





great people great place

Contents

Our Mission	3
Organisational Vision	7
Workforce and System Leadership	12
Sustainable Models of Care	25
Digital Transformation	28
Travel and Transport	30
Estates and Facilities Management	37
Capital Projects	47
Biodiversity and Greenspace	49
Medicines	51
Supply Chain and Procurement	56
Food and Nutrition	62
Climate Adaptation	65
Summary	67
Contact Us	68



Our mission

Sustainability at the Isle of Wight NHS Trust

The Isle of Wight NHS Trust has an ambition to become one of the biggest leaders of sustainable healthcare in the country. We understand that climate change and human health are inextricably linked and the importance of the role we play is understood. We acknowledge that we have a duty to take steps to reduce our impact wherever possible, and whilst doing so ensure that we can continue to provide quality care for current patients and future generations.

As a combined Trust representing acute, community, mental health, and ambulance services, we are aware that our impact is likely to be quite significant. Serving an Island population of 140,000, handling over 22,685 admissions a year, with 220,000 patients, and operating 16 sites, we have a huge responsibility to ensure that our operations have a minimal impact upon the environment, and the Island ecosystem overall.

The Isle of Wight is also a **Biosphere Reserve**, and we understand the importance of this designation and are prepared to contribute and uphold the values that are aligned with this prestigious honour to ensure that the Isle of Wight continues to lead the way in sustainable development.

Historically the Trust has been committed to the values driven by sustainable development, evidenced by numerous awards and achievements over the years. In 2015 the Trust e Award, gained Highly

won the Zero Waste Award, gained Highly Commended in the NHS Sustainability Awards, and won Healthcare Recycler of the Year at the National Recycling Awards for ground breaking work with waste prevention and recycling.

To continue and build on this vital body of work, we are proud to present our inaugural Green Plan; a comprehensive, bold sustainable development strategy that will highlight how we will play a vital part in supporting the NHS in becoming the world's first net zero health service.





Climate change and healthcare

Delivering a net-zero national health service

Sustainability is defined by the United Nations Brundtland Report, 'Our Common Future' as 'development that meets the needs of the present without compromising the ability of future generations to meet their own needs...'. As an NHS Trust we have an obligation to ensure that we can continue to provide quality care for our patients, whilst having a minimal impact. We must not forget that the climate emergency is also a health emergency.

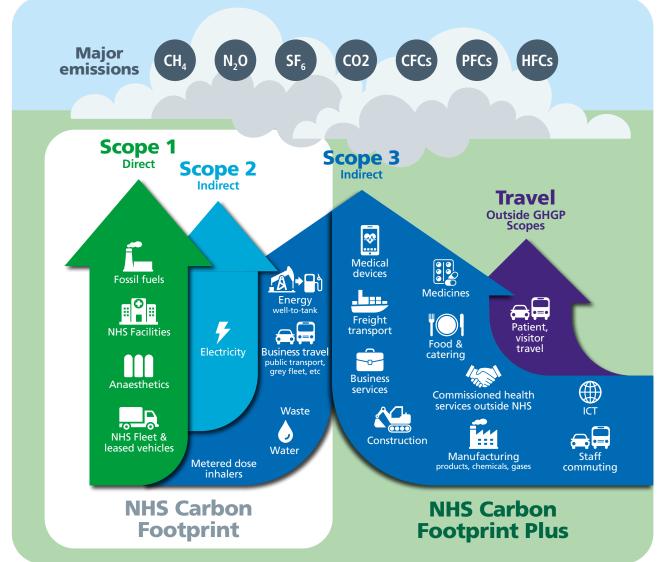
This was further emphasised by Sir Simon Stevens former NHS Chief Executive who stated that, "The climate emergency is also health emergency. Unabated it will disrupt care and affect patients and the public at every stage of our lives. With poor environmental health contributing to major diseases, including cardiac problems, asthma and cancer, our efforts must be accelerated." This highlights how urgent our mission is, not just for the climate, but for society, and most of all our patients.

In October 2020, the NHS became the first in the world to commit to delivering a net zero national health system. This meant that the NHS had committed to reducing harmful carbon emissions and investing in efforts that remove greenhouse gases from the atmosphere. With around 4% of the country's carbon emissions, and over 7% of the economy, the NHS has an essential role to

play in meeting the net zero targets set under the **Climate Change Act 2008**. To achieve this goal, the NHS have set two targets.

(the NHS Carbon Footprint), the NHS aim to meet the net zero target by 2040, with an ambition to reach 80% reduction by 2028 to 2032. For the emissions that the NHS can influence **(the NHS Carbon Footprint Plus)**, the NHS will reach net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

Figure 1. Infographic depicting the overall NHS Carbon Footprint (Delivering a Net Zero NHS, 2020)





Sustainable Development Goals

Without sustainable development this objective is simply not possible. The three pillars of sustainability represent societal, environmental, and economic balance. Without this balance climate change continues to be a dangerous immanent threat to life as we know it.

The 17 Sustainable Development Goals (SDGs) were set by the UN in 2015 and adopted by all UN Member States. The SDGs underpin and support this aim to achieve this balance to work toward a 'more inclusive, sustainable, and prosperous world that leaves no-one and nowhere behind by 2030'.

The SDGs form the basis of our journey to net zero and will form the baseline of our Green Plan.

Figure 2. UN Sustainable Development Goals





































Organisational Vision

Our plan

Great People, Great Place

Our Green Plan sets out our sustainability strategy for the next 3 years in addition to forming our initial baseline for the next 23 years to ensure our transition to net zero. The Green Plan will embody our Trust vision for 'high quality, compassionate care that makes a positive difference to our Island community'; and our mission 'to make sure that our community is at the heart of everything we do. Our values for Compassion, Accountability, Respect, and Everyone counts will be at the heart of this plan alongside the '4 Ps' that are the key drivers to ensure the realisation of our mission, Performance, People, Partnerships and Place. The 'Great People, Great Place', organisational vision complements our sustainability objectives and obligations and will help drive our journey to net zero.



Our main objectives as part of the '4 Ps' are:

- To deliver high quality compassionate care
- To make sure our services are clinically and financially sustainable
- To make our Trust a great place to work
- To work with our partners and our community to improve services
- To join up health and care services by working more with our partners
- To invest in buildings and IT that help our teams make a positive difference to our island community



Drivers for change

The Trust is committed to delivering the NHS Long Term Plan, Standard Contract, and the recommendations in the Priorities and Operational Planning Guidance and 'Delivering a Net Zero NHS' report, all of which have informed our Green Plan and shaped our Vision.

We will work through this plan to fulfil sustainable development requirements from the NHS (as shown in Figure 3), and other relevant legislation (as listed on the next page in Figure 4) that are aligned with the relevant United Nations (UN) Sustainable Development Goals (SDGs).

This includes obligations to minimise adverse impacts on the environment and secure wider social, economic and environmental benefits for our communities. We also commit to review and participate in regional partnerships and strategies related to sustainable development wherever appropriate.

Figure 3. NHS Policy Drivers

Priority	Link to our Green Plan
NHS Long Term Plan	 2.18 Take action on healthy NHS premises. 2.21 Reduce air pollution from all sources. 2.24 Take a systematic approach to reduce health inequalities. 2.3 Improve preventative care. 2.37 Commission, partner with and champion local charities, social enterprises and community interest companies. 4.38 Make the NHS a consistently great place to work –promoting flexibility, wellbeing and career developments. 4.42 Place respect, equality, and diversity at the heart of workforce plans.
	 16 Play a wider role in influencing the shape of local communities. 17 Lead by example in sustainable development and in reducing use of natural resources and the carbo footprint of health and social care 18 Create social value in local communities as an anchor institution.
NHS Standard Contract 21/22	 18.1 Take all reasonable steps to minimise adverse impact on the environment. 18.2 Maintain and deliver a Green Plan, approved by the Governing Body, in accordance with Green Plan Guidance.
Planning Guidance 21/22 PG	C1 Where outpatient attendances are clinically necessary, at least 25% should be delivered remotely by telephone or video consultation
Estates 'Net Zero' Delivery Plan	 Making every kWh count: Investing in no-regrets energy saving measures Preparing buildings for electricity-led heating: Upgrading building fabric Switching to non-fossil fuel heating: Investing in innovative new energy sources Increasing on-site renewables: Investing in on-site generation
Greener NHS / Net Zero Plan	 Net zero by 2040 for the NHS Carbon Footprint, with 80% reduction by 2028 to 2032. Net zero by 2045 for the NHS Carbon Footprint 'Plus', with an ambition for an 80% reduction by 2036 to 2039.

Figure 4. National and International Legislative Drivers

Legislative Drivers	UK guidance; those driven by UK Guidance
Civil Contingencies Act 2004	National Policy and Planning Framework 2012
Climate Change Act 2008 (as amended)	Department of Environment, Food and Rural Affairs (DEFRA) The Economics of Climate Resilience 2013
Public Services (Social Values) Act 2012	Department for Environment, Food and Rural Affairs (DEFRA) Government Buying Standards for Sustainable Procurement 2016
Mandatory; those mandated within the NHS	The Stern Review 2006; the Economics of Climate Change
Standard Form Contract requirements	Health Protection Agency (HPA) Health Effects of Climate Change 2012
HM Treasury's Sustainability Reporting Framework	The National Adaptation Programme 2013; Making the country resilient to the changing climate
Public Health Outcomes Framework	Department of Environment, Food and Rural Affairs (DEFRA) 25 Year Plan
International	Health Specific Requirements
ntergovernmental Panel on Climate Change (IPCC) AR5 2013	Delivering a Net Zero National Health Service 2020 and Greener NHS guidance
UN Sustainable Development Goals (SDGs) 2016	Five Year Forward View 2014
World Health Organisation (WHO) toward environmentally sustainable health systems 2016	Sustainable Development Strategy for the Health and Social Care System 2014-2020
World Health Organisation (WHO) Health 2020	Adaptation Report for the Healthcare System 2015
The Global Climate and Health Alliance Mitigation and Co-benefits of Climate Change	The Carter Review National Institute for Clinical Excellence (NICE) Physical Activity; walking and cycling 2012 Health Technical Memoranda (HTM)'s and Health Building Notes (HBN)'s Sustainable Transformation Partnerships (STP) Plans

Our Green Plan

This Green Plan builds upon the ambitions of our previous sustainable development strategy and associated governance from 2015. Our policies encompassing this body of work, delivery plans, and reporting standards are currently being reassessed and restructured as part of our new vision for sustainability here at the Isle of Wight NHS Trust.

Our Green Plan will establish how sustainability will be integrated within our mission and vision for compassionate care for the Island community. The plan will highlight how the Trust will achieve this and will cover all aspects of our services and our functionalities to ensure that sustainability plays an integral part of everything the Trust does on a day-to-day basis.

To accompany this work, an action plan will be formulated, and further governance will be established or revisited to ensure that we progress with our journey efficiently. Sustainability reporting, international standards adoption, accurate data collection and monitoring, alongside efficient carbon management and staff engagement will be key to ensure that we stay on target to meet our net zero target by 2045.

This is by no means a fixed document and will be treated as a working document; despite it being our vision for the next 3 years. The plan will be reviewed on an annual basis to ensure that we are realistic with our expectations and targets as we progress and will be amended as appropriate.





Workforce and System Leadership

Governance and reporting

Decision making

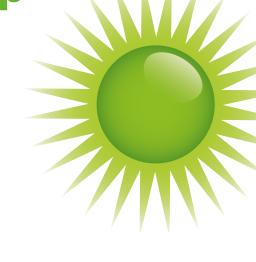
To deliver this programme of work it is key that the Trust has a clear pathway of governance and strategic direction. The Trust will depend on the support of key stakeholders, such as the Chief Executive (Our executive lead for Sustainability), the support of senior stakeholders and all Trust staff to successfully deliver our main priorities and objectives to meet our net zero goal.

To accompany the Green Plan, an Action Plan will be devised to provide a mechanism for project delivery. This plan will have key stakeholders assigned as project leads and progress will be reviewed on a regular basis through our hierarchy of governance. This will hold project leads and the Trust accountable for Green Plan delivery.

To guarantee that sustainability is fully integrated as part of our organisational fabric, job descriptions and job roles will need to implement sustainability functionalities within them.

Business cases for larger procurement contracts will need to consider sustainability as mandatory option, with the consideration emphasised in particular toward the 'Social Value Model' before the business case can be taken to our Capital Investment Group for deliberation and approval.

This will further cement the need for financial decisions and planning to become increasingly 'climate-risk' driven.







Green Champions

The Trust will recruit and train teams of green champions to support the implementation of this body of work and the drive for enthusiasm across the organisation. The Trust will have a Green Champion for each department in a clinical and non-clinical environment to help implement new projects, encourage new ideas, and to help reinforce positive sustainable behaviours.

Monthly Green Champion awards will be established to reward individuals who have demonstrated good examples of work that contribute toward our net zero goal.

Sustainability Team

Our sustainability team comprises of one Sustainability Lead, and a Waste Management Officer. As this piece of work gathers momentum we will build and enhance our team and aspire to give unique opportunities to Islanders through degree apprenticeships, and college-based apprenticeships, contributing and strengthening the Island's economic and social value.

Partnerships

We will work with local partners to help us to understand what our local community would like us to achieve. Working collaboratively with our partners also permits us to benefit from mutually advantageous projects and enhance our contribution to the Island, the local community, and the Biosphere.

We will actively work with the Isle of Wight Council to ensure that we are contributing toward their 'Mission Zero' goal for the Isle of Wight.

The Trust will also work with the Isle of Wight (ICB) Integrated Care Board to understand how we can work together collectively to reduce our footprint with particular reference to procurement, transport and the enhancement of 'sustainable models of care' due to the crossover of our services with the primary care sector.

We will also continue to work with the local ICS and collaborate with the Hampshire & Isle of Wight Sustainability Group and our other partners, to formulate ideas and collaborate on mutually beneficial projects.



Sustainability Reporting

Annual reporting for sustainability is expected by the NHS Standard Contract (Service Condition 18) and is also driven by the Government's Greening Commitments and and the Government's Sustainability Reporting standards. Sustainability reporting is an essential part of our work to ensure that we have an accurate baseline, and can progress efficiently through continuous improvement processes to continue to make positive, steady progress to ultimately reach our net zero goal.

Please see a snapshot of our dedicated forms of sustainability reporting and continuous improvement mechanisms below*:

- Annual ERIC Returns (Estates Return Information Collection)
- Greener NHS Quarterly Returns (Fleet, Estates etc)
- Environmental Legal Register
- Annual Sustainability Report
- Annual Carbon Management Report
- Environmental Management System (ISO14001)
- Energy Management System (ISO50001)
- Carbon Neutral (PAS2060)
- Climate Adaption (ISO14090)
- Sustainable Procurement (ISO20400)

- Clean Air Hospital Framework
- Cycling UK Cycle Friendly Accreditation
- BREEAM (Building Research Establishment's Environmental Assessment Method)
- The Wildlife Trust Biodiversity Mark
- The TCFD Framework
- Embedding Public Health into Clinical Services Programme's toolkit and Sustainability in Quality Improvement (SusQI) Framework



^{*}Not all mechanisms listed will have been adopted at the time of publication. Some reporting mechanisms involve extensive programmes of work for integration and will be adopted as part of our long-term plan.

Communication

Initiatives

It's Great to be Green

Staff engagement will play an integral part in driving forward this piece of work. Creating a supporting brand



alongside our 'Great People, Great Place' brand called 'It's Great to be Green' has been devised as part of our communications campaign. The brand will be used alongside the 'Great People, Great Place' branding on all governance and communications associated with sustainability across the Trust. The brand will play a particular part in the delivery of various behaviour change campaigns across the organisation and will replace past initiatives such as the 'Switch it off' campaign and will alternatively deliver a variety of campaigns under one brand.

Green Impact

To support the implementation of our net zero programme, and the integration of our Green Champions, we will commit to the Students Organising for Sustainability (SOS-UK) Green Impact Programme. Green Impact is a UNESCO award winning programme designed to support environmentally ans socially sustainable practices within organisations. The bespoke toolkit gives teams who take part an opportunity to work toward a bronze, silver, or gold award by completing actions in areas such as waste, energy, travel. By incorporating an award and a competitive element to this programme, it will encourage staff to take ownership of their work and to permanently adopt positive behaviours toward sustainability. By adopting this programme It will also enable the Trust to be able to track progress and understand how different departments and areas are progressing toward net zero.

JUMP

To complement the Green Impact programme, we will commit to the adoption of the Jump programme. This will help to bolster our work regarding staff engagement as the platform will encourage and empower staff to adopt positive sustainable behaviours. Jump is a gamification platform; staff are rewarded for completing positive actions with prizes. This rewards the actions achieved and helps to cement the continuation of that positive behaviour. This will really drive our work forward encouraging all of our staff to take part to contribute to our journey to net zero.



Isle of Wight Council

As part of our positive working relationship with the Isle of Wight Council, we will work to promote and encourage any council led initiatives across the Trust. In recent years we have supported the work between the Isle of Wight Council and the Department for Transport (DfT) to encourage active travel across the Island. The Trust has taken advantage of the various active travel initiatives over the years including, e-bike tasters, dr bike sessions, and travel plan support. We will also support the programme of work associated with 'Mission Zero' and will be active participants of the Mission Zero Healthcare Hub to help drive sustainable healthcare services across the Island.

Events and campaigns

We will embrace national awareness days such as Clean Air Day and use them as a platform to encourage staff to take part and embrace our NHS mandate of net zero. We will also hold pledge days and 'Green Surgery' drop ins, which will give staff a chance to speak to the Sustainability Lead about any possible projects or ideas. Other events, such as the recent 'Sustainable Travel Festival' in March 2021, will be held on a regular basis to help raise awareness and to encourage positive behaviours across the organisation.



Training programme

The Trust will roll out a training programme for all Trust staff. The programme will address the specific needs and requirements for various disciplines and departments across the Trust to help staff to understand the importance of sustainability and net zero.

Carbon Literacy Training

Carbon Literacy Training will give all Trust staff the awareness to understand the impact of carbon on everyday activities and will give staff the ability and motivation to reduce emissions on an individual, community and organisational basis. It will equip staff with the knowledge needed to deliver our important piece of work; addressing everyday jargon associated with carbon emissions, the impact, and the connection between carbon emissions and healthcare. We will roll this out to all Trust staff. It is our aim to have at least 150 staff trained in Carbon Literacy by the end of 2022/23.

Building a net zero NHS

The 'Building a Net Zero NHS' training helps staff to understand the NHS net zero plan, how healthcare contributes to the climate crisis, and addresses how staff can identify cases of sustainable clinical practices. The training also focuses on how carbon reduction can be implemented within the day-to-day operational work across the NHS. The Trust will roll this out to all NHS staff to help promote the understanding of our NHS mandate to get to net zero.







Waste Management

Training for waste management is highly important in honouring our legal commitment to dispose of our waste in the most appropriate way possible; by using the 'waste hierarchy'. When disposing of our waste across the Trust, staff should be competent and sure of what waste stream to dispose of waste into. Staff should also be able to understand when not to throw away, know what they can do to prevent unnecessary waste, and are able to understand the cost and the impact of disposing of possible preventative waste and the impact that it has.

Other Training

Training will be delivered as and when the requirement arises. There will be specific departments that have unique training requirements regarding sustainability and net zero. We will identify and work these into our extensive training programme to ensure that no staff member will be left behind. We are currently exploring other training options with the Institute for Environmental Management (IEMA) for all staff, and the Centre for Sustainable Healthcare for community, mental health, and clinical staff.

Carbon management

The Trust had a carbon footprint and 'Carbon Management Report' commissioned by the Carbon Trust in 2010. This highlighted some key areas for improvement. Although, not officially formalised, this plan created a good starting point for our new carbon management strategy.

To progress with our new carbon management process, it was necessary to conduct a new carbon footprint baseline. This gave us a unique opportunity to understand the areas of data collection that needed improvement. This will enable us to create an accurate carbon footprint and enable us to set accurate targets that will complement the targets set in the Climate Change Act 2008 (2050 Target Amendment), and the NHS targets for the 'Carbon Footprint', and the 'Carbon Footprint Plus'.

To calculate our carbon footprint from 2018/19 to 2020/21 in terms of buildings, energy and delivery of care, travel, and our supply chain (scopes 1-3), as per the categorisations in the NHS net zero report, the **DEFRA Greenhouse gas reporting factors** were used. To calculate our overall footprint we gathered activity data and calculated the footprint of this data with the factors provided. See Figure 5.

There are still areas that we need to work on to gather more accurate data. These areas will continue to be identified, and processes will be put in place to ensure that data is collated on an annual basis to meet our needs.

Activity data

- resource consumption (electricity, gas, water) data from utility bills
- waste arisings from data sets from waste contractors
- number of inhalers from our prescribing data
- fleet vehicle fuel use from fuel reports/receipts
- business miles travelled (by car) from our expenses system
- business travel (by rail, air, ferry etc.) from our travel operator system
- published procurement spend





Our carbon footprint in 2020/21 was 46,840 tCO₂e. That's the equivalent of just under 47 hot air balloons full of gas!

To meet our net zero commitments, we need to avoid around 1,200 tCO_2e from all sources each year until 2040/45.

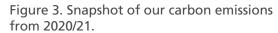
Akin to the NHS Net Zero report, most of our emissions (80%) came from sources we have little or no control over: 75.7% from our supply chain, and a further 4.2% from patient and visitor travel.

The remaining 20% arise from sources we can control or strongly influence: 14.3% of our emissions came from the operation of our buildings, 1.3% from our prescription of inhalers and volatile anaesthetics and 5.8% from transport associated with the delivery of care (including staff commuting).

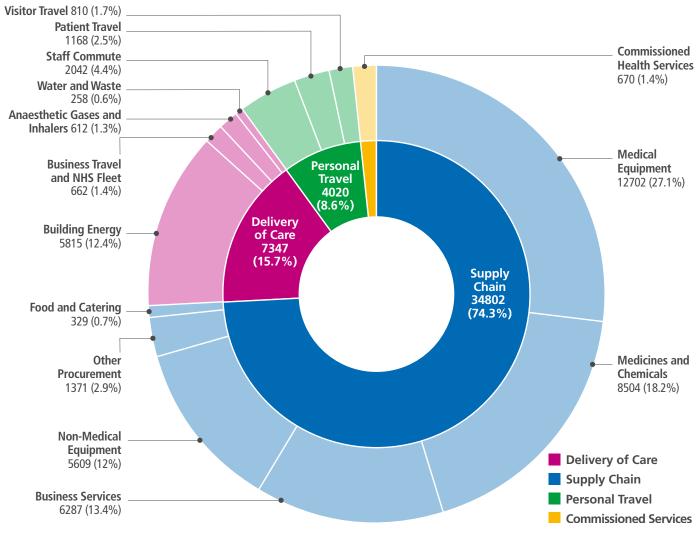
See Figure 3 for the split of each emission category, as per the NHS Net Zero report categorisation. Data shown relates to emissions in tCO₂e and their relative proportion of our footprint.

A full carbon footprint for 2018/19, to 2020/21 will be published in late 2022. This will also include the carbon footprint for the year 2021/22 in the first of our annual Carbon Management Reports.

The full methodology, our carbon action plan and how we are going to reach our targets, and develop effective carbon management processes will be set in this plan in addition to a full breakdown of our carbon footprint.



*For a full breakdown of our carbon emissions, please see our 'Carbon Management Report 22/23' – Due to published late Autumn 2022.





Our Ambitions: Workforce and System Leadership

- Building on our current practice, review our policies and processes against NHS aims for ensuring:
 - rewarding, flexible and supportive work and
 - positive action on promoting equalities, including through the Workforce Race Equality Standard and new Workforce Disability Equality Standard, and
 - regular reporting against the NHS Model Employer Strategy.
- Incorporate the Green Plan into the Essential Mandatory Training and Induction policies.
- Create Green Plan intranet pages for staff access and external webpages for other stakeholders, upload Green Plan content and progress updates accordingly.

- Encourage staff to actively participate in the Greener NHS community and other forums such as the Greener AHP Hub, Centre for Sustainable Healthcare and related workspaces on the FutureNHS platform.
- Consult, explore and action how clinical and non-clinical staff can best participate in our Green Plan delivery, ensuring this is incorporated into workplans, work-time allocations, performance reviews, and collaborating with other trusts where appropriate.
- Provide additional training related to this Green Plan to build capability in all staff, including on the link between climate change and health and practical actions that staff can take to help achieve net zero.

- Work with our suppliers to ensure that onsite workers are subject to the Real Living Wage, fair working practices and protections against discrimination.
- Embed the 'It's Great to be Green' campaign, and further campaigns around waste prevention, waste segregation, and energy saving and efficiency alongside the national 'Healthier Planet, Healthier People' national campaign.
- Train at least 150 staff members with Carbon Literacy Training and recruit at least 50 'Green Champions' to drive projects and enthusiasm for sustainability and our journey toward net zero.



Our Ambitions: Workforce and System Leadership

- Implement a variety of Staff
 Engagement schemes such as the
 Green Impact Award and the JUMP
 Programme, to encourage positive habits and behaviours.
- Introduce Sustainable Finance principles and the TCFD framework as a part of our financial planning and our project work and influence the wider ICS to adopt 'climate risk related' financial planning and allocation.
- Integrate a variety of frameworks, international standards, and accreditations to ensure continuous improvement including an ISO14001:2015 Environmental Management System.
- Increase methods of reporting to ensure continuous improvement and transparency.

- Include Sustainability in all job descriptions and as part of the business case process.
- Hold regular engagement events and take part in national awareness days.
- Work with our partners to enhance our programme of work, and to influence positive change.
- Adopt the Green Impact and JUMP Programmes to enhance and encourage positive behaviour change.
- Appoint a Clinical Lead for Sustainability and establish a Fellows Programme alongside the Green Champion Programme.
- Adopt and maintain an Environmental Legal Register with accompanied training.





Our Ambitions: Carbon Management

- Enhance the staff mileage reimbursement system to collate vehicle type/engine size and fuel type data to allow more accurate emissions foot printing, monitoring, and reduction targets.
- Enhance the business travel expense system to capture to the to- and fromdestinations for rail, air, bus, taxi, ferry journeys and hotel stays.
- Conduct annual travel surveys to quantify staff commuting and visitor travel and verify HOTT Tool outputs.
- Collate business travel mileage monthly in the business travel expense system to allow more accurate emissions foot printing.
- Capture the activity data of the use of oil in our generators and in other vehicles onsite to contribute toward our carbon footprint.

- Work with Greener NHS and the wider region to devise a way of capturing home working emissions.
- Adopt the PAS2060 Carbon Neutral standard and work towards Carbon Neutral by 2025.
- Sign up to the Science Based
 Corporate Net Zero Standard and set Carbon targets and budgets that align with the NHS net zero targets, the Climate Change Act 2008, and the Government's Carbon Budgets.
- Produce an annual Carbon
 Management Report including a full breakdown of emissions, methodology and emissions trajectory and the reporting of how we are progressing against our targets with accompanying actions.

- Quantify further waste emissions impacts from waste that is produced based on the disposal method using the WRAP Carbon and Waste Resources Metric (E.g. Closed-loop, incineration).
- Identify further areas of carbon emissions, and data inaccuracies that we have not captured in our previous carbon footprints and report on this every year in the Carbon Management Report.



Sustainable Models of Care



The NHS Long Term Plan updates the NHS service model, with a focus on preventative care in communities and tackling health inequalities, now and in the future. This has been linked to emissions reductions and greener activities.

Our Trust delivers integrated acute, community, mental health, and an ambulance service to a population of 140,000. St Mary's Hospital in Newport is our main base for delivering acute services. Our ambulance service delivers all emergency and non-emergency transport including the Jumbulance for our community.

The National Patient Safety Improvement Programmes and the Investment Impact Fund indicators (IIF) provide underpinning principles for sustainable models of care, such as preventative care interventions and reducing health inequalities. Staff training and empowerment, as highlighted in our 'Workforce and systems leadership' section are critical to enhancing sustainable models of care.

Adhering to the Getting it Right First-Time programme (GiRFT) helps to avoid additional hospital bed days and patient and visitor travel to our clinics, and their associated environmental impacts. Strong interagency partnership working enhances GiRFT, providing a better care package for our community.



Our Ambitions: Sustainable Models of Care

- Build on current efforts (GiRFT, National Safety Improvement Programme and CMPP) to reduce health inequalities and improve early intervention, linking this work to potential emissions reductions. E.g. tobacco dependency, poverty, etc.
- Ensure that GiRFT, is effectively embedded across the Trust to ensure that we make the best use of our resources. (E.g. staff, infrastructure, products, etc.).
- Use the 'Embedding Public Health into Clinical Services Programme's toolkit' and 'Sustainability in Quality Improvement (SusQI) Framework' to ensure the best possible health outcomes with minimum financial and environmental costs, while adding positive social value at every opportunity.
- Continue to collaborate with other trusts and public authorities on the island population's health.

- Appoint a Health Inequalities Lead to coordinate delivery of an updated Health Inequalities Action Plan.
- Follow Greener NHS guidance or support the development of GHG emissions reduction metrics linked with sustainable care actions, including establishing links between better health outcomes and reduction in emissions from avoided care and travel.
- Work to engage suppliers related to sustainable care in relevant emissions reduction and health equalities activities.
- Explore new ways of delivering care at or closer to home, meaning fewer patient journeys to hospitals.
- Build on the work that is being carried out with video conferencing for patient consultations.





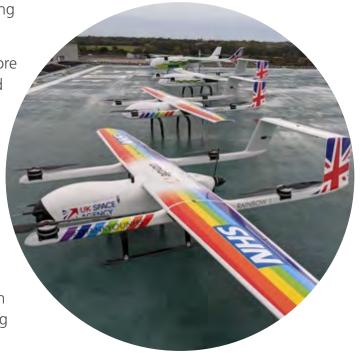
Apian Drone, Chemotherapy Drug Transportation: Sustainable Models of Care

The Isle of Wight NHS Trust's Pharmacy Manufacturing Unit (PMU) was decommissioned in July 2020. Ever since, it has been dependent on the mainland for the supply of its chemotherapy which must be delivered by ground courier to Portsmouth, then ferry to the Isle of Wight, then taxi to St Mary's Hospital. Disruptions to the ferry service, including cancellations, delays and changing timetables, complicate deliveries and distracts staff with additional workload.

Given the short shelf life of chemotherapy, this can occasionally result in the drug being wasted. It takes up to 3 or 4 hours to transport chemotherapy from the nearest PMU at Portsmouth Hospitals University NHS Trust. Reducing this to a reliable 30-minute flight are transformative, making available chemotherapy previously prohibited on account of its short shelf life, avoiding

patient journeys to the mainland, minimising treatment delays and saving staff time.

Today, chemotherapy is manufactured before the patient has been clinically assessed and confirmed to be physically able to receive treatment. In some cases, the patient's condition can cause the treatment to be delayed and the chemotherapy to be wasted. An on-demand drone delivery service will allow for a sequential process where manufacturing doesn't start until after the patient's assessment, enabling more flexibility for both the patients and clinicians, reducing the carbon footprint of travel, in addition to preventing medical wastage. (Apian, Unknown)





Digital Transformation



The NHS Long Term Plan commits all NHS bodies to focus on digital transformation by establishing a 'digital front door', enabling digital first care. The **NHS App** is one example of this, providing patients with a simple and secure way to access NHS services on their smartphone.

The NHS Planning Guidance requires that at least 25% of all clinically necessary outpatient appointments should be delivered remotely by telephone or video consultation. Streamlining and digitising administrative functions also reduces paper waste and expedites processes.

The Trust is well-placed to lead the development of digital care as a tool to promote inclusion and increase access to quality care across the Island and is committed to ensuring that digital services are tailored to meet the needs of our different specific care groups. The Government's Greening ICT and Digital Services Strategy 2020-2025 is also taken into consideration when looking at the improvement of our digital care services.

The 'What Good Looks Like' framework', designed to guide Trusts towards the successful integration of digital care systems, neatly summarises:

'The pandemic enabled us to achieve a level of digital transformation that might have otherwise taken several years. As we move into the recovery period, it is critical that we build on the progress we've made and ensure that all health and care providers have a strong foundation in digital practice'.

The Trust's digital services complement and link to our in-person services.

Since the beginning of the pandemic, we have started recording the number of face-to-face,

consultations. In 2020/21 we recorded 58,809 remote appointments, in comparison to 10,117 in 2019/20.

telephone and video

However, there will always be a need for faceto-face appointments and consultations for some of our patient groups.

Patient Case notes are still in paper form and additional paper notes are still being generated. The Trust is currently developing a business case for an Electronic Document Management solution to support the digitalisation of records and to digitalise paper-based processes.

The COVID-19 pandemic has led to a blended working approach, especially for our administrative staff – a mixture of office and home-based working. However, we must be cautious not to 'outsource' these environmental impacts to our staff.

58,809

2020/21



Our Ambitions: Digital Transformation

- Build on our current practice and current online patient guidance, participate in delivery of the Long-Term Plan commitments for digital first primary care and an NHS digital front door, linking this to potential emissions reductions.
- Follow NHS guidance on information collection, including any subsequent process for GHG emissions reduction metrics linked with digital-first care actions, such as the CSH's Carbon Calculator for Avoided Patient Travel.
- Offer more digital and remote appointments: set targets against the baseline recorded in June 2021.

- Use the What Good Looks
 Like Framework, the Greening
 Government: ICT and Digital
 Services Strategy 2020-25 and The
 Technology Code of Practice as guides to ensure the Trust has robust ICT systems in place to deliver on digital transformation.
- Build on current practice of engaging staff and care groups in digital care channels, meaning fewer patient journeys.
- Transfer paper-based systems such as prescribing, bed state, observations, ward state, referrals, expense claims forms to a digital alternative.

 Planned migration of data systems to cloud-based systems. Adoption of staff and patient portals. Continued cyclical replacement programme of IT hardware, including the provision of smart phones to all front-line staff.





Travel and Transport



As of 20/21 we operated 95 vehicles ranging from cars to small, medium, and large vans, and ambulances. These vehicles are used by our Estates department for the maintenance and operation of our sites; the secure transportation of patients; for transporting goods between sites, and for staff use for business travel. The Island's ambulance service delivers all emergency and non-emergency ambulance transport including the Jumbulance for the Island's population.



The new NHS Non-Emergency Patient Transport Services (NEPTS) target is to have:

- From 2023, 50% of all fleet vehicles to be of the latest emissions standards, Ultralow Emission Vehicles (ULEVs, such as plug-in electric hybrid), or Zero Emission Vehicles (ZEVs, such as electric cars)
- From 2025, 75% of all fleet vehicles to be of the latest emissions standards, ULEVs or ZEVs
- From 2030, 100% of all fleet vehicles to be ULEVs or ZEVs, including a minimum of 20% 7FVs

At present, ULEV and ZEV large vans are limited, though more are coming onto the market. ULEV and ZEV small vans and cars are becoming commonplace, with many options available.





As a Trust in 20/21 we operated a total of 93 vehicles. A guarter of our fleet were non compliant with LEV standards, and non of our vehicles met ULEV standards. 65 vehicles were leased, just 28 of our vehicles were owned outright, and 10 vehicles were on short term hire.



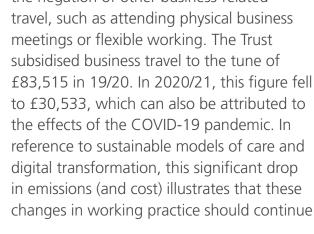
We have an extensive 'grey fleet' culture within our Trust. Grey fleet refers to employeeowned vehicles and/or hire cars used for business purposes. This could suggest that we do not utilise our fleet of pool vehicles correctly, and that we do not promote or facilitate the use of other types of travel, such as bus use, cycling, walking, and car sharing.

The large majority of grey fleet is used for community care and mental health. It is acknowledged that some types of travel may be limited due to the type of care being delivered or some time constraints, however if there is scope for other methods of transport,

or travel could even be prevented, then this could reduce the use of grey fleet quite considerably.

We reimburse staff and bank staff for the fuel used in line with their duties through our expenses system. In 2020/21, we reimbursed staff for travelling over 688,819 km, which roughly equates to an emission value of 118 tCO₂e. It is also worth noting that in 2020/21, with the changed working styles affected by the pandemic, this had dropped from 854,172 km and 151 tCO₂e in 2019/20. The residual figure reflects our core provision of community care.

However, the drop can be associated with the negation of other business-related travel, such as attending physical business meetings or flexible working. The Trust subsidised business travel to the tune of £83,515 in 19/20. In 2020/21, this figure fell to £30,533, which can also be attributed to the effects of the COVID-19 pandemic. In reference to sustainable models of care and digital transformation, this significant drop in emissions (and cost) illustrates that these changes in working practice should continue.





As the electrification of transport continues, emissions will reduce accordingly. This also brings forth the issue of providing additional electric vehicle charge points in the future. Using 2020/21 as a baseline, we aim to reduce emissions from our grey fleet by 18 tCO₂e, to 100 tCO₂e in 2023/24. If we changed all our fleet vehicles to ZEVs, based on 2020/21 data and using 100% renewable electricity, we would see a likely 89% drop in emissions (emissions associated with electric vehicles are due to transmission and distribution losses in the national grid). This would result in total emissions dropping to around 60 tCO₂e per year, with the added benefit of no tail pipe emissions.

Business travel and operations

To understand how we can negate our emissions via operational activities, we must first understand how we use our vehicles, and then take steps to either remove vehicles, or trial other options, such as active or sustainable transport to reduce emissions. Our logistical processes may also need to be reviewed to ensure that unnecessary travel is not carried out by vehicles on or off the main site. This also extends to business travel use.

We are working with the NHSEI Net Zero Transport team to understand our current usage with a view to reduce the number of vehicles we own or lease, and instead encourage alternative modes of transport or travel. Alternative modes could include e-bikes in the community, or cargo bikes for last mile deliveries.

For those who absolutely need to use a car for their day-to-day journeys,

particularly in the community, we will be exploring the option of a Car Salary Sacrifice scheme with the choice of ULEV of LEV to reduce our emissions as an organisation and will actively encourage those that rely on a car for their day-to-day duties to apply.

Introducing a discount for employees to install charging points at home will also help to encourage the switch and lessen the burden on our future charging points in car parks.

This piece of work is also likely to inform our EV charging strategy, our Travel Plan and review of our car parking management processes.

Sustainable and active travel and transport

Emissions from commuter, visitor, patient, and operational transport can be negated using sustainable or active travel. This refers to travel such as walking, cycling, using the bus and car sharing.

Commuters, patients, and visitors

The Trust has a Cycle to Work scheme, which had 53 users in 2020/21. This number has an opportunity to increase given that the scheme now has a £3000 threshold. This gives staff the opportunity to purchase an e-bike. The benefit of e-bikes, especially with those who are unfit, or physically unable to ride an unassisted bike are hugely advantageous, as it can improve health and fitness, reduce overall travel costs, and get staff from A to B arguably faster than waiting in a line of traffic. With the National Cycle Network route on our doorstep with direct access to our main site and our other sites across the Island,

it is imperative that we promote this to our staff.

We also offer 10% discount on bus tickets for staff. It is not clear on the take up of this, however there is potential to increase the number of bus users with the active promotion of this offer and the education of bus products. There is also a huge opportunity to encourage patients and visitors, if able, to come to an appointment or see their relatives in our care actively and sustainably.

We do not actively promote, encourage, or facilitate sustainable modes of transport to

our staff, visitors, or patients. To ensure that emissions from visitor, patient and commuter travel continue to drop we will actively promote, encourage, and strive to facilitate their needs to access

To understand the take up, demand, and need for an increase in mode shift to active and sustainable modes of transport across all key stakeholders, we will conduct a variety of travel surveys and data collection exercises annually. This will also inform our Travel Plan, and an action plan that will be updated annually to reflect our progress. As a starting point, we will explore increasing the number of cycle parking spaces, improving shower/ changing facilities, and offering other incentives for active and sustainable modes of travel and transport for all staff, visitors, and patients.



Cycling UK Cycle Friendly Employer Award – Travel and Transport

In February 2021, the Trust worked with the Isle of Wight Council to undertake a fully funded a 'Cycle Friendly Employer' accreditation delivered by Cycling UK.

The Trust undertook this award to understand how it could further develop facilities and to encourage staff to use sustainable transport to travel to and from work; to fundamentally help to inform a 'Green Travel Plan'

The award, split into 6 categories; Information, Communication, and Incentives for Employees; Coordination and Organisation; Service; Facilities; Parking Management and Customer Traffic, assessed how well equipped the site was to help encourage and facilitate active and sustainable modes of transport and travel onsite.

An audit of the site was undertaken, and recommendations were provided, such as offering bike maintenance to staff, installing

a dry room for staff use, or increasing the number of cycling facilities, and these have been taken on board to help inform the Trust's Green Travel Plan, which is due for publication in late 2022.

By addressing the recommendations in the report, we hope to achieve a Silver award in 2022/23.





Electric vehicles and infrastructure

We currently have two plug-in ULEV vans as part of our fleet. However, we do not have EV charging infrastructure on any of our sites. As vehicles come to the end of their leasing period, we are now actively changing over vehicles to ULEV, or ZEV as the market allows. We are in the process of rolling out our first charging points in Spring/Summer 2022.

To progress with the changeover to ZEV we are also in the process of undertaking a feasibility study for our sites, alongside recommendations for implementation. This is likely to tie in with our work on vehicle usage, and the future energy requirements of our site as it is likely that we will need new connections for a full roll out site wide.

Air quality

Air quality forms a direct link between climate change and health outcomes, and the NHS Net Zero plan calculates that reaching UK ambitions on emissions reductions in line with Paris Agreement targets could save 38,000 lives with improved air quality.

According to the World Health Organisation (WHO), poor air quality leads to over 7 million deaths globally and that 9 out of 10 people worldwide breathe polluted air.

Travel is a key contributor to air pollution, and with as many as 1 in 20 road journeys in the UK attributable to the NHS, our activity has enormous potential impact both on our communities' air quality and our ambition to reduce emissions. Additionally, our gas-fired boilers contribute to air pollution, and the decarbonisation of heating will address these pollutants in the future.

We commit to tackling this issue through investment and engagement with staff, patients, visitors, the Local Authority and Public Health. We will give special consideration to the air quality surrounding our estate and opportunities to improve its impacts in our care groups.

PATIENT TRANSPORT SERVICE

Isle of Wight Ambulance Service

We will also enhance smoking cessation activities, encourage further take up of sustainable travel options, introduce an Anti-Idling Policy on the Estate, and take part in the Clean Air Hospital Framework to cement our commitment to this ongoing issue.





Our Ambitions: Travel and Transport

- Embed and adopt an updated Travel
 Plan, with new modal shift targets to be
 supported by an active travel expenses
 policy and a facilities review. (E.g. Staff
 permits, pool travel cards etc).
- Implement a Car Salary Scheme with the choice of ULEV and ZEVs.
- Continue with a fleet review to help shape the future of our fleet and use sustainable travel modes as much as possible, serving as a longterm solution for business travel and operational travel.
- Ensure that any new vehicle purchased or leased are ultra-low emission (ULEV) or zero emission (ZEV) from 2023, in line with the latest NHS nonemergency transport guidance.
- Improve stores provision and work with our suppliers to consolidate goods orders through better planning wherever possible, reducing transport emissions.

- Drive forward the Agile Working Policy.
- Install EV charging points at our sites to encourage hybrid and electric vehicle usage.
- Evaluate our Cycle Storage and invest in new storage areas across the site which enhance security and cover.
- Revamp communications and invest in incentives for sustainable transport and travel options for visitors, patients, and staff to reduce car park use and emissions.
- Revaluate Car Parking Policy and Management and introduce parking charges with a Staff Parking Permit whereby revenue contributes to sustainability projects.
- Introduce an Anti-Idling Policy on the main site.

- Encourage staff to use the 'Sustainable Travel Hierarchy' to make responsible travel choices for business with a Travel Policy.
- Implement the Clean Air Hospital Framework.
- Introduce harsher penalties for smoking onsite, in particular, for staff, with disciplinary action if caught.
- Continue EV Charging Infrastructure roll out.
- Enhance 'mainland' commuter travel with sustainable travel incentives and a minibus option for those travelling from Ryde, Yarmouth, or Fishbourne in the early morning, and returning late in the evening.
- Progress to the Silver Cycling UK Cycle Friendly Accreditation Award.











Estates and Facilities Management



As an NHS Trust, the carbon footprint of our built environment is significant. Overall, the health and care system in England is responsible for an estimated 4-5% of the country's carbon emissions.

As we provide critical services 24 hours a day, our energy and resource consumptions are substantial. Therefore, we need to optimise energy use in our buildings and move away from using fossil fuels to meet NHS Net Zero goals.

Our estate comprises several facilities housed in other Trusts' buildings. This presents challenges to retrofitting resource efficiency measures and heating improvements, and we will work with other Trusts and the aims of their Green Plans to improve efficiencies at these sites.

We will be following the four-step approach within the NHS' 'Estates 'Net Zero' Carbon Delivery Plan' to address our estate with our accompanying Estates Strategy:

- Making every kWh count: Investing in no-regrets energy saving measures
- 2. Preparing buildings for electricity-led heating: Upgrading building fabric
- 3. Switching to non-fossil fuel heating: Investing in innovative new energy sources
- **4. Increasing on-site renewables:** Investing in on-site generation.









Energy

In 2020/21, we had 17 active sites where we were directly responsible for procuring the energy supply contracts. Buildings under our ownership can be targeted for energy efficiency improvements.

5,815 tCO₂e emitted from buildings across our estate in 2020/21. We need to reduce energy consumption by over 886,000 kWh per year to achieve the emissions reduction target of 4,598 tCO₂e in 2024/25.

We need to reduce emissions by $1,218 \text{ tCO}_2\text{e}$ by 2024/25 from our 2020/21 baseline.

St Mary's Hospital energy consumption is significant, as it is our main site, and it consumed over 6,000,000 kWh of electricity and 17,000,000 kWh of gas in 2020/21. This is equivalent to 5,588 tCO₂e!



emitted from building across our estate in 2020/21

Energy and our future

To achieve net zero, we must reduce both our electricity and gas consumption at all our sites, at a rate of 886,887 kWh per year

To achieve this, we will engage with staff about energy efficiency and energy saving across the Trust with our 'It's Great to be Green' brand. We will host a variety of energy saving campaigns, promoting energy saving actions across the Trust. These campaigns could include actions such as switching off the lights, turning off computer monitors, not leaving computers in sleep mode and turning them off, or turning off equipment that isn't being used.

We acknowledge that behaviour change will not solve our energy problems completely. Most of our problems lie in our buildings, and the building fabric, in addition to the way that we use them.

We will need to invest in our buildings, to reduce our footprint with a view to decarbonise our estate. Actions such as an LED lighting rollout across our estate, lighting sensors, improving our energy centre, or investing in alternative energy generation, are key to reducing our impact and our long-term costs.

We have already upgraded our main heating system from oil-based steam to a more efficient decentralised gas-fired system. To reach net zero, it will be necessary to upgrade the system to using Heat Pumps, such as ground or air source.

We will refurbish our heat recovery systems of Air Handling Units and expand our CHP capacity. We also have plans to use our roof space for the installation of solar panels to generate on-site electricity. In addition, we are in the process of replacing our boilers with more efficient models.





This transition will inevitably result in much higher electricity consumption, and of particular concern is the viability of increasing the electrical site capacity (load in kilovoltamps) from the electricity grid. Extensive onsite renewable energy systems, such as solar photovoltaics and integrated large battery storage technologies, will help mitigate this, and provide additional resilience to power outages, with the potential to negate using our back-up diesel generators.

To progress this significant piece of work, we have begun revaluating our energy management processes to become more efficient and cost effective, alongside the implementation of an ISO50001 energy management system to ensure that not only we continually improve in this area, but we are able to re-baseline ourselves and to create a structure that will promote and integrate efficient and consistent energy management standards across our estate.

We are also considering a decarbonisation plan, and an electrification study complete with recommendations to help start us on this journey. Work on building efficiency and optimisation has begun, with the consideration of energy manager software integration within our BMSs alongside a revaluation of our meters across our sites.

We will also continually look to government funding to help us invest in our infrastructure in addition to 3rd party financial agreements or look to IDNOs to facilitate our significant needs for infrastructure and key assets for self-sufficiency as we move forward.



Our Ambitions: Energy

- Enhance Planned Preventative
 Maintenance (PPMs) of our facilities
 and assets to be proactively energy focused and to identify opportunities to
 upgrade equipment/plant.
- Procure 100% renewable electricity with Renewable Energy Guarantees of Origin (REGO) certificates.
- Follow Estates 'Net Zero' Carbon
 Delivery Plan guidance on efficiency and decarbonisation protocols for the built environment.
- Install solar photovoltaic meters and collate a monthly generation report.
- Install more sub meters where necessary to gather a clearer picture of energy usage and the 'hot spots' across the estate.
- Enhance our (BMSs) Building Management Systems with energy manager software.
- Optimise energy use by embedding networked Automatic Meter Readers

- (AMRs) across the Estate with appropriate controls to reduce energy consumption and report sub-metered data monthly.
- Conduct detailed building energy surveys to identify further energy/ thermal efficiency opportunities, including the installation of heat recovery systems on Air Handling Units (AHUs).
- Explore the possibility of creating District Heat Networks with neighbouring partners.
- Look to procure 'green gas' through the Green Gas Certification Scheme as and when existing energy contracts are due for renewal.
- Incorporate energy conservation into staff training and education programmes and deliver behaviourbased energy saving campaigns.
- Reduce oil and gas use with a Boiler Replacement Programme.

- Explore ways to expand the energy infrastructure on the estate to facilitate more renewable technologies, more energy efficient technologies, in addition to anything that may be needed in the future for patient care. E.g., MRI machine.
- Revaluate our Energy Contract
 Management and procurement
 processes to ensure that we are getting
 the best value and quality out of our
 contracts and can understand contract
 periods and the payment processes of
 our multiple sites more efficiently.
- Work toward a one energy provider approach rather than using multiple providers to supply the Estate with a view to collaborate on an 'NHS homegrown framework 'with other Trusts.
- Remove water boilers, 'Zip boilers', and replace with kettles.
- Formulate an LED roll out plan.





Water

In 2020/21, we used 71,315m³ of water, which cost a total of £356,155, enough water to fill 28.5 Olympic-size swimming pools!

72.5 tCO₂e was attributed to the supply of water and wastewater treatment. We need to reduce water consumption by 10,744m³ by 2024/25.

There are emission impacts associated with the supply of fresh water and treatment of wastewater, equating to 72.5 tCO₂e in 2020/21. Although the emissions are low compared to those produced by energy use, being water efficient is important to prevent and alleviate water stress.

As a water efficiency and leak preventative measure, we will look to collate the data from our Automatic Meter Readers water network on a regular basis. This will help us pinpoint areas of high-water usage, understand how and where water is being used, locate leaks,

and take remedial action. In addition, we have worked with ADSM and Southern Water to put internal controls in place on the Trust water discharges.

We will utilise water efficient technology in the future, such as standardising the use of automatic taps, and continue to phase out bottle fed water coolers for mains fed water coolers where possible. Water conservation and sustainable drainage shall also be explored. Rainwater harvesters can also collect rainwater for non-potable purposes, such as for flushing toilets. This will help reduce water stress and potentially alleviate flooding by attenuating surface water runoff in storm events.

This body of work shall form part of our Water Management Plan, which will help to form our policies and goals, assess current water uses and costs, develop a water balance, identify potential water efficiencies and opportunities to reduce our water footprint. Part of this work will involve the formulation of a water footprint of the physical estate which will eventually extend to our other areas of the organisation.



Our Ambitions: Water

- Explore and implement water efficiency targets on areas of the highest impact in our estate and delivery of care.
- Develop new water intensity metrics and incorporate these into our greenhouse gas emissions reporting.
- Phase out bottle fed water coolers for mains fed water coolers.
- Collate water Automatic Meter Reader to determine water use patterns and aid leak detection, and report monthly.
- Utilise the most water efficient technologies, such as low flow taps throughout our estate, when replacing equipment and developing new sites.

- Explore where rainwater harvesting, and grey water systems can be installed and utilised.
- Work with our staff and patients by communicating the importance of water efficiency.
- Incorporate water efficiency measures within our climate change adaptation work with the local community.
- Develop a Water Footprint analysis and Water Management Plan to help mitigate and plan for future efficiencies.







Waste

The COVID-19 pandemic has led to an increase in the usage of single-use plastic items; a necessary response to managing the crisis. This led to an increase of waste incineration of over 70% in 2020/21 compared to the previous year.

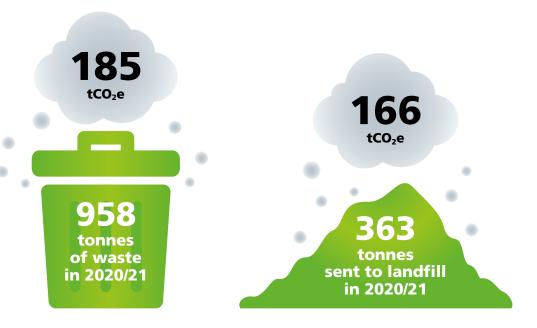
958 tonnes of waste were produced, emitting 185 tCO₂e in 2020/21. 363 tonnes were sent to landfill in 2020/21, emitting 166 tCO₂e (90% of all emissions from waste).

Due to our unique geographical location, waste disposal can often be a challenge for waste produced in a healthcare environment here on the Island. As a result, the Trust accrues further additional costs for collection. This is largely due to the type of waste, but other factors including the cost of travel, including the vehicle ferry, and the amount of waste that we produce contributes further to our costs, and of course our carbon footprint significantly.

The Trust however is working toward zero avoidable waste, with an aim to eliminate avoidable plastic waste and will significantly take steps to reduce marine plastic pollution. The Trust is also aiming for zero waste to landfill and is taking active steps to make this a reality with a variety of projects and a change in processes.

The Trust collects five main waste types: general, clinical/offensive, confidential paper, dry mixed recycling, and electrical and electronic equipment (WEEE) waste. We have put systems in place for the segregation and recycling of batteries, electrical and electronic items, and printer cartridges.

We do not however collect food waste or repurpose food waste for compost use in our greenspaces. This is currently disposed of macerators onsite or disposed of for organic digestion.



Some of our clinical waste is incinerated (sharps), whilst other types are ultra-high temperature processed (alternative treatment) before being further recycled. Offensive waste is combined with clinical waste. We have created significant carbon saving by rationalising the logistics of clinical waste community collection, working with our waste contractor to allow for a small vehicle to be permanently based on the Island. Waste is bulked at St Mary's Hospital at our Waste Transfer Station before travelling to the mainland.

There are a variety of by-products such as empty blister packs, used cooking oil, and used disposable PPE that we produce daily that could be recycled or repurposed. A lot of these by-products are often single use, disposable, and non-recyclable. As a Trust we pledge to find reusable alternatives to

disposable solutions, and where possible find recyclable solutions for universally accepted non-recyclable by-products to prevent as much as possible from incineration or landfill disposal. In addition to waste prevention will also consider more waste minimisation measures, such as hand dryers over paper towels or reintroducing re-usable sharps containers.

The waste hierarchy of Prevent, Reuse, Reduce, Recycle, Recovery (energy from waste) before disposal (landfill) must be embedded to ensure we are maintaining our waste duties of care and circular economic principles. We are committed to using the waste hierarchy and improving our waste handling processes will ultimately reduce greenhouse gas emissions from waste treatment, other negative environmental impacts, and landfill disposal costs.







Our Ambitions: Waste

- Work with our staff and patients by communicating the importance of waste segregation.
- Review and roll-out Waste
 Management training on the ESR
 (Electronic Staff Register) platform.
- Carry out an extensive Waste Audit that identifies the most common problems with waste segregation, identifies where bins are needed, and identifies the worst offenders for incorrect disposal.
- Identify further food waste streams and arrange a service with collection.
- Identify further opportunities for recycling onsite.

- Identify projects that will help prevent waste going off island, to reduce our overall carbon footprint and costs of disposal. E.g., Energy generation and heat transfer projects, or local causes.
- Create a Waste Award to help increase better waste segregation across the Trust.
- Ensure that waste data is collated and logged, and monthly reports are produced.
- Explore whether reusable alternatives to single-use PPE items, and other single use items (aprons, wipes, face masks, medical instruments) are clinically appropriate.

- Expand the Waste Team to help drive forward projects.
- Re-introduce reusable sharps bins.
- Introduce individual waste recycling services for PPE, blister packets, etc
- Revaluate our waste contracts to identify cost savings and carbon reduction opportunities.
- Create a waste reduction and prevention campaign with the 'It's Great to be Green' brand



Capital Projects



The Built Environment of the NHS influences both the quality of our care and our environmental impact. The construction industry uses a staggeringly large amount of natural resources and generates a huge amount of carbon emissions through activities such as energy use, waste, transport, and air, water, and noise pollution. Indirect emissions caused by supply chain and procurement activities, and embodied carbon also contribute highly to the construction of an asset.

As a Trust we continue to refurbish and build new assets to ensure that we can continue to provide quality care for our community and provide a comfortable working environment for our staff. This means that we have a huge opportunity to embed smart design concepts and carbon reducing technologies to reduce our carbon impact bringing us closer to our net zero goal.

To achieve this sustainability and sustainable practices should be intricately intertwined from the design stage of a project to end completion. This includes everything from design to procurement of goods and services, the materials used, how contractors work onsite (travel, waste disposal etc), and even the acquisition of finances at the beginning of the financial year to carry out a programme of work. If financial decisions are not climate risk driven, then it is unlikely that we will be able to meet the present or future needs of our estate or net zero target. We will instead continue to 'firefight' rather than 'futureproof'.

We pledge to influence and drive change in the way we carry out our projects to ensure that all projects are net zero and cause minimal impact, by adopting sustainable practices and designing our projects with a 'whole life approach'.





Our Ambitions: Capital Projects

- Implement the upcoming Net Zero
 Hospital Building Standard in any new
 builds and aim for BREEAM 'Excellent'
 for any major refurbishments, and
 BREEAM 'Very Good' for smaller
 projects.
- Continually explore options to mitigate emissions in smaller works and projects across our Estate.
- Encourage and measure local subcontractor and supply chain spend as part of our anchor institution approach.
- Work with our Procurement team to enable specification of low and zero carbon materials, designs, and the acquisition of ethically responsible, carbon neutral or net zero materials, as well as achieving waste reduction and other opportunities through contractor engagement.
- Ensure capital development accounts for risks identified in climate adaptation plans and addresses these in design/delivery.

- Ensure that the Capital Projects
 financial budget allocated with a
 climate-risk related approach to
 finance, and work with finance and
 the ICS to encourage this behaviour
 across the region.
- Ensure that sustainability is considered at the beginning of a project during inception, the design process, and is continued to be implemented during, and continues after project completion with a dedicated Sustainability Champion, (in addition to a BREEAM Assessor, if it is a BREEAM project).
- Continue to ensure our design process is informed by staff, patients, and community views for capital projects.
- When procuring fixtures of fittings, reuse must be considered. E.g. chairs, tables, medical equipment, doors, etc.
- Ensure that the 'Circular Economy' model is used across all projects, including small works and maintenance.
- Implement a new Capital Standardisation Plan, Design Guide, and a Processes and Procedures policy

- to include sustainable building and sustainable procurement practices.
- (E)(E)
- Offset carbon emissions of unavoidable carbon from a project in local projects or enhance biodiversity
 & greenspaces onsite.
- Ensure that all contractors have ISO14001 or have Environmental Policies in place and continue to adhere to their commitments onsite as part of their work.
- Use the Capital Net Zero Planning tool, when released by the NHS across all projects.
- Implement energy saving, more energy efficient technology where available, and consider the use of renewables where possible.
- Natural light and heat should be heavily utilised in building design.
- Patient areas where windows overlook areas such as car parks and other buildings should be targeted for green planting.

Biodiversity and Greenspace



Our Trust wants to protect biodiversity within our estate and region and reduce our negative impact on biodiversity, both locally and globally. To reduce our impact, we produced a Biodiversity Action Plan at our largest site, St Mary's Hospital in 2021 in partnership with the Hampshire & Isle of Wight Wildlife Trust.

The key areas of the plan are to reduce emissions from air pollutants, ensure clean and plentiful water in the community, reverse the loss of marine biodiversity, reduce the risks of harm from environmental hazards, and use resources from nature ore sustainably and efficiently.

Greenspace and nature are important for the health and wellbeing of patients and colleagues alike. At a global scale, greenspace affects the planet's ability to absorb carbon dioxide. Our Trust will promote access to greenspace, considering areas of operations where this may be lacking.

We will also consider opportunities and risks for biodiversity in the areas we operate, for example priority woodland areas in our region.





Our Ambitions: Biodiversity and Greenspace

- Ensure that Biodiversity Net Gain is included in the design process of any new build or refurbishment where planning permission is needed, or not needed with a 10% net gain being achieved using the Biodiversity Metric.
- Assess native and invasive plant/ tree species and ensure that the maintenance of this is managed to protect greenspaces, to ensure that native species can thrive.
- Enhance our current greenspaces for animals and insect with bird boxes, bat boxes, bee 'totems', insect hotels, log piles, plants, etc and areas for animals and insects to thrive.
- As part of the Hampshire & Isle of Wight 'Wider 2030' strategy, contribute areas across Hampshire & the Isle of Wight, that are in desperate need of rewilding, or restoring either as a contribution, or because of a necessary carbon offset.
- Adopt the Biodiversity Action Plan 2021: St. Mary's Hospital formally.

- Consider Biodiversity Action Plans for other sites across the Island in our Estate.
- Include the consideration of the National Planning Policy Framework, 'Building with Nature' and the Isle of Wight Biodiversity Opportunity Areas Map with Capital Projects.
- Identify areas that patients, visitors, and staff and wildlife can benefit from and develop projects. E.g. vegetable gardens, wildflower meadow.
- Adopt the The Wildlife Trust Biodiversity Mark to help formulate a baseline for our work.
- Protect the parts of woodland, hedgerows, trees, and the pond to enhance and protect our wildlife onsite.
- Create a Grounds Maintenance Strategy that includes the consideration of biodiversity and habitat enhancement, including the pond.
- Assess the water quality and biodiversity value of the pond, and re-profile the

- bank, install fencing along the edge to stop the fish entering, and split the pond into two parts; one for the carp and one for designated wildlife, and plant a mixture of vegetation and monitor, alongside the clearance of weeds annually.
- Take part in 'No Mow May' and other key national schemes across the site.
- Use wildlife friendly lighting.
- Enrich and revitalise the 'Green roofs' and courtyards in the main hospital building.
- Leave some areas onsite unmown to protect invertebrates and small mammals.
- Work with other Trusts as part of the HIWWT Wilder NHS Programme.
- Include green roofs, green walls, permeable pavements and the provision of bird and bat boxes on new buildings or as part of a refurbishment if applicable.

Medicines



In addition to carbon dioxide emissions, NHS clinical activity and prescriptions, such as using inhalers, nitrous oxide, and volatile inhaled anaesthetics like desflurane, contribute a considerable proportion of the NHS' GHG footprint.

The Long-Term Plan commits the NHS to reduce GHG emissions from anaesthetic gases by 40% (which on its own could represent 2% of the overall NHS England carbon footprint reduction target that the NHS must meet under **Climate Change Act** commitments) and significantly reduce GHG emissions by switching to lower global warming potential (GWP) inhalers.





Nitrous oxide

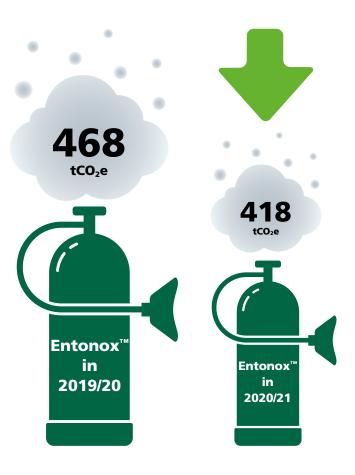
Our use of Entonox™ (50/50 medical grade oxygen and nitrous oxide) and medical grade nitrous oxide, combined, contributed over 418 tCO₂e in 2020/21, a drop from 468 tCO₂e in 2019/20.

Nitrous oxide is a potent greenhouse gas and is used extensively in maternity and to a lesser degree, in Accident and Emergency care and general surgery.

It is a useful drug, and so reducing its use may be problematic in some fields of medicine. However, there are innovations in capturing and catabolising exhaled nitrous oxide, including 'cracking' devices.

Nitrous oxide use is steadily falling in surgery, as more efficacious anaesthetic and analgesic agents are superseding its use. **Methoxyflurane** is an alternative medicine that can be self-administered under medical supervision, in a similar fashion to nitrous oxide. It has a lower global warming potential (GWP) than nitrous oxide and switching to methoxyflurane would lessen emissions at point-of-use.

However, this comes at a cost, as methoxyflurane is delivered in non-reusable 3ml inhaler pens, creating additional non-recyclable waste. This is something that we would like to avoid as a Trust and will look for innovative ways to capture greenhouse gases or look to sustainable alternatives that are less impactful to the environment.



Desflurane

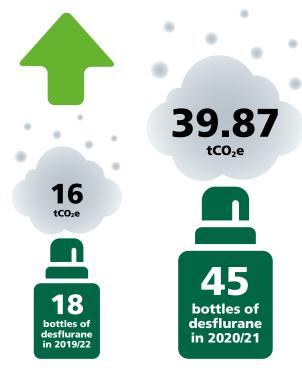
Desflurane is a fluorinated volatile anaesthetic. Like many fluorinated compounds (such as refrigerants and propellants), it has a very high GWP. Desflurane has a GWP rating of 2,540, which means it is 2,540 more potent as a greenhouse gas than carbon dioxide.

Other volatile anaesthetics, such as sevoflurane and isoflurane have far lower GWP ratings, 130 and 510 respectively. Shifting away from desflurane to these alternatives will significantly reduce emissions. However, both sevo- and isoflurane use will have an impact on the atmosphere.

The NHS Standard Contract and engagement efforts with clinicians have targeted a reduction of desflurane as a percentage of all volatile gas use by volume, from 20% in 2020/21 to 10% in 2021/22 across all NHS providers.

We used 45 bottles of desflurane in 2020/21, emitting 39.87 tCO₂e, up from 18 bottles and 16 tCO₂e respectively, in 2019/20.

Desflurane use now accounts for 14% of all volatile anaesthetics used: sevoflurane use is 78% and isoflurane use is 7%. We need to reduce desflurane use, with a corresponding uplift in sevo- or isoflurane.





Inhalers

We prescribe both Dry-powder (DPI) and Metered Dose Inhalers (MDI). Metered dose inhalers use fluorinated gases as the propellant:

in 2020/21, the prescription of 3,005 MDIs contributed to 138 tCO₂e, whereas the 1200 prescribed DPIs equated to around 1 tCO₂e.

The NHS Standard Contract stipulates that 30% of all inhalers prescribed across NHS England should be DPIs, potentially saving 374 ktCO₂e per year, according to the NHS Net Zero report.

New **Impact and Investment Fund (IIF) indicators** which have been released provide an additional steer on prescribing lowercarbon inhalers.

Dry-powder inhalers are an appropriate choice for many patients and contain as little as 4% of the GHGs emissions per dose

compared with MDIs. Fluorinated gases in MDIs mean that each 10ml to 19ml inhaler cannister has the equivalent emissions of 30 to 80kg of carbon dioxide!

In 2020/21, DPIs accounted for 29% of all inhalers prescribed by the Trust – 1% below the target rate.

The Trust will work with other care providers to aim for 30% of all inhalers prescribed being DPIs (from 1,200 to 1,261 prescriptions per year), to save an additional 25 tCO₂e (see figures 29 and 30).

At the end of use, inhalers still contain as much as 20% of high-GWP propellant. Greener disposal of these items, where residual fluorinated gases are captured and destroyed, is therefore another key priority. Lastly, overuse of inhalers leads to 250,000 tonnes of equivalent carbon emissions (250 ktCO₂e) annually across the UK, according to a **new study**.



Our Ambitions: Medicines

- Collate inhaler prescribing data and report quarterly.
- Collate volatile anaesthetic gas use data and report quarterly.
- Switch to methoxyflurane (Penthrox™)
 in preference to nitrous oxide
 analgesia/anaesthesia where clinically
 appropriate.
- Collate methoxyflurane (Penthrox[™])
 use data and report monthly.
- Explore the procurement and use of nitrous oxide 'cracking' devices, or other innovations.
- Work with our anaesthetists and pharmacy to significantly reduce the use of desflurane in surgical procedures to less than 10% of total volatile anaesthetic gas by volume.
- Set a target of prescribing at least 50%
 DPIs for all inhaler types.

- Set a goal to reduce MDIs to 25% of all non-salbutamol inhalers by prescribing DPIs and soft mist inhalers, where clinically appropriate.
- Set a goal of reducing the average emissions from salbutamol inhalers to 11.1kg per inhaler, where clinically appropriate.
- Work with our clinicians and Clinical Pharmacy Team to enable uptake of alternative inhalers where appropriate.
- Review current processes and reduce 'double prescribing' and wastage in Pharmacy.
- Review piped gas systems and gas cannisters for leaks monthly.
- Seek other alternative gases that are less volatile to reduce sevoflurane, desflurane, or Isoflurane use.

- Work with the CCG to ensure that prescribing and product use are standardised across the Island healthcare system in the most sustainable way possible.
- Review gas usage and SOPs to ensure that gases are used with minimal wastage.



Supply Chain and Procurement



The NHS is a major purchaser of goods and services, with NHS England alone procuring around £30 billion of goods and services annually. Procurement has major potential social, economic, and environmental impacts both locally and globally.

This includes the power of using local suppliers, the climate performance of our equipment and estate, and preventing modern slavery in supply chains.

The Trust is committed to engage with our suppliers to meet the needs of the Green Plan and support the sustainable procurement objectives of NHS England wherever practicable.

34,802 tco₂e

Procurement and Climate Action

Our supply chain emissions represent a huge portion of our overall carbon footprint. We have baselined our estimated supply chain emissions for 2020/21 utilising the GHG Protocol 'Scope 3' spend-based method. Spend-based emissions change yearly with total spend and will not help measure progress.

Emissions from our supply chain were estimated to be 34,802 tCO₂e in 2020/21.

As a Trust, we procure most items and services through centralised NHS/government frameworks, such as NHS Supply Chain.

These centralised frameworks already provide best value through bulk purchasing power and consolidation of orders.

We cannot control or influence the sustainability aspects of these routes of procurement and will benefit from the decisions made in how these frameworks operate. We can however influence our providers and organisations by purchasing responsibly and choosing to not purchase from businesses that choose not to be sustainable.



In addition, the Trust has been a signatory of the NHS Single Use Plastics Pledge since October 2021 and aims to reduce plastic catering consumables significantly.

Social Value Model and Net Zero

The NHS, in line with recent government requirements, is mandated to adopt a new social value and environmental standard. A new Sustainable Supplier Framework will be launched in 2022, and from April 2022, all NHS tenders have to include a minimum 10% net zero and social value weighting (as per **Policy Procurement Note 06/20**).

From April 2023, contracts above £5 million require suppliers to publish a carbon reduction plan for their direct emissions as a qualifying criterion (as per **Policy Procurement Note 06/21**).

By 2030, all suppliers will be required to demonstrate progress in-line with the NHS' net zero targets, through published progress reports and continued carbon emissions reporting.

This body of work is part of the NHS' Net Zero Supplier Roadmap that was launched in October in 2021, one year after the initial net zero declaration. See Figure 4 for the full roadmap.

These additional requirements will enable us to determine the carbon and social impact of the products and services that we buy more accurately, and ensure suppliers are reducing the emissions associated with their operations and products.

In the interim, we will explore ways to reduce single-use items and research how we can incorporate reusable items such as masks and aprons into our clinical practice.



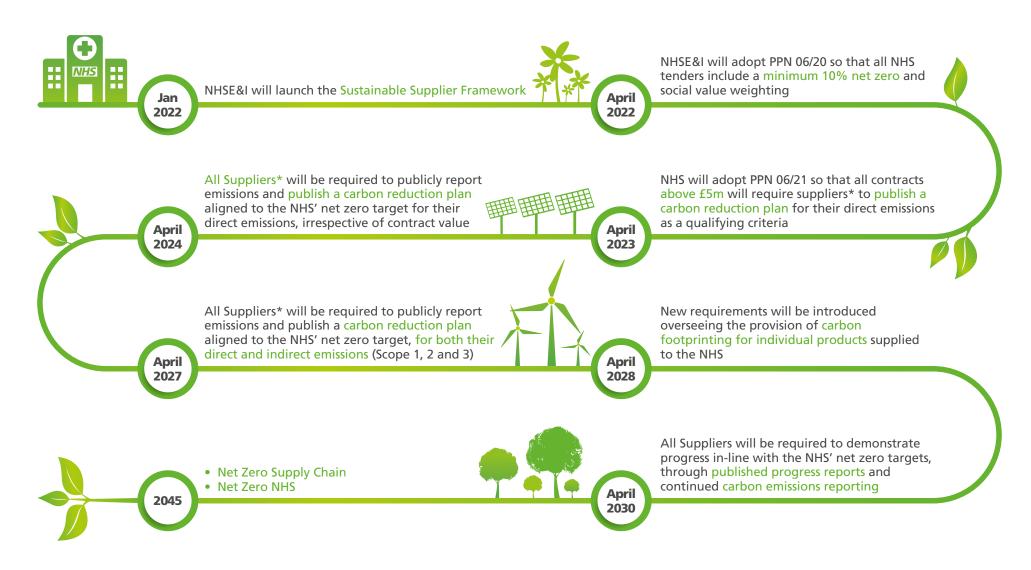


Figure 4. The NHS roadmap for suppliers and the supply chain to reach net zero by 2045.

Product retainment and lifecycle extension

Procuring well and choosing quality predominantly over cost, will ensure better value for money and social and environmental benefits. This will remain a core principle for the wider NHS and our Trust. We will consider the whole-life cycle of products, including its final disposal, in our decision-making process for the standardisation of clinical and non-clinical products, most particularly when choosing disposable products over re-usable alternatives.

Keeping products in service for as long as possible, through maintenance and repair, is fundamental to a circular economy and drives down waste.

Critical care medical products are kept in good working order at our Trust, as per manufacturer's and the Medical and Healthcare Products Regulatory Agency's (MHRA) guidance. Only when an item is no longer supported by the manufacturer, or is beyond economic repair, do we consider disposal.

Most 'obsolete' working medical equipment is sent to an auctioneer, where it is sold on, often abroad, for continued use, which has both social and environmental benefits. Equipment that is beyond repair is disposed of through the appropriate waste channels, and components recycled.

Reclaiming, cleaning/refurbishing and reissuing mobility aids will negate useful items being scrapped.

Mobility aids are given to outpatients where appropriate. Unless something is described by the manufacturer as 'single use' or 'single patient use' then all medical devices are considered reusable, and we will continue

to keep them in use until the end of their described service life or until they become uneconomical to repair.

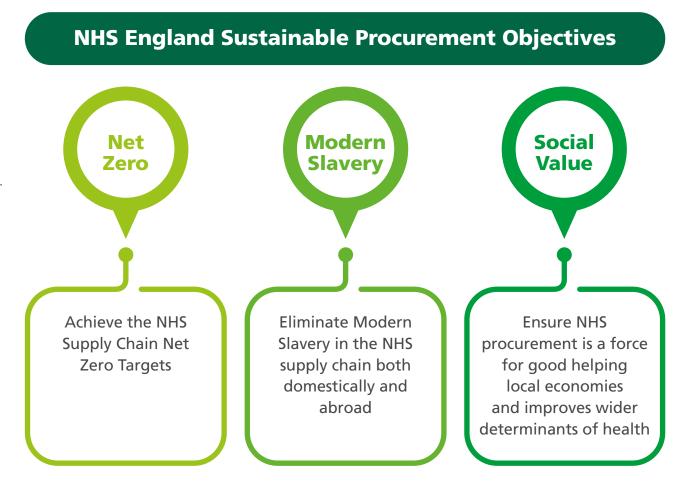
We will continue to utilise our medical equipment where possible and look to implement a more beneficial re-use scheme for mobility aids and other medical equipment that is issued to outpatients.



Our role as an anchor trust

This involves identifying opportunities for regional Small and Medium-sized Enterprises (SMEs), and engaging suppliers to ensure wider community benefits are met.

While we cannot reserve spend locally, we do take proactive steps to support inclusive growth, including a policy on the payment of the Real Living Wage for our service suppliers.



Our Ambitions: Supply Chain and Procurement

- Review our sustainable procurement approach to find relevant links that enable our Green Plan and work closely with NHS Supply Chain and NHS Improvement to promote their sustainability programmes.
- Adhere to the requirements of the NHS Sustainable Suppler Framework.
- Ensure tenders adopt the new social value procurement note PPN 06/20 and carbon management PPN 06/21 in major contracts from April 2022 and 2023 respectively.
- Ensure the purchase of 100% closedloop recycled paper.
- Ensure tenders adopt the carbon management PPN 06/21 in major contracts by April 2023.
- Identify wider social, economic, and environmental benefits for the local, national, and international community and population when considering the purchase and specification of products and services, discussed, and agreed with the Coordinating Commissioner.

- Create a new system for cataloguing and reclaiming mobility aids and other devices from patients.
- Engage a key supplier on plans to align their operations and delivery with NHS Net Zero targets over time. Leverage NHS England and NHS Improvement Supplier Engagement Strategy approach for fostering partnerships.
- Work with NHS Supply Chain to address Modern Slavery and domestic and international supply chain environmental, and human rights risks, including those linked to PPE.
- Work with Procurement to drive forward a policy on 're-use or re-home' Trust wide to prevent unnecessary waste generation.
- Work with Procurement to draft
 a stringent Procurement Policy
 that drives forward Sustainable
 Procurement practices for purchasing
 Trust wide with new processes and
 procedures to prevent waste.

- Enable procurement to support Social Value and Anchor Institution NHS aims, e.g. understanding and increasing local, SMEs and social enterprise spend or collaborating with suppliers to promote positive action in equalities or to collaborate on innovation or climate action.
- Consider the whole-life cycle of products in the decision-making process for the standardisation of products.
- Work to identify impactful future supply chain emissions reductions opportunities and links to climate adaptation and other Green Plan commitments in procurement specifications and through contract delivery.
- Adopt the Sustainable Procurement ISO 20400:2017 System to ensure that we are adhering to Sustainable Procurement practices.



Food and Nutrition



Food illustrates the links between climate change and public health. The NHS Long Term Plan commits us to promote plant-forward diets and reduce unhealthy options like sugary drinks on NHS premises. Not only will these actions help prevent obesity and non-communicable disease, but they will also play a role in reducing our greenhouse gas emissions and environmental impact.

Food production accounts for up to 26% of global greenhouse gas emissions. Food and livestock production has a huge impact on biodiversity as well, and according to **research** collected by **Our World in Data** "of the 28,000 species evaluated to be threatened with extinction on the IUCN Red List, agriculture and aquaculture is listed as a threat for 24,000 of them".

While promoting healthier foods and reducing emissions, the NHS can also source more food from local and regional producers where possible, increasing the positive economic impact for our communities and reducing the emissions associated with food transport.

The Trust will work to fulfil Long Term Plan priorities for food provision on our premises,

promoting plant-forward diets, higher welfare and more sustainable food options, and supporting regional producers wherever we can.

From September 2020 until September 2021, we served 175,082 meals (3 meals per day), which averages out at 14,590 meals per calendar month.



In previous waste audits, we have ascertained that an average of 4,428 meals are wasted per month, which translates into 8% of all meals ending up as waste.

We offer a wide choice of meals for inpatients, including vegetarian and vegan options and other dietary requirements.

After signing the NHS' Single Use Plastics Pledge, we are in the process of removing all single-use plastics from out catalogue.

Our menu works on a two-week rota all through the year, and the menu has not been changed in the last four years. The meals are all cooked and stored on site at St Mary's Hospital until the catering porters deliver the meals in the heated/ chilled trolleys. Our ingredients are sourced from Bidfood including our meat, dairy, and fresh

vegetables. However, we have an islandbased provider called Grace's Bakery who provide our patient sandwiches.

Currently, menu cards are delivered to the ward and the individual patient picks what they would like from the menu card provided for that day. When completed the ward returns the filled-out menus to the kitchen for the chefs/catering team to prepare for the lunch time and supper meals.





Our Ambitions: Food and Nutrition

- Review food and catering to explore opportunities to push forward Long-Term Plan plans to address obesity, benefit IOW's local area, and reach Net Zero emissions.
- Explore a digital meal system for at least one NHS site to enable accurate meal planning and reduce food waste.
- Phase in more Plant-forward diets and other updated NHS requirements and explore greater seasonal menu changes.
- Limit sugary drinks sales at our facilities and fulfil other updated NHS requirements.
- Work with NHS Supply Chain to ensure positive impacts from contract management and maintain updates to Government Buying Standards sustainable food criteria.

- Work with regional partners to identify opportunities for local and SME food producers.
- Ensure all food providers meet or exceed the requirements outlined in Report of the Independent Review of NHS Hospital Food.
- Review internal and NHS strategies for sustainable food procurement, including sustainable fish, elimination of palm oil or limit to RSPC-certified palm oil and Fairtrade items where relevant.
- Continue to work with patients and partners on the link between food, health, and obesity, as well as the emissions impact.
- Work to eliminate single-use plastics and reduce alternative single use receptacles in the café and across the hospital with eventual eradication.

- lmplement a single use levy on non-reusable receptacles in the café e.g. cups, cutlery, etc, which will go toward projects for sustainability projects in catering.
- Roll out a reusable receptacle takeaway food programme to further cut down the amount of single use plastics and alternatives that are used.
- Offer a discount to those that choose to bring their own take away receptacles.
- Continue to expand menu choices to suit staff, patient, and visitors dietary/ medical choices and needs.



Climate Adaptation



Climate change will make extreme weather, such as heatwaves, droughts, and flooding, more prevalent. Increased risk of Vector Borne Diseases, such as Lyme's Disease, may also impact our local communities. Sea level rise presents a considerable threat to our Island, and this has been accounted for in our emergency planning.

The changing climate poses risks for vulnerable populations in our community, but also impacts our Trust's estate, ability to operate and supply chain.

We already engage with other public authorities and partners in tackling extreme weather events, such as heat waves and flooding. IOW will analyse these risks and develop actions for our care delivery, estate planning and management, including flood risks across our estate and service area. The

Emergency Planning Team for the Trust holds our Adverse Weather, Heatwave, and Water Contingency plans.

Climate change has serious implications for our health, wellbeing, livelihoods, and society. Its direct effects result from rising temperatures and changes in the frequency and strength of storms, floods, droughts, and heatwaves – with physical and mental health consequences (**The Lancet, 2017**)

The NHS Long Term Plan reinforces the requirement to embed resilience and sustainability into our healthcare services. Climate change adaptation is critical to achieving this. The impacts of climate change on our health, services, infrastructure, and our ability to cope with extreme weather events will place significant additional demands on our services in the future.







Our Ambitions: Climate Adaptation

- Appoint a Climate Change Adaptation lead and follow the recommendations of the third Health and Social Care Sector Climate Change Adaptation Report.
- Embed Climate Change as a strategic risk within our corporate risk register and manage appropriately.
- Create an ISO14090 Climate Change
 Adaptation Plan, including plans for
 adapting our premises to mitigate
 climate change and extreme weather
 risks, using a recognised methodology,
 that is routinely reviewed considering
 the changing climate and scientific
 advancements.

- Work with NHS Supply Chain to better understand the climate change risks in our supply chain and proactively seek to make our supply chain 'climateready'.
- Embed and adapt existing healthrelated contingency planning, such as Heat Wave Plans to reflect predicted climate change impacts.
- Incorporate newly emerging climaterelated health care risks into our contingency planning, such as the increasing prevalence of Vector Borne Diseases.





Summary

This Green Plan is a living document and will be regularly reviewed for progress against the action plans. As such, actions and targets may be revised where necessary. Adequate budgets and resources will be allocated to achieve our goals and deliver sustainable care. We will look to achieve the 'quick wins 'first, although significant investment will be required in future years, especially in making our buildings 'climate-ready'. Climate Change poses many threats to our care population and how we deliver care. This Green Plan will enable us to become an adaptable and resilient organisation. It will help steer our direction of travel with other local anchor institutions, bolstering our ability to provide a continued critical service. Our dedicated workforce is core to our care provision and delivery of this Green Plan. With the necessary structures in place, it will be our people and service users









Contact us

Kayleigh Richter

Estates Management Department, St Mary's Hospital, Newport, Isle of Wight PO30 5TG

iownt.sustainability@nhs.net