known as our **Carbon Footprint**, and **2045** for those we have control over known as our **Carbon Footprint Plus** in line with the NHS targets. This Green Plan will build on our previous successes and will be updated and monitored as we progress toward our goals. The structure of our Green Plan is outlined below:

Delivering Sustainable Healthcare

Drivers of sustainability

There are several factors driving sustainability within the NHS which have a direct impact on us at HUC, including legislative requirements, mandatory requirements, international guidance and UK guidance. There are also additional societal, environmental and financial benefits that further bolster our sustainability work in healthcare and drive us forward to set this green plan, such as improving patient health outcomes.

Legislation

The primary legislative driver is the Climate Change Act (2008) that commits the UK to cut its carbon emissions to net zero by 2050. Additional legislation related to sustainability includes the Civil Contingencies Act 2004, the Public Services (Social Values) Act 2012, and the Environmental Protection Act 1990.

International Guidance

There is an abundance of international guidance from the World Health Organisation (WHO) and the Intergovernmental Panel on Climate Change (IPCC) that supports and drives the delivery of sustainable healthcare and sustainable development more generally. For example, the WHO released guidance for climate resilient and environmentally sustainable healthcare facilities and the IPCC recently released is inputting into international negotiations to tackle climate change.

Healthcare Requirements

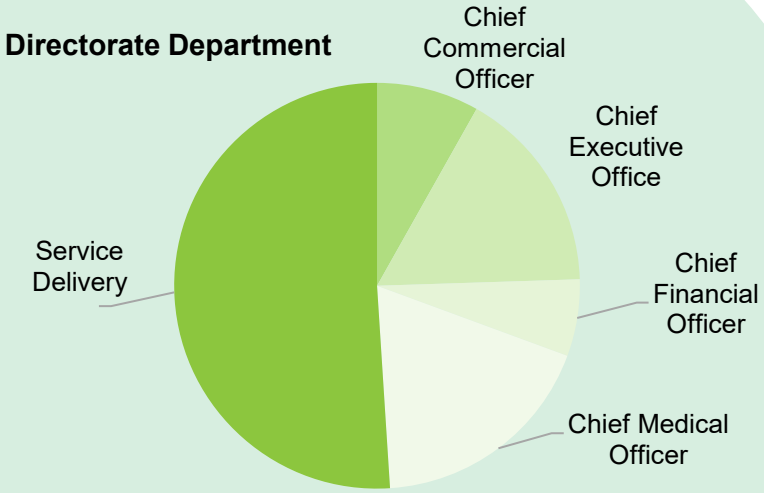
There are several healthcare strategic and policy documents from the Department of Health and NHS England that set out net zero and sustainability priorities; these include the Delivering a 'Net Zero' National Health Service report, the NHS Long Term Plan, the 2021/22 NHS Standard Contract and 2021/22 NHS Planning Guidance. To align with the with the NHS, we must meet the requirements within the Standard Contracts which now include producing a Green Plan to describe actions we will take to improve sustainability. Priorities range from reducing single use plastics to increasing remote outpatient activity.

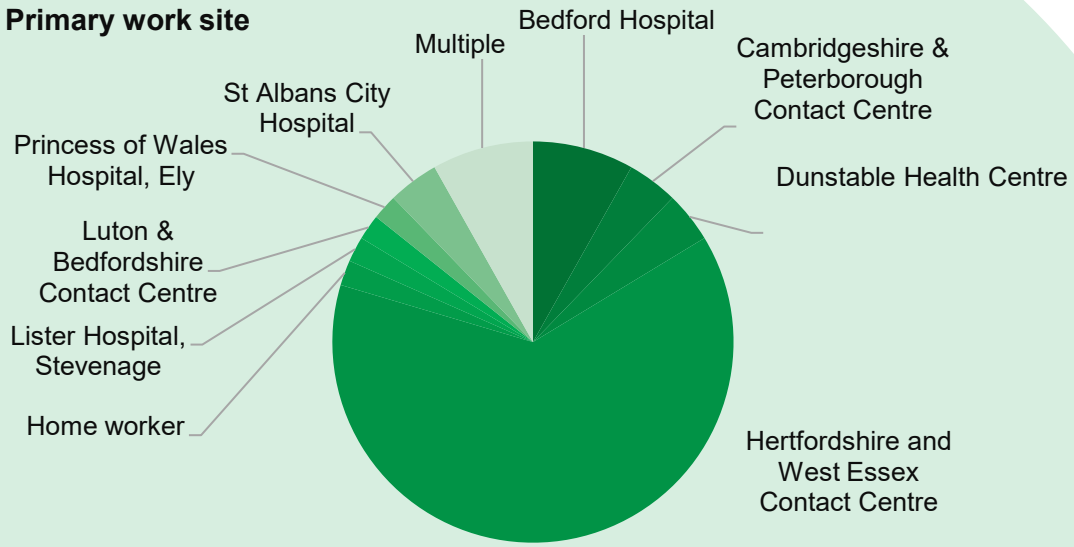
UK Guidance

There is a range of UK guidance and requirements that are also driving the sustainable healthcare agenda. HUC's locations also fall into several councils including Hertfordshire County Council, Cambridgeshire County Council, Central Bedfordshire Council, and Essex County Council who have net zero targets for 2050, 2045, 2030, and 2035 respectively

Our survey results

Feedback from our staff





Analysing 49 responses from our sustainability survey in February 2022 across 13 sites and 5 departments, we found that our colleagues:

- Believe the most important topic to cover in this green plan is Buildings and Utilities
- Want to prioritise sustainable travel planning
- Think the least important action to take is collaborating with partners in the community
- Value small scale waste reduction actions such as increasing recycling bins and replacing disposable cups with reusable ones
- Feel HUC support them to work from home

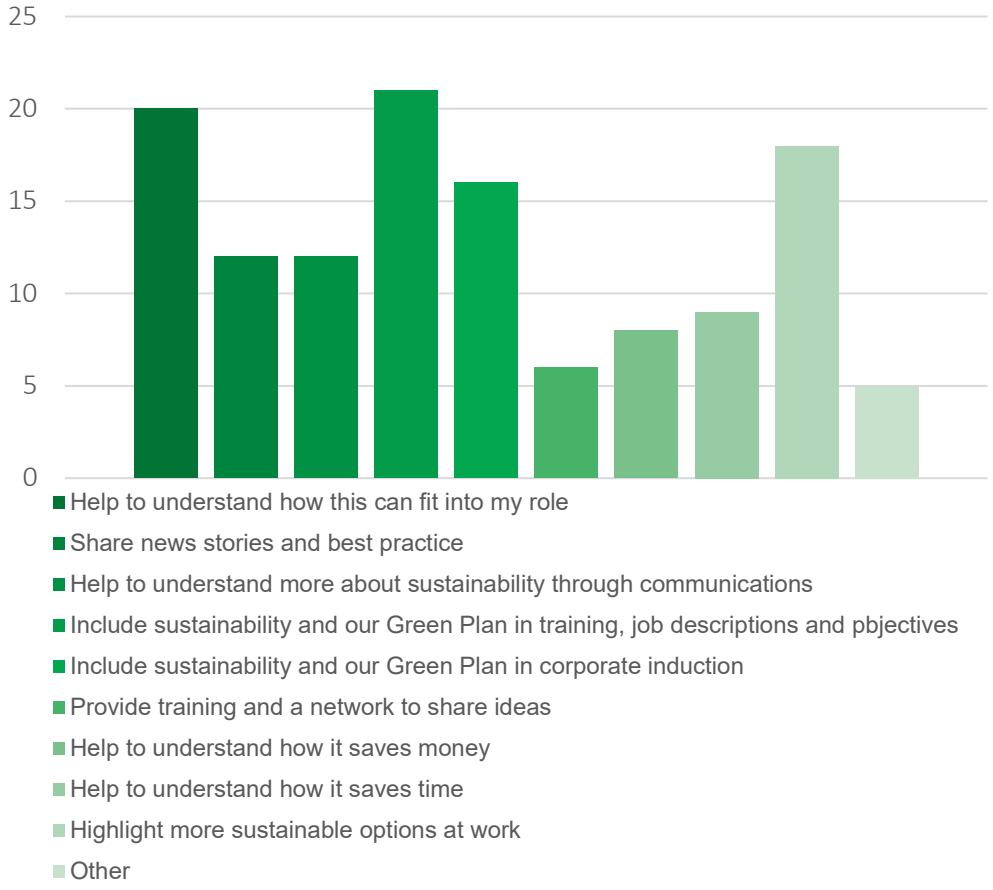
Our survey results

Feedback from our staff

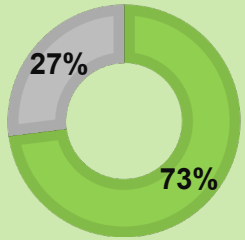
Average score of how sustainable HUC is perceived to be by staff:

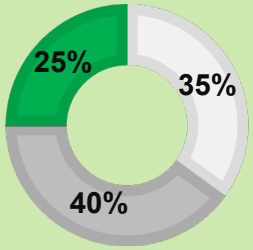
5.3

What would enable staff to be more sustainable at work?



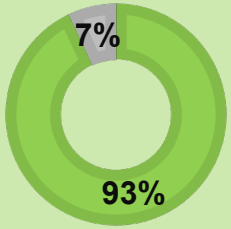
73% of respondents feel supported to work from home and use tele or video conferencing when possible to attend meetings.

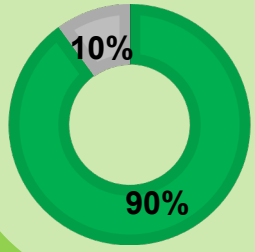




An average of 35% of people felt currently unsupported to take actions to improve sustainability such as segregating waste for recycling, actively travelling to work, and encouraging or contributing to sustainable behaviours, a further 40% of the remaining respondents felt neither supported or unsupported to take these actions.

93% of people feel it is important for HUC to promote good waste management practices.





90% of people think developing a sustainable procurement policy and identifying ways to reduce waste is important.

Our emissions

Targets we need to meet

Carbon Footprint and Carbon Footprint Plus

As outlined, we are driven in part by the Greener NHS campaigns 'Delivering a 'Net Zero' National Health Service' which set out two clear goals for the NHS net zero commitment, including:

- Achieving net zero by 2040 for emissions we control directly – known as our **Carbon Footprint**, with an 80% reduction by 2028-2032
- Achieving net zero by 2045 for those emissions we can influence – known as our **Carbon Footprint Plus**, with an 80% reduction by 2036-2039

Our emissions can be categorised into 3 different scopes:

Scope 1 direct emissions from owned or controlled resources e.g. heating, vehicles we own, on site electricity generation

Scope 2 indirect emissions from the generation of purchased energy e.g. electricity

Scope 3 all other indirect emissions that are associated with producing and transporting goods and services we use e.g. waste management, anything we purchase

In addition to this, the NHS includes emissions from patient and visitor travel within the Carbon Footprint Plus, acknowledging that this is a part of NHS services and can therefore be influenced

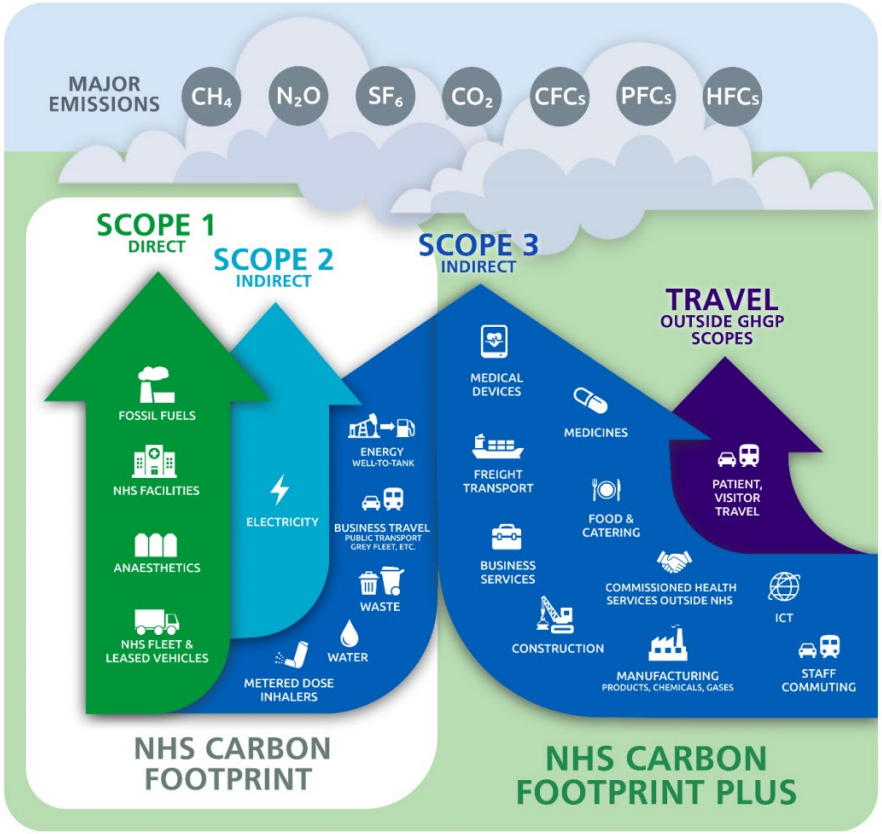


Figure 1: Greenhouse Gas Protocol scopes in the context of the NHS from the 'Delivering a 'Net Zero' National Health Service' report

Our emissions

Carbon Footprint and Carbon Footprint Plus

We calculated our emissions from spend data, benchmarks, NHS ERIC data returns, and through proxies. This was achieved by calculating the emissions associated with the money spent, and through data collected by our staff. We then worked out what emissions one of our contact centres, minor injury units, and GP room sites produced, and multiplied these to estimate the overall emissions of HUC in the absence of any data that could not be collected. This means there could be some inaccuracies, with some assumptions used to produce our end data. However, this still provides us with an overview of our environmental impact and which areas could be improved, and allows us to compare and measure our progress toward net zero carbon

"Establishing, monitoring and measuring quantifiable CO2 emissions reductions and targets is key to achieving our sustainability targets"

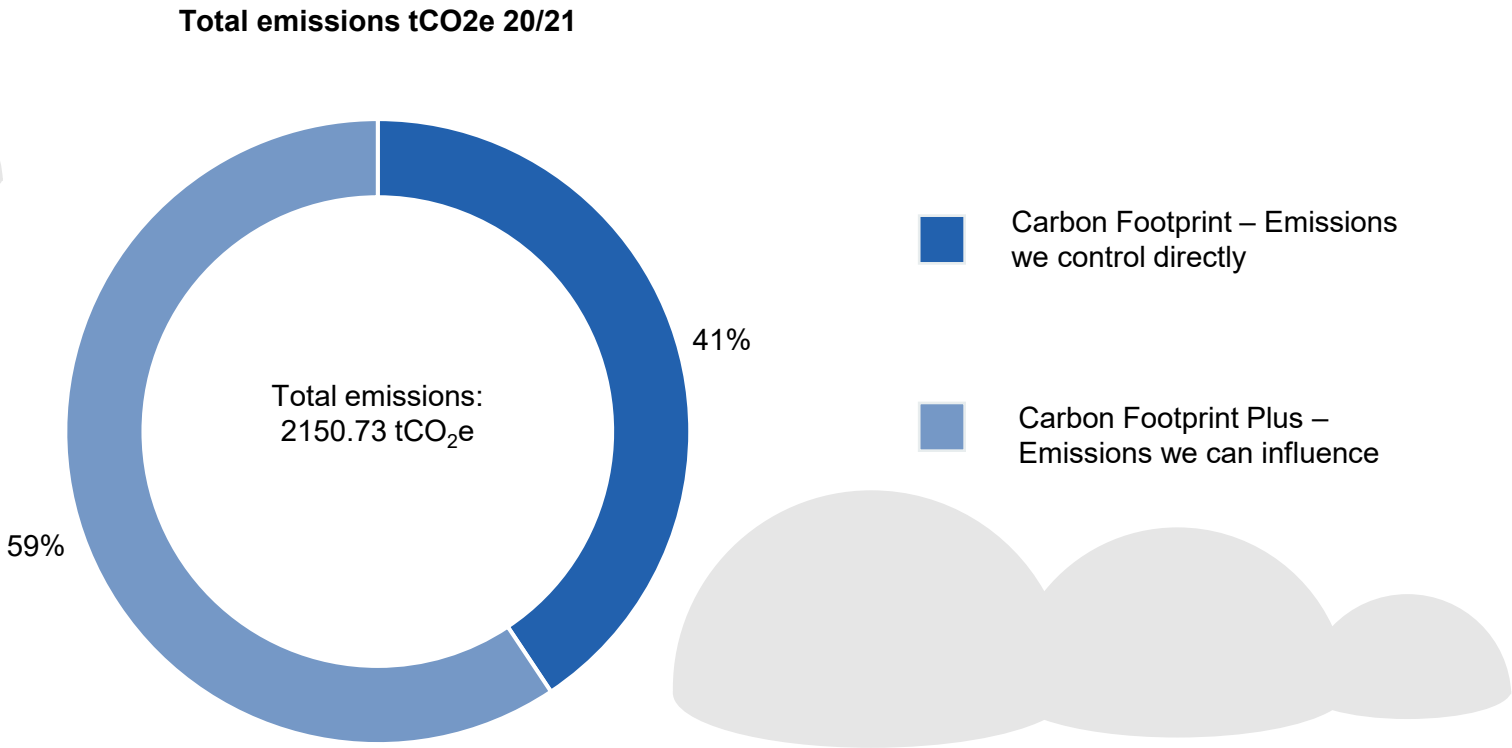


Figure 2: HUC's total emissions in 2020/21

Our emissions

Carbon Footprint and Carbon Footprint Plus

HUC has decided to use 2020/21 as our baseline emission year as this was the year with the most accurate and up to date data available. Our Carbon Footprint including scope one and two emissions totals 913.2 tCO_2e and our carbon Footprint Plus including scope 3 totals 1333.4tCO_2e

Table 1 shows the breakdown of our emissions baseline by our Carbon Footprint and Carbon Footprint Plus Emissions in 2020/21

Carbon Footprint: the majority of our carbon footprint at 16% of our overall emissions comes from fossil fuels used to heat our offices and sites, with a further 8.6% produced by the electricity we use. Transitioning from using these fossil fuels will therefore be key to reducing our carbon footprint.

Carbon Footprint Plus: most of this comes from the purchase of office equipment such as headsets and computers, showing this is a key area to target. Opportunities to reduce these emission will be identified, focused on sustainable procurement practices and use of reduce, reuse, recycle schemes.

This baseline lacks accurate data for emissions tied to business travel as well as patient and visitor travel data and some utility data however plans to develop a robust data collection method will help us improve our baseline and emissions data in the future

The aim of this baseline is to illustrate areas for improvement opportunities, and allows us to shape targets and monitor the progress of the actions proposed within this Green Plan.

Scope	Emissions Category	% of Total
Carbon Footprint	Fossil fuels	16%
	Electricity	8.6%
	Well to tank (inc. transmission & distribution)	6%%
	Anaesthetics	0.13%
	Metered dose inhalers	0.1%
	Water	0.08%
	Business travel	0.5%
	Waste	2.2%
	Fleet & leased vehicles	6.6%
Carbon Footprint	Office and Other Equipment	52%
	Business Services	5.7%
	Wood and Paper Products	1.3%

Table 1: Numerical breakdown of the HUC's emissions baseline (2020/21)

Our emissions

Carbon Footprint and Carbon Footprint Plus

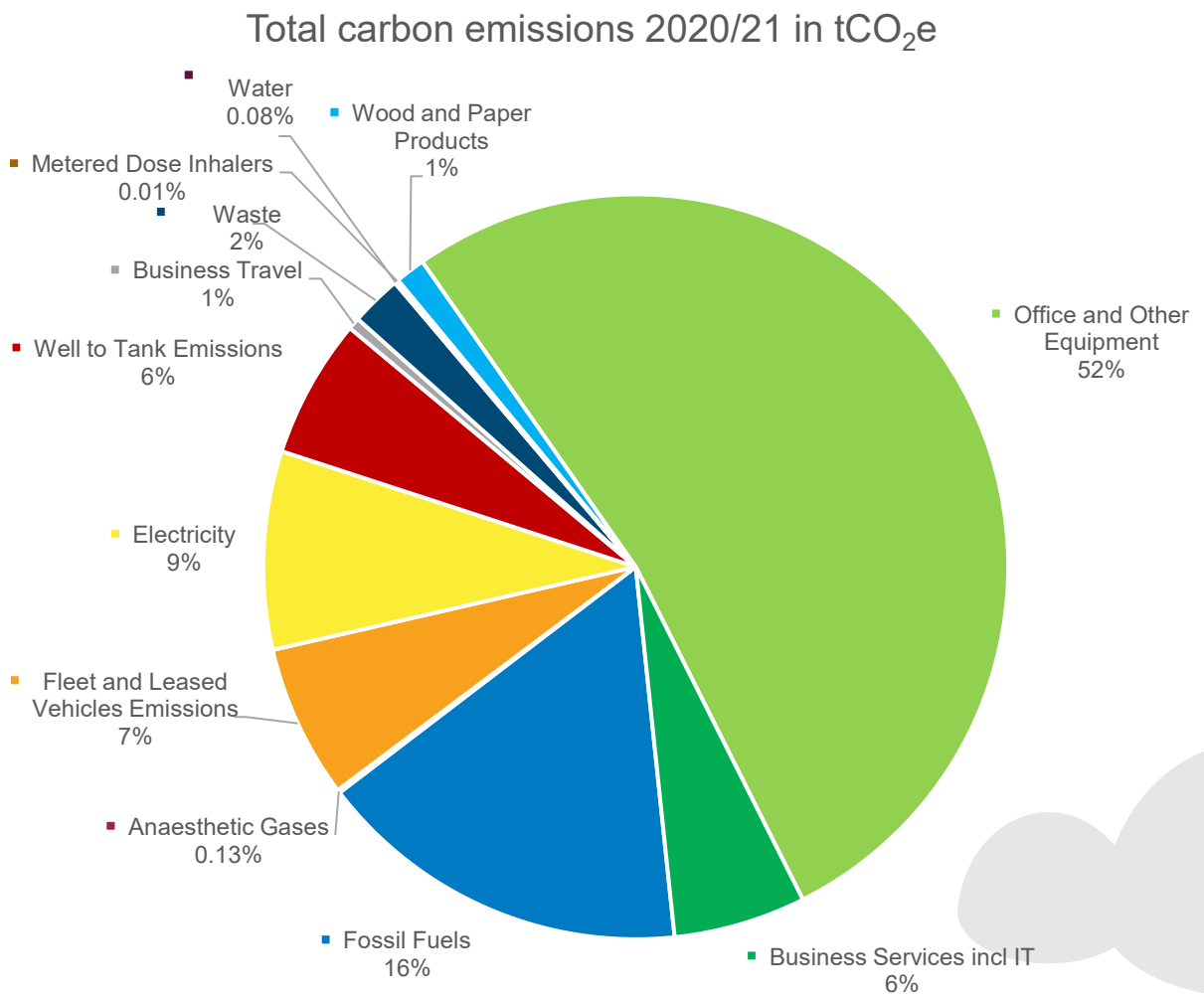


Figure 3: HUC's total emissions in 2020/21 by category

The graph to the left shows a breakdown of HUC's total emissions in 2020/21, clearly illustrating the impact office equipment and fossil fuels have on our total carbon emissions.

As we progress on our net zero carbon journey, the effect of our actions will be reflected in the decreasing proportions of these key areas and an overall reduction.

We have produced this data to the best of our ability, however, due to limitations, our utilities data is an approximation of what we use annually. Due to data limitations we have also been unable to include data on patient travel to our sites as well as staff commutes; activities which would increase our overall emissions if included. We will continue to investigate opportunities to collect this information, as well as reduce our impact through encouraging active travel and the use of public transport.

At HUC, we are committed to understanding our whole environmental impact and will look to improve data collection in the future as we continue on our net zero journey.

Our Emissions

Pathway to Net Zero – Carbon Footprint

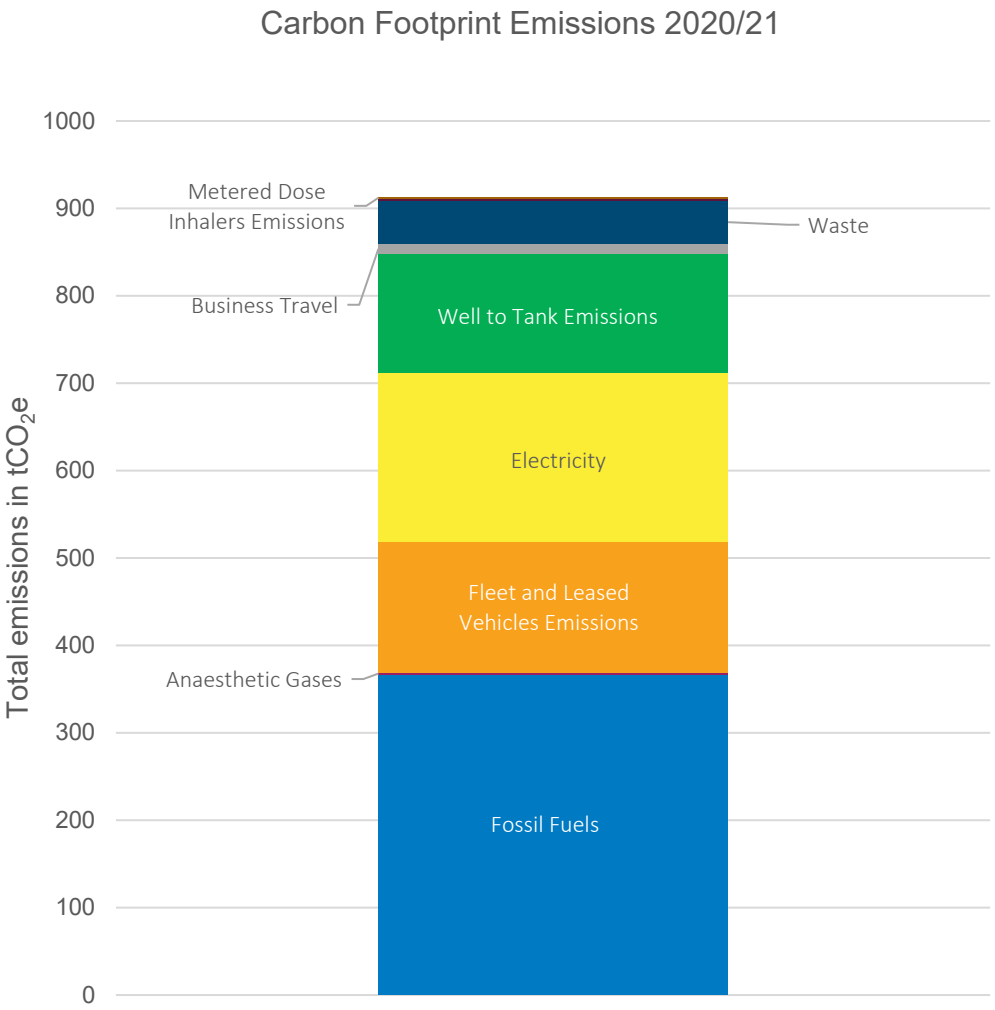


Figure 4: HUC's Carbon Footprint emissions in 2020/21 by category

Our Carbon Footprint equates to 817.32tCO_2e or 38% of our total emissions with fossil fuels as our largest contributor at 17% of our overall emissions and 44% of our Carbon Footprint.

Electricity makes up a further 23.7% of our Carbon Footprint resulting in 67.7% of this Footprint coming from our estate. This data does show we have the opportunity to reduce our use of fossil fuels to make the biggest impact on our emissions, and HUC will work on reducing our demand and decarbonising our energy supply to reduce our emissions significantly.

Water and waste make up a smaller proportion of our Carbon Footprint however continued water and waste management are key to making our services sustainable.

Our fleet also shows room for further work, contributing 12.6% to our Carbon Footprint between our fleet and well-to-tank emissions. This significant proportion of emissions can be targeted using low and zero emission vehicles which we will investigate.

Our Emissions

Pathway to Net Zero – Carbon Footprint Plus

Our Carbon Footprint Plus equates to 63% of our overall emissions or 1333tCO_2e with office and other equipment as our largest contributor at 54% of our overall emissions and 88% of our Carbon Footprint Plus. This shows we have the opportunity to reduce our emissions significantly through more sustainable procurement of office equipment.

The majority of items purchased are electrical products such as computers, monitors, and headsets – essential for our business operations. To tackle this issue we will, focus on reducing high carbon purchases, recycling electronic waste, and purchasing more sustainably.

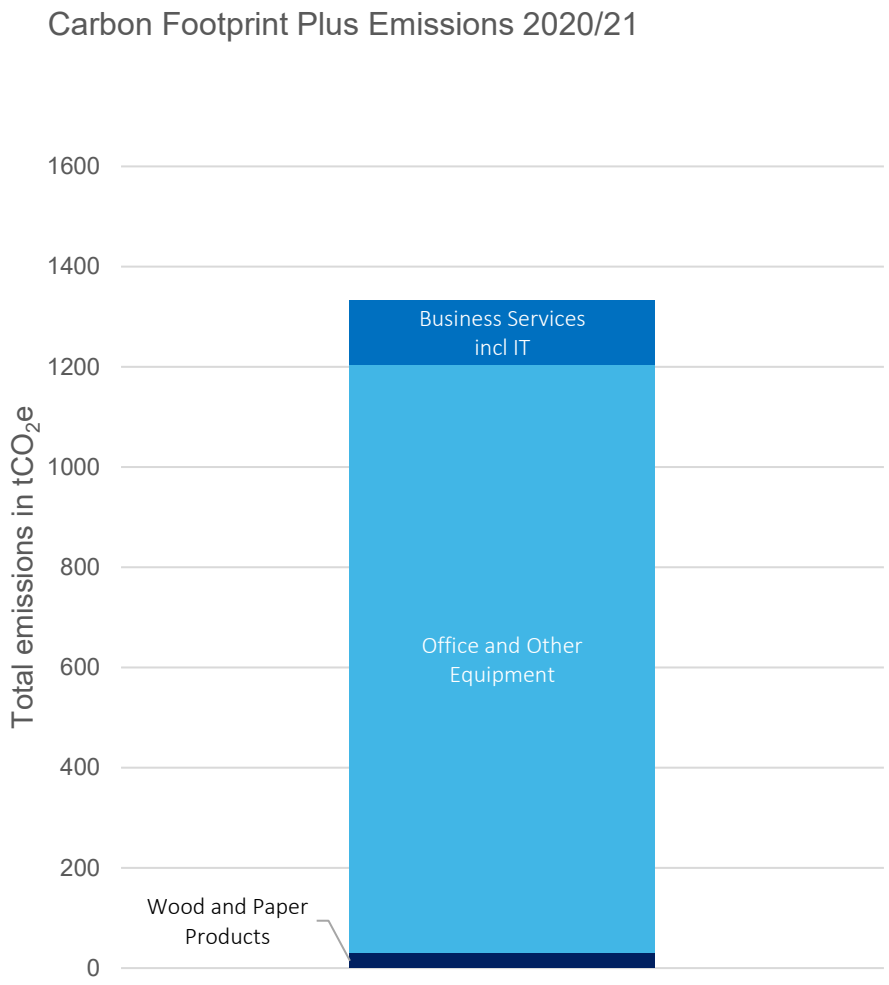
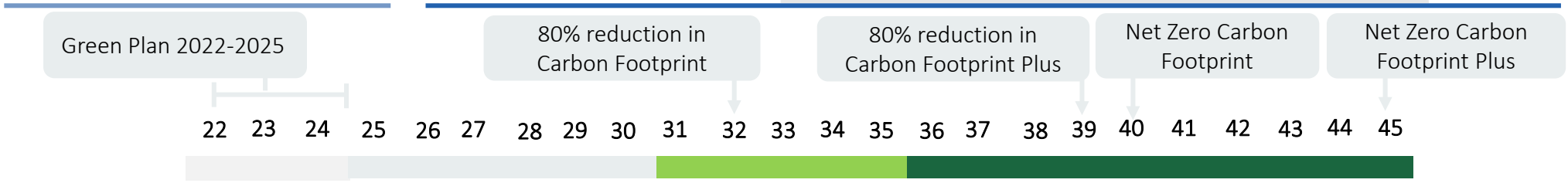


Figure 5: HUC's Carbon Footprint Plus emissions in 2020/21 by category

Our emissions

Pathway to Net Zero



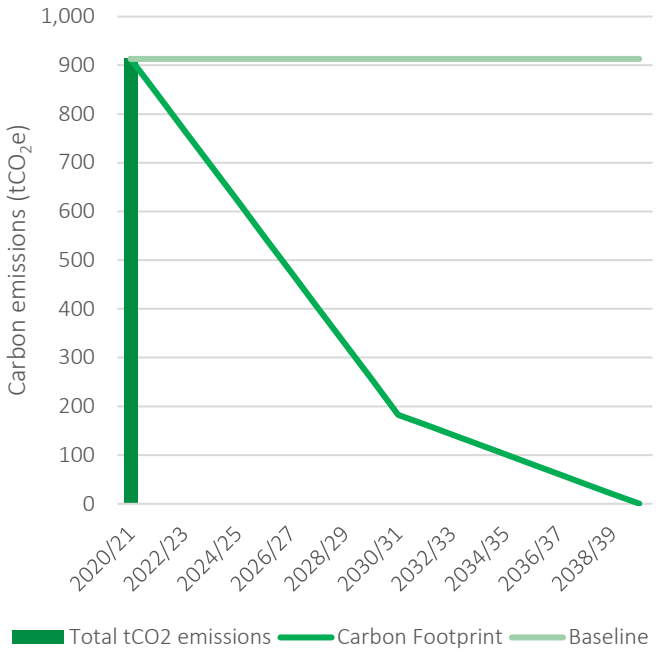


Figure 6: Pathway to Carbon Footprint Net Zero

Our estimated trajectory to net zero is outlined here, and will be used by us to measure our progress against, ensuring we are making sufficient progress. Both pathways show a rapid and steady decrease year on year until 2030 and 2037 respectively when we reach an 80% reduction, before a slower steady decrease to reach net zero in 2040 and 2045 as we implement carbon reduction actions as laid out within this Green Plan. We will also continue to consider the carbon impact of any future projects at HUC, measuring our progress and adjusting our plans and actions as necessary to stay on the current forecasted pathway.

In future years an adjustment may be necessary to accommodate emissions counted toward our total from patient and visitor travel as well as staff commuting, which will increase our Carbon Footprint Plus and require us to make bigger reductions year on year.

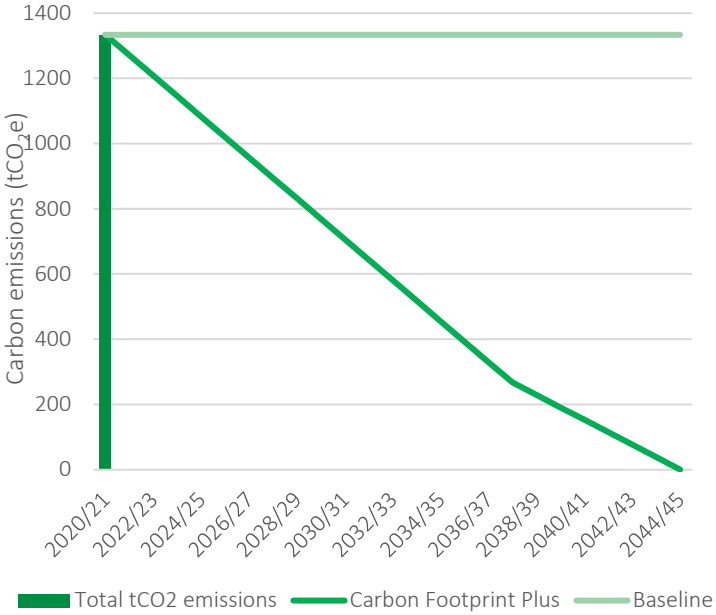


Figure 7: Pathway to Carbon Footprint Plus Net Zero

Our Action Plan

Our Themes

Workforce and Leadership

Our staff are our greatest asset in our net zero journey. We will work together to realise the shared benefits that will come form changing our behaviours

Sustainable Models of Care

We will focus on harnessing existing technology and systems to streamline our service delivery and supporting functions while reducing resource use and emissions

Digital Transformation

We will work with our staff to identify where we could use a more sustainable digital alternative, to educe waste and improve our services

Travel and Transport

By reducing our travel and adopting active or low carbon alternatives, we will reduce our carbon footprint and improve local air quality on our sites

Medicines

Reducing our use of high emission medication such as inhalers and working with suppliers will allow us to lower our emissions

Food and Nutrition

We will encourage sustainable diets to improve the wellbeing of our people, help to prevent diet related illnesses and reduce our environmental impact

Estates and Facilities

We will explore methods to reduce our energy and water use, increase resource efficiency and building performance in collaboration with our landlords

Supply Chain and Procurement

We will embed sustainability within purchasing decisions to not only reduce carbon I our supply chain, but to enhance the social value provided as part of our contracts

Adaptation

We will focus on developing and rolling our adaptation solutions to help reduce climate change related risks, and safeguard the provision of our services

The following pages of our Green Plan detail our approach to achieving our net zero carbon goals, setting out key actions to be implemented across 9 areas of focus, shown above. These actions form the basis of our net zero strategy and span our whole range of services and activities, allowing progress to be made and monitored with frequent reports on progress supported by our robust governance structure as outlined in the Resources and Delivery section of this plan. The actions have been designed based on staff feedback from engagement sessions and survey responses, and show where we can make progress to significantly reduce our carbon footprint.

Our Action Plan

Theme One: Workforce and Leadership

Our staff are our greatest asset in delivering our Green Plan. Embedding a culture of sustainability within HUC will allow us to implement the necessary changes while we continue to provide quality healthcare services.
Whatever their role, our people need to know their own responsibilities under the Green Plan with clear accountability for delivery. Encouraging and educating people by providing opportunities and training will mean a greater uptake of initiatives and lead to the success of this Green Plan by fostering a workplace culture of sustainability. This will be supported by staff networks for sustainability as well as frequent two-way communication within our Staff Forum to allow for feedback and improvements to be made. If everyone makes more sustainable choices every day, the impact will quickly add up to the big change we need to meet our goals.
We will review our governance arrangements to ensure that networks for colleagues are able to contribute to and inform decision-making as we go net zero.

Our priorities

- Ensure all staff are trained in sustainability
- Increase awareness of sustainability
- Lead by example both within the organisation and in our communities

Measuring Success

- Number of staff undertaken sustainability training
- Number of staff with sustainability objectives within their job descriptions, objectives, and annual review
- Number of Social Value/Green Champions

Action	Timeframe
Engage staff in sustainability ambitions	Ongoing
Introduce campaigns such as ‘think before you print’ and ‘digital first’	2022
Allocate an annual budget to Green Plan delivery/sustainability projects	2022/23
Strengthen governance and accountability by establishing a dedicated sustainability sub committee	2022/23
Introduce an annual review and reporting in annual report for sustainability KPIs	2022/23
Continually review funding opportunities e.g. BEIS PSDS funding for decarbonisation of estate	Ongoing
Encourage staff to identify carbon reduction opportunities	Ongoing
Introduce sustainability within job descriptions, staff inductions, and training	2022
Implement a process of upkeep and regular review of Green Plan and associated requirements	2022
Communicate sustainability targets and progress to staff regularly	2022
Share hints and tips to improve sustainability through morning briefings/emails	2022
Integrate sustainability into local objectives and workplans	2022/23
Create robust data collection methods and annual reviews	2022/23

Our Action Plan

Theme Two: Sustainable Models of Care

The long term plan focus is on patient care and outcomes, making the best use of our skilled workforce and ensuring financially sustainable models of care that make the best use of resources. Clinical, financial and environmental sustainability are closely linked, and finding new and improved ways of delivering care will mean saving time and money whilst improving patient care. Finding sustainable ways of providing care will allow us to continue delivering cur services well into the future.

Our Priorities

- Move toward an EV fleet and leased vehicles
- Reduce emissions from our services by optimising travel to home visits and locations of patients care

Measuring Success

- Patient feedback scores (PLACE)
- % of social prescriptions provided

Action	Timeframe
Explore sustainable innovative suppliers to support clinical carbon reduction initiatives	2022
Optimise location of care and support closer to home via coordination with primary care	2022/23
Explore the use of social prescribing where clinically appropriate	2022/23
Develop sustainable quality improvement projects that focus on prevention and health inequalities	2022/23

Our Action Plan

Theme Three: Digital Transformation

Making the best use of digital technology is key to our transformation plans, as we have seen with our greatly successful award winning virtual waiting room. We have ambitious plans to build on these strong foundations to ensure our care models make the best possible use of new technology to improve patient experience and support sustainable models of care (including workforce, financial and environmental sustainability).
Digital transformation will also reduce waste and improve patient experience, streamlining processes such as booking appointments, receiving reminders, and taking notes by using technology as an aid.

Our Priorities

- Minimise in person meetings
- Utilise digital workspaces and software to streamline processes
- Work toward a paperless workplace

Measuring Success

- % of outpatient care delivered remotely
- % of observations digitally recorded

Action	Timeframe
Support digitisation of records, communications and workflow	Ongoing
Increase number of meetings conducted online	Ongoing
Increase patient appointments made by app	2022
Review digital use and efficiency of technologies to reduce energy consumption	2022/23
Increase amount of virtual appointments	Ongoing
Continue increasing use of video calls for meetings and patient care	2022
Reduce access to printers and introduce policy of only printing when absolutely necessary	2022

Our Action Plan

Theme Four: Travel and Transport

Changes to clinical care models, including those enabled by digital transformation will reduce the number of individual patient and visitor journeys and make an important contribution to reducing overall travel related emissions. However, we need to reduce the number of car journeys made by patients, visitors and colleagues when they do need to travel to one of our sites and to promote less carbon intensive modes of travel such as public transport and active travel. These alternative forms of travel offer a multitude of co-benefits. For example, active travel not only reduces emissions, but also improves physical and mental well being, reduces congestion and improves air quality.
Commuting emissions can be tackled by supporting staff to make more environmentally friendly choices such as using active or public transport to get to work, or encouraging the use of low emission vehicles such as electric cars.
We recognise that the future of UK transport is zero-emissions and plan to continue progress towards reducing travel related emissions.

Our priorities

- Reduce commuting emissions through work from home
- Decrease emissions from commuting by encouraging using public transport or active travel through improved facilities such as lockers and showers
- Investigate providing EV charging on site

Measuring Success

- % fleet ULEVs and ZEVs
- Number of cycle storage facilities per member of staff
- Number and % of staff travelling by active and public modes of transport
- Carbon footprint (tCO_2e)

Action	Timeframe
Facilitate further opportunities for homeworking wherever possible	2022
All new purchases and leases are for ULEV or ZEV (90% by 2028)	Ongoing
Run an annual travel survey	Ongoing
Review transport contracts to identify low carbon opportunities	2022/23
Create a 5 year plan for reducing the carbon emissions of our fleet including electrifying fleet and charging infrastructure	2022/23
Run an anti-idling campaign for staff, patient, visitor and ambulances to improve air quality across sites	2022
Review staff parking, business travel and home working policies to reflect our environmental ambitions and priorities	2022/23
Increase number of Electric Vehicles within our fleet and leased vehicles	Ongoing
Explore the provision of electric cargo bikes for transporting goods and services across/between sites	2022/23

Our Action Plan

Theme Five: Medicines

Although little of our emissions come from medication, this is an area in which we can make a difference.

We will continue to explore opportunities to reduce carbon emissions from anaesthetic gases and switching to more environmentally sustainable inhalers where clinically appropriate, as well as reviewing a range of other opportunities to reduce emissions related to medicines including reducing waste and medicines optimisation. Due to the fact that we do not use or dispense large quantities of medication, our focus will be on making sustainable choices and reducing waste where possible.

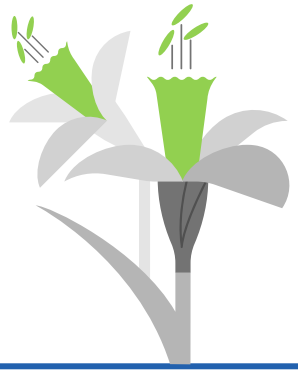
Our priorities

- Reduce wastage of prescription drugs and expired medication
- Reduce packaging waste from medications

Measuring Success

- Annual carbon emissions (tCO_2 and % reduction)
- % reduction in MDI inhalers

Action	Timeframe
Explore recycling initiatives at a company wide level	2022/23
Reduce highly wasted pharmaceutical products and identify products with unnecessary packaging; feeding back to suppliers	2023/24



Our Action Plan

Theme Six: Food and Nutrition

The food we eat has a significant effect on the environment, with wasted food and high carbon foods such as meat contributing significantly to our emissions. Minimising these contributions will be beneficial in many ways, helping us reach our sustainability targets as well as allowing us to make healthier choices to look after our wellbeing.
Food and Catering services contribute little to our emissions, however we can make changes to decrease our carbon footprint and improve health. A healthier more sustainable diet not only has lower emissions but helps to improve the physical wellbeing of colleagues and patients through the prevention of diet-related illness as well as providing wider social benefits for local communities through the procurement of locally sourced food.

Our priorities

- Reduce single use item and packaging waste
- Increase the amount of low carbon food options available on site
- Reduce and reuse food waste

Measuring Success

- Reduction in use of disposables (& eliminating single use plastics)
- Uptake of low carbon meal choices

Action	Timeframe
Eliminate single use plastics where possible within catering	2022
Run an engagement campaign for Nutrition and Hydration week and No Meat May to share knowledge and recommendations to a healthier diet for your mind, body and the environment	2022
Reduce as far as possible single use items such as cups and cutlery, encouraging people to bring in their own reusable items	2022
Use the knowledge of employees to hold workshops about nutrition, low carbon meals, and packed lunch ideas	2022/23 Ongoing

Our Action Plan

Theme Seven: Estates and Facilities

Managing our organisational assets, including buildings and equipment, to reduce our environmental impact will help us achieve our goals of net zero emissions

Estates and facilities account for over 15% of our total emissions, predominantly through energy use. Improving our facilities by making them more efficient to use less energy to heat and light workplaces means less emissions whilst still providing a comfortable workplace. Simple changes such as motion activated lights and turning off computers could contribute to improving energy efficiency, and buying energy from sustainable sources such as renewable electricity will also reduce the emissions associated with running HUC.

How we deal with waste also comes under how we run our facilities. To decrease our environmental impact further we will focus on improving waste disposal and segregation, increasing recycling rates and reducing our total waste produced.

Working from home will be fall under this theme, and we will be investigating the best ways to improve sustainability whilst away from the office, taking responsibility for these emissions in future baselining exercises.

Our priorities

- Improve and increase recycling on site
- Reduce use of single use items and waste
- Improve the energy efficiency of buildings e.g. through LED Lighting

Measuring Success

- Decreased energy consumption: kWh per m2 (of floor area)
- Decreased water consumption: m3 per m2 (of floor area)
- Decreased utility-related CO_2e emissions

Action	Timeframe
Work alongside councils and charities to improve greenspace around sites	2023
Work with landlords to replace all lighting with LED bulbs	2023
Improve waste management and recycling processes	2023
Continue to implement carbon reduction programmes	2023
Maximise smart building systems (BMS) to reduce electricity consumption when not in use	2022/23
Improve waste segregation practices among staff via the provision of training and resources e.g. posters or labelling, more bins	2022
Provide recycling bins for food and associated packaging	2022

Our Action Plan

Theme Eight: Supply Chain and Procurement

The vast majority of our total carbon footprint is accounted for via goods and services purchased from an array of suppliers – from electricity and electrical goods to medical products. We aim to use our procurement process to improve sustainability by making choices with environmental and social impact in mind. By focusing on sustainability while purchasing we can contribute to net zero goals choosing suppliers who reduce emissions associated with every step of the procurement process from manufacturing, to transport, to disposal of goods. Our purchasing decisions are therefore of fundamental importance and encouraging suppliers to improve the environmental sustainability of products offered to us will be essential to delivery of the overall HUC net zero commitment. This may mean finding more sustainable and ethical suppliers, procuring reusable products over single use, and working with suppliers to improve packaging options.

Our priorities

- Work with suppliers who have green credentials
- Increase the proportion of recycled or recyclable products purchased

Measuring Success

- % contracts with social value
- Carbon footprint tCO_2e
- % contracts with net zero targets aligned with NHS 2040

Action	Timeframe
Implement a requirement for environmental considerations for purchase and disposal of goods	2022
Include a minimum of 10% social weighting in contracts	2022
Redistribute surplus items throughout the organisation	2022
Ensure unneeded furniture is sold or donated rather than disposed of	Ongoing
Switch single use plastic products with recycled or reusable alternatives where possible	2022
Continue to improve compliance and monitoring for procurement processes i.e., the Procure to Pay policy stipulates that we should look to reuse before buying new	Ongoing
Continue to reduce the use of “single use instruments”	Ongoing
Purchase 100% recycled content paper	2022
Use paper only when absolutely necessary or requested by a third party	2022/23
Introduce a remanufacturing device collection and reuse programme	2022

Our Action Plan

Theme Nine: Adaptation

Even with current national and global commitments, we are set to reach 1.5 °C of global warming between 2030 and 2052. The Intergovernmental Panel on Climate Change (IPCC) report that this warming will lead to increased risks to health, livelihoods, food security, water supply, human security and economic growth. In this context we must build resilience and adaptation into our sustainability programme. Increased occurrences of extreme weather events will likely pose disruption to clinical activity via three main aspects: restrictions in the availability of clinical environments during extreme events (overheating or flooding); barriers to business-as-usual continuing for supply chain partners and direct clinical service impacts of severe weather upon our colleagues and the local community, thereby creating system pressures.

In relation to climate change the key challenges we have experienced over recent years have related to heat waves, and to a lesser extent very cold weather and heavy rainfall.

Climate adaptation plans will be developed for all of our sites to assess any short-term opportunities for improvement on site

Our priorities

- Prepare for as many likely scenarios as possible
- Ensure buildings and facilities are resistant to future changes

Measuring Success

- Staff attending climate adaptation working group sessions
- Number of climate risks identified in risk assessment
- Number of people trained in climate adaptation

Action	Timeframe
Collaborate with local Councils and partners to align mitigation measures and enhance adaptation approach	2022
Develop a Climate Change Risk Assessment (CCRA) and Climate Change Adaptation Plan to mitigate against risks to continuity and resilience of services	2023/24
Identify climate projections on HUC sites and serving populations	2023
Ensure building designs allow for optimum resource efficiency and materials use, avoiding over-engineering, whilst allowing for flexibility and future adaptability	Ongoing
Increase and improve contingency planning	2022/Ongoing

Resources and Delivery

Reporting

To enact change it is vital to keep up to date with progress made and report this information to allow stakeholders to engage with it, providing feedback and allowing the organisation to respond and react to any problems to continue driving change and developing updated plans of action. This progress made should be reported against targets, objectives and actions that have been made in order to produce a consistent log of completed actions or targets to enable continuous improvement and allow for frequent reminders and refocusing on aims.

HUC's annual reports should include a sustainability section, overseen by the sustainability committee and including progress and targets for the next year.
This Green Plan will be reviewed annually to ensure changes have been put in place and are progressing, and will be renewed by 2025 with updated targets and actions.

Key KPI's will also be tracked and reported monthly, overseen by the sustainability committee.

Potential Partnerships

Working with local councils and organisations could help us deliver our Green Plan, particularly by enhancing public and active transport routes to reduce commuting and patient travel emissions. The following shows several current projects that HUC could partner with to help meet our goals.

- Hertfordshire County Council Air Quality Strategy – the council aims to increase active transport, reduce car idling, and improve public transport
- Hertfordshire Intalink Enhanced Partnership - improving bus links county wide to encourage use of public transport
- Essex County Council are to introduce cycling paths along key routes and are taking suggestions on where to put them
- Smarter Travel for Essex Network – provides support to organisations for car park management, and making alternative travel modes attractive for employees, including access to many resources
- Central Bedfordshire – aim to enable a network of EV charging, working with partners and installing along highways, and are taking suggestions on charger placements
- Central Bedfordshire – investing in active and public transport network, increasing connectivity between towns and between places of employment – could connect to hospital sites
- Cambridgeshire County Council – improving EV charging point access as well as active and public transport within their Action Plan
- Peterborough Travel Choice – provides a resource on green and active travel for Peterborough including e-bikes for Key Workers, and is collecting input on EV charging points for the city

Resources and Delivery

Good leadership means that sustainability can be integrated into our way of working and the services we provide by providing support to our workforce. Having a governance structure allows the strategy to be implemented and for reporting to be effective, ensuring accountability for the process and for the organisations to make the changes they committed to. This kind of structure also facilitates good reporting and communication practices as feedback can be collected and implemented, and there are advocates to support the delivery and data collection of the plan.

HUC has recently introduced committee boards across key workstreams, including a Growth and Development committee. This committee will have a sub group for sustainability to focus on the delivery of this Green Plan, meeting quarterly. Communication between the sustainability sub group and all other workstreams is vital for carrying out changes, monitoring, and reporting progress. We will be adding sustainability as a rolling agenda item into all committee meetings.

As the programme progresses, the sustainability committee can form “task and finish” groups (as required) to enable long term expansion and development of sustainability across HUC. These working groups will also ensure that sustainability is applied to any past or future activities with a review every quarter. Consideration will be given to recruiting a full-time sustainability manager to lead the delivery of the plan.

The Staff Forum will be used to support the delivery of key messages within teams and support the education and awareness of sustainability and green issues within HUC, as well as social value champions in each department who will support this agenda.

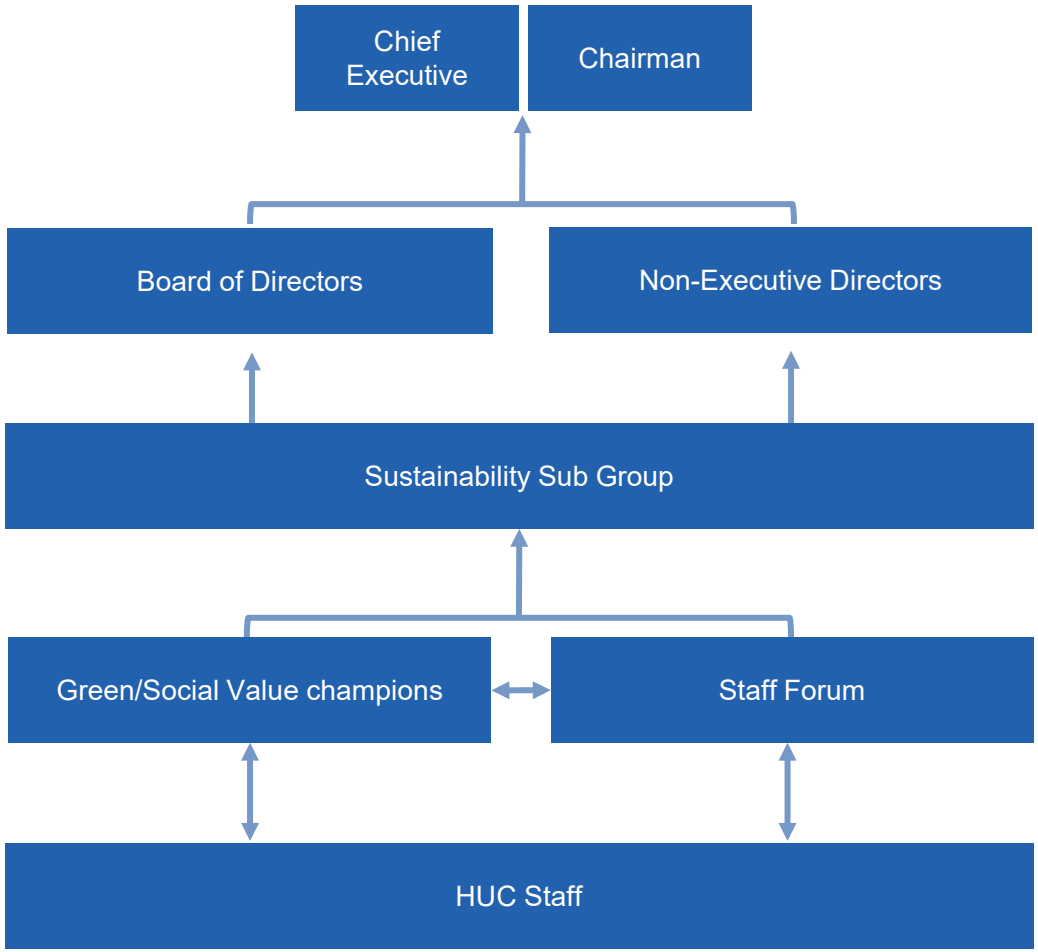
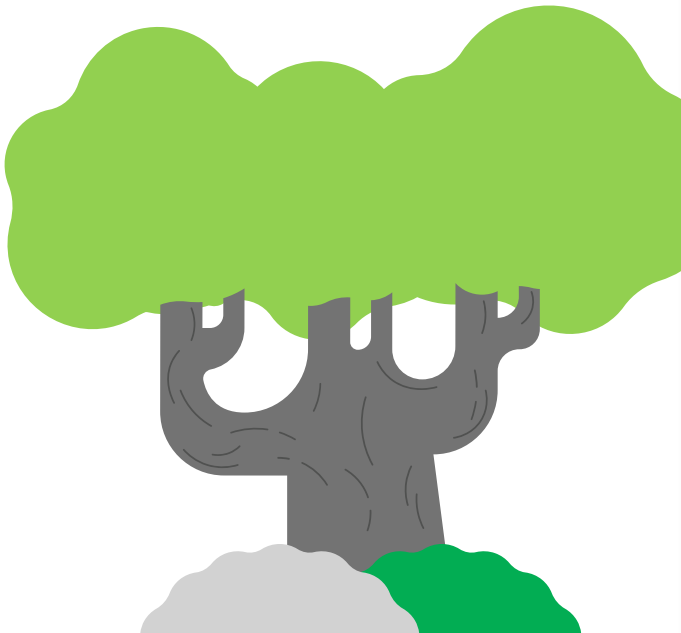


Figure 8: HUC’s Sustainability Governance and Leadership Structure

Appendix

Glossary

BMS	Building Management System
CCRA	Climate Change Risk Assessment
CHP	Combined Heat and Power Plant
CO_2	Carbon Dioxide, a common greenhouse gas that contributes to global warming
CO_2e	Carbon Dioxide and equivalent Greenhouse Gases
ERIC	Estates Returns Information Collection
EV	Electric Vehicle
IPCC	Intergovernmental Panel on Climate Change
KPI	Key Performance Indicator
kWh	Kilowatt hours, a measure of energy used
LED	Light-emitting diode
MDI	Metered Dose Inhalers
PLACE	Patient-Led Assessments of the Care Environment
Procurement	The process used to purchase goods and services
PSDS	Public Sector Decarbonisation Scheme
Social Value	Benefits from contracts that improve the economic, social and environmental wellbeing of people and communities
tCO_2e	Tonnes of Carbon Dioxide and equivalent Green House Gases
ULEV	Ultra Low Emissions Vehicle
WEE	Waste Electrical and Electronic Equipment recycling
ZEV	Zero Emissions Vehicle



Appendix 1

Carbon emissions breakdown

This table shows the total amount of emissions for each category that we were able to collect and analyse, and the percentage of the total emissions that this category represented.
We have produced this data to the best of our abilities, however, due to limitations, our utilities data is an approximation of what we use annually. Due to data limitations we have also been unable to include data on patient travel to our sites as well as staff commutes; activities which would increase our overall emissions if included.

Scope	Emissions Category	Emissions (tCO_2e)	% of Total
Carbon Footprint	Fossil fuels	366	16.3%
	Electricity	193	8.6%
	Well to tank (inc. transmission & distribution)	136	6%
	Anaesthetics	3	0.13%
	Metered dose inhalers	2	0.1%
	Water	1	0.08%
	Business travel	12	5%
	Waste	50	2.2%
	Fleet & leased vehicles	150	6.6%
Carbon Footprint	Office and Other Equipment	1175	52.3%
	Business Services	129	5.7%
	Wood and Paper Products	29	1.3%

Table 2: Numerical breakdown of the HUC's emissions baseline (2020/21)

Appendix 1

Carbon emissions methodology

			Electricity			Fossil Fuels	
Site type	Site name	Size (m2)	Benchmark for typical use	Benchmark typical (kwh/m2/year)	total electricity kwh/year	Benchmark typical (kwh/m2/year)	total fossil fuel kwh/year
Call centre/HQ	Cambridgeshire and Peterborough Call Centre	609.93	Air conditioned standard office	178	108567.54	226	137844.18
	Welwyn Garden City	1792		178	318976	226	404992
	Bedfordshire Call Cantre	566.1		178	100765.8	226	127938.6
				Electricity total Call centre	528309.34	Fossil fuels Total Call Centres	670774.78
GP/MIU	Luton Town Centre	856	cottage hospital	78	66,854	492	420,981
	Cheshunt	856		78	66,854	492	420,981
				Electricity Total GP/MIU	133,707	Fossil Fuels Total GP/MIU	841,962
Exam/Office Room sites	HHGH (hemel)	95.68	clinic	70	6,698	200	19,136
	Addenbrooke's Hospital	95.68		70	6,698	200	19,136
	Bedford Hospital	95.68		70	6,698	200	19,136
	Borehamwood	95.68		70	6,698	200	19,136
	Doddington Hospital	95.68		70	6,698	200	19,136
	Dunmow Community Clinic	95.68		70	6,698	200	19,136
	Dunstable Health Centre	95.68		70	6,698	200	19,136
	Hertford County Hospital	95.68		70	6,698	200	19,136
	Herts & Essex Hospital	95.68		70	6,698	200	19,136
	Hinchingbrooke Hospital	95.68		70	6,698	200	19,136
	Ivel Medical Centre Biggleswade	95.68		70	6,698	200	19,136
	Lister Hospital	95.68		70	6,698	200	19,136
	Lister Medical Centre	95.68		70	6,698	200	19,136
	Loughton Health Centre	95.68		70	6,698	200	19,136
	North Cambridgeshire Hospital	95.68		70	6,698	200	19,136
	Ongar Health Centre	95.68		70	6,698	200	19,136
	Peterborough City Hospital	95.68		70	6,698	200	19,136
	Princess of Wales Hospital	95.68		70	6,698	200	19,136
	QEII Hospital	95.68		70	6,698	200	19,136
	Saffron Walden Community Hospital	95.68		70	6,698	200	19,136
	St Albans City Hospital	95.68		70	6,698	200	19,136
	St Margarets Hospital	95.68		70	6,698	200	19,136
	Stansted Surgery	95.68		70	6,698	200	19,136
	Waltham Abbey Health Centre	95.68		70	6,698	200	19,136
	Bridgewater Surgery	95.68		70	6,698	200	19,136
				Electricity Total Offices	167440	Fossil Fuels Total Offices	478,400
				Grand total	829456.54	Grand total	1,991,136

Table 3: Methodology for Utilities usage 2020/21

This chart shows the breakdown of the methodology used to calculate HUCs electricity and fossil fuel use which was converted into tonnes of carbon dioxide equivalent for the baseline. The size of each call centre was given by floor plans of each building, as was Luton Town Centre GP, and the areas of the space used by HUC within HHGH was calculated from a floor plan. This area was assumed to be approximately the same for each office space used across other hospitals and medical centres. A benchmark for typical use of office space, clinics, and cottage hospitals was used for their respective categories to produce an estimate of electricity and fossil fuels used by the buildings per square meter of space per year.

Appendix 1

Carbon emissions methodology

Site type	Site name	Size (m2)	Clinical waste incineration (tonnes)	Clinical waste alternative treatment	Offensive waste	Domestic waste landfill	Domestic waste recycling tonnes	Domestic waste incineration tonnes	WEEE tonnes	Confidential waste tonnes
Call centre/HQ	Cambridgeshire and Peterborough Call Centre	609.93	0.00021318			1.7544	0.73066		432.48	945.54
	Welwyn Garden City	1792	0.000627	0	0	5.16	2.149	0	1272	2781
	Bedfordshire Call Centre	566.1	0.00019437			1.5996	0.66619		394.32	862.11
GP/MIU	Luton Town Centre	856	4.05	0	0	0	1	13.439	0	0.000672
	Cheshunt	856	4.05	0	0	0	1	13.439	0	0.000672
Exam/ Office Room sites	HHGH (Hemel)	95.68 - 0.23% of GIA	0.026	0.025	0.019	0	0.029	0.021	0	0.018
	Addenbrooke's Hospital	95.68	0.043	0.201	0.041	0	0.040	0.136	0	0.058
	Bedford Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Borehamwood	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Doddington Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Dunmow Community Clinic	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Dunstable Health Centre	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Hertford County Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Herts & Essex Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Hinchingbrooke Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Ivel Medical Centre Biggleswade	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Lister Hospital	95.68 - 0.12% of GIA	0.033	0.563	0.070	0	0.017	0.328	0	0.039
	Lister Medical Centre	95.68 - 8.17% of GIA	0.043	0.201	0.041	0	0	0	0	0.058
	Loughton Health Centre	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	North Cambridgeshire Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Ongar Health Centre	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Peterborough City Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Princess of Wales Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	QEII Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Saffron Walden Community Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	St Albans City Hospital	95.68 - 0.45% of GIA	0.071	0.015	0.035	0	0.074	0.060		0.117
	St Margarets Hospital	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Stansted Surgery	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Waltham Abbey Health Centre	95.68	0.043	0.201	0.041	0	0	0	0	0.058
	Bridgewater Surgery	95.68	0.043	0.201	0.041	0	0	0	0	0.058
		Totals:	9.1858	5.03914	1.04	8.514	6.569	30.291	2098.8	4590.11

Table 4: Methodology for Waste Emissions 2020/21

Table 4 illustrates the methodology used to calculate the amount of waste each HUC site produced in one year. Area of each site was calculated, and waste data for the last year gathered from 7 sites. Each of the three categories of sites had a reliable source of waste data which we used to generalise to each other site within the same category. The average percentage of area that our sites cover within the larger area of hospitals was used to multiply average waste data for hospitals, to produce a number that represented how much waste we create based on area we use. The same process was used for our call centres offices, using data collected in Welwyn Garden City and multiplying it using floor space to create an approximation of waste produced at Cambridgeshire and Peterborough Call centre and Bedfordshire Call Centre. Cheshunt surgery was assumed to create as much waste as Luton Town Centre GP, and so this data was used for both sites.

Appendix 1

Carbon emissions methodology

Site name	Size (m2)	Water baseline for offices - m3 per m2 per year	Water use from ERIC whole hospital	Total water use (m3) per year
Cambridgeshire and Peterborough Call Centre	609.93	0.55		335.4615
Welwyn Garden City, Herefordshire and west essex call centre / HQ	1792	0.55		985.6
Bedfordshire Call Centre	566.1	0.55		311.355
Luton Town Centre	856	1.24		1061.44
Cheshunt	856	1.24		1061.44
HHGH (hemel)	95.68 - 0.23% of GIA		30189	34.71735
Addenbrooke's Hospital	95.68			62.07202
Bedford Hospital	95.68			62.07202
Borehamwood	95.68			62.07202
Doddington Hospital	95.68			62.07202
Dunmow Community Clinic	95.68			62.07202
Dunstable Health Centre	95.68			62.07202
Hertford County Hospital	95.68			62.07202
Herts & Essex Hospital	95.68			62.07202
Hinchingbrooke Hospital	95.68			62.07202
Ivel Medical Centre Biggleswade	95.68			62.07202
Lister Hospital	95.68 - 0.1167% of GIA		159697	93.1832
Lister Medical Centre	95.68 - 8.17% of GIA			62.07202
Loughton Health Centre	95.68			62.07202
North Cambridgeshire Hospital	95.68			62.07202
Ongar Health Centre	95.68			62.07202
Peterborough City Hospital	95.68			62.07202
Princess of Wales Hospital	95.68			62.07202
QEII Hospital	95.68			62.07202
Saffron Walden Community Hospital	95.68			62.07202
St Albans City Hospital	95.68 - 0.45% of GIA		25918	58.3155
St Margarets Hospital	95.68			62.07202
Stansted Surgery	95.68			62.07202
Waltham Abbey Health Centre	95.68			62.07202
Bridgewater Surgery	95.68			62.07202
			Total:	5307.097

Table 5: Methodology for Water use 2020/21

Table 5 shows how the size in meters square was used to calculate an estimate of water use per site. We used a benchmark for amount of water used by an average office and minor injury unit to calculate the usage of our call centres and minor injury units/GP surgeries. For our hospital and medical centre sites, data collected from 3 hospitals was used, an average found, and applied to other sites using the area in meters squared that each site used in their respective hospitals. These totals also account for the fat that our sites are used for roughly 12 hours a day whilst the hospitals run for 24 hours a day.