

AMBITION

- A Sustainable Development Management Plan (SDMP) is a board approved document that assists NHS organisations by clarifying their objectives on sustainable development and establishing a plan of action.
- It is NHFT's ambition to contribute to a sustainable health & social care system which works within the available environmental, social and financial resources while seeking to protect and improve health for current and future generations.

PROGRESS

- The Trust has selected the 2011/2012 financial year for its carbon footprint baseline. Over the 2011/2012 year, the Trust's direct carbon footprint was 11,779 tCO₂e (tonnes of Carbon Dioxide equivalent)
- The following progress has been made towards becoming a more sustainable healthcare provider:
 - A Sustainability Committee has been established with membership from key departments with responsibility for implementing the SDMP
 - The SDMP and associated Action Plan were updated in September 2017
 - The Trust's direct carbon footprint for 2016/2017 is 8,947 tCO₂e, which is a reduction 24% compared to the baseline
 - Carbon emissions from electricity consumption have decreased by 28% since 2011/12
 - The Trust's response to the Sustainable Development Unit's (SDU) Sustainable Development Assessment Tool (SDAT) was completed in November 2017

IN PROGRESS

- The Sustainability Committee is reviewing the most recent response to the SDU SDAP to determine relevant areas of focus for the coming months
- The Trust is currently arranging a re-certification audit for the Investors in the Environment award. The Trust previously earned the highest level of the award
- The Trust has been running an electric vehicle trial for pool cars, the results of which have been regularly reported to the Sustainability Committee
- The Trust completed its first staff transport survey approximately 1 year ago and is preparing to undertake another one

Sustainable Development Management Plan (2017)

CONTEXT & LEGISLATION

The following legislative drivers affect the Trust and will influence its sustainability agenda:

1. Climate Change Act (2008)
2. 2014 F-gas Regulations
3. Health & Social Care Act (2012)
4. Public Services Social Value Act (2012)
5. Energy performance of buildings directive
6. NHS England Carbon Reduction Strategy 2009

CARBON EMISSIONS

Summary of key 2016 / 17 carbon emissions data.

Grand total emissions for 16/17 were 8,947 tCO₂e, this is a 24% reduction on the 2011/12 baseline.

Electricity consumption – 3,889 tCO₂e
 Gas consumption – 3,124 tCO₂e
 Water consumption – 86 tCO₂e
 Business travel – 1,827 tCO₂e

SDMP PURPOSE

The SDMP has been designed to help the Trust:

1. Meet minimum statutory and policy requirements of sustainable development
2. Save money through increased efficiency
3. Improve the environment in which care is delivered for patients and staff
4. Demonstrate a good reputation for sustainability
5. Align sustainable development requirements with the strategic objectives of the organisation

CLIMATE CHANGE RISKS

1. Reduction in water availability for hospitals, especially during summer
2. Loss of staff hours due to high internal building temperatures
3. Increased risk of mortality and morbidity from heat related illness
4. Increased risk of flooding
5. Increased ozone concentration at ground level and increases in associated respiratory illness
6. Added burden on healthcare organisations in responding to more frequent flooding, heat waves and other extreme environmental conditions

NEXT STEPS

1. Implement relevant actions from the most recent SDU Sustainable Development Assessment Tool (SDAT) submission
2. Achieve accreditation to the Investors in the Environment award
3. Continue progress towards the Trust's target of reducing direct carbon emissions by 28% by 2020, compared with the 2011/12 baseline.
4. Update the internal action plan with relevant tasks from the most recent SDAT submission.



“Sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs.” Brundtland Commission, 1987.