

WEST HERTFORDSHIRE HOSPITALS NHS TRUST

**SUSTAINABILITY STRATEGY PROGRESS REPORT
31ST JANUARY 2013**

1. Purpose of Paper

The Trust is required to meet national targets for sustainability under a variety of headings. This paper sets out the national context, the Trust's current position and future direction.

2. National and Local Context

Sustainability

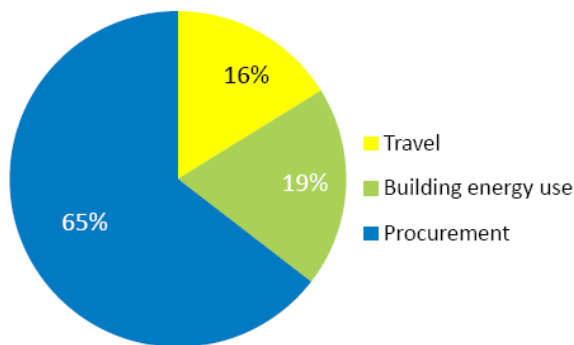
Sustainability is about balance and it includes three key areas: 'Economic Sustainability', 'Social Sustainability' and 'Environmental Sustainability'. Carbon reduction and environmental sustainability are common topics, but sustainability for the NHS is much broader than this – it is about how we deliver care, how we create a healthier happier population, how we ensure we can afford to continue to deliver care in the future, and strike the right balance between these three areas.

The Department of Health has declared that is now mandatory that all NHS Trusts report on sustainability as part of their annual reporting process. The NHS Sustainable Development Unit and DH developed a template framework of data for inclusion, which will be used as the basis of the Sustainability section of this year's Annual Report & Accounts.

In 2007 the NHS England carbon footprint (split by travel, building energy use & procurement) rose to 21 million tonnes of CO₂e (MtCO₂e). This figure is an update to the NHS Carbon Reduction Strategy for England's (CRS) carbon emissions graph. There are three key changes:

1. NHS England now reports on Greenhouse Gas (GHG) emissions, displayed in CO₂ equivalent (CO₂e), in addition to CO₂ itself. This is consistent with the 2008 Climate Change Act and also the 2009 Defra GHG reporting conventions;
2. The procurement data has been updated from 2004 to 2007. It confirms an increase in emissions over this period. This is composed of 59% procurement, 24% building energy and 17% travel sector emissions;
3. The 2020 target has been altered in line with the amendment to the Climate Change Act (May 2009). The target is now a reduction of 34% rather than 26% based on the 1990 baseline.

In 2010 the NHS England carbon footprint stopped rising and started levelling off at circa 20 MtCO₂e. The latest data projects a 5.4% (1 MtCO₂e) decrease in the NHS England carbon footprint by 2015. A further cut of 4.6% (0.9 MtCO₂e) will be needed if the NHS is to reduce its emissions by 10% by 2015 as proposed in the NHS Carbon Reduction Strategy. With the revised NHS budget from the 2010 spending review and improved projections of electricity from renewable sources the forecast for 2015 has also reduced. However there is still some way to go to reach a 10% reduction by 2015. (NHS England Carbon Footprint; published 2012 SDU)



Procurement remains the largest of the three primary sectors. Both the steady growth in procurement emissions and decreases in the other sectors have increased the proportion from 60% in 2004 to 65% in 2010.

Building energy use emissions have decreased, with the move from coal and oil to a greater reliance on gas. The decrease in emissions takes the proportion from 22% in 2004 to 19% in 2010. Travel emissions have remained fairly constant and now represent 16% of emissions in 2010.

NHS Midlands and East under the direction of Chief Executive, Sir Neil McKay, lead on the sustainability agenda and are currently hosting the NHS Sustainable Development Unit (SDU) which provides expert advice and support to the NHS to help it become a more sustainable organisation environmentally, financially and socially.

3. Climate Change & Adaptation Plans

Climate Change is recognised as the biggest public health threat this century. Health and social care organisations are at the forefront of action to address the health impacts of climate change and need to adapt to, and prepare for, these circumstances. Adverse weather events and climate change are affecting people and services now and this is predicted to increase in the future.

The development of the UK's first National Adaptation Programme – a requirement of the Climate Change Act 2008 - provides a framework for action. Addressing the health impacts of climate change is one of its main themes. Building preparedness and resilience to the predicted health impacts of climate change now, will save costs in the short and long term, protect lives and deliver health outcomes.

The process of developing these plans should integrate with the development and refinement of emergency preparedness and business continuity plans.

Adaptation planning will be an integral component of Sustainable Development Management Plans (SDMPs), and the Trust is well placed with the work on the Strategic Estate Rationalisation Programme to be planning ahead for the options available to incorporate these considerations and standards.

4. Good Corporate Citizen Reporting & Sustainability Monitoring

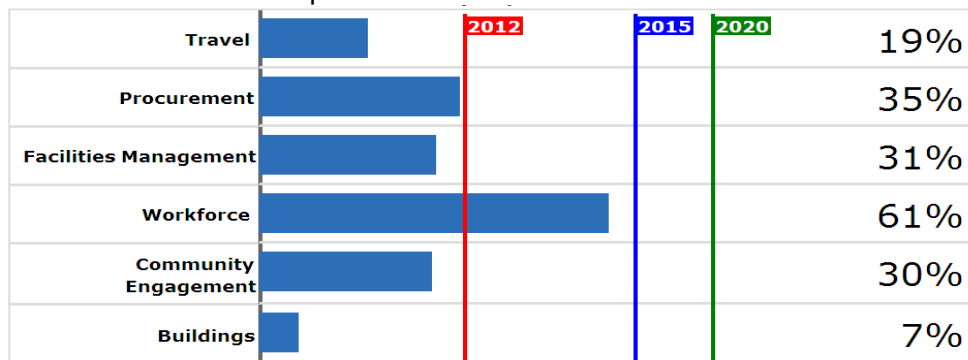
The Good Corporate Citizen Assessment Model (GCCAM) was developed by the Sustainable Development Commission in 2006 and revised in 2009 with input from the NHS SDU. The Good Corporate Citizen Model enables NHS Trusts to identify their current contribution to sustainable development in six key areas:

- Travel
- Procurement
- Facilities Management
- Workforce
- Community Engagement
- Buildings

It also provides a framework for monitoring performance in these areas, and identifies ways to integrate social, economic and environmental considerations into Trust core activities.

WHHT has adopted this model and the results of the assessment to form the basis of the Management Plan. The results of the October 2012 assessment are shown below. This confirmed the position we know about our buildings, and highlighted the need for more communication and engagement with staff in general in all of these areas to raise the profile of the sustainability agenda and the specifics of what is involved and what can be done. Specific groups have been initiated to take action in these six areas which will take ownership of the targets and how we intend to measure and monitor progress.

West Hertfordshire Hospitals NHS Trust

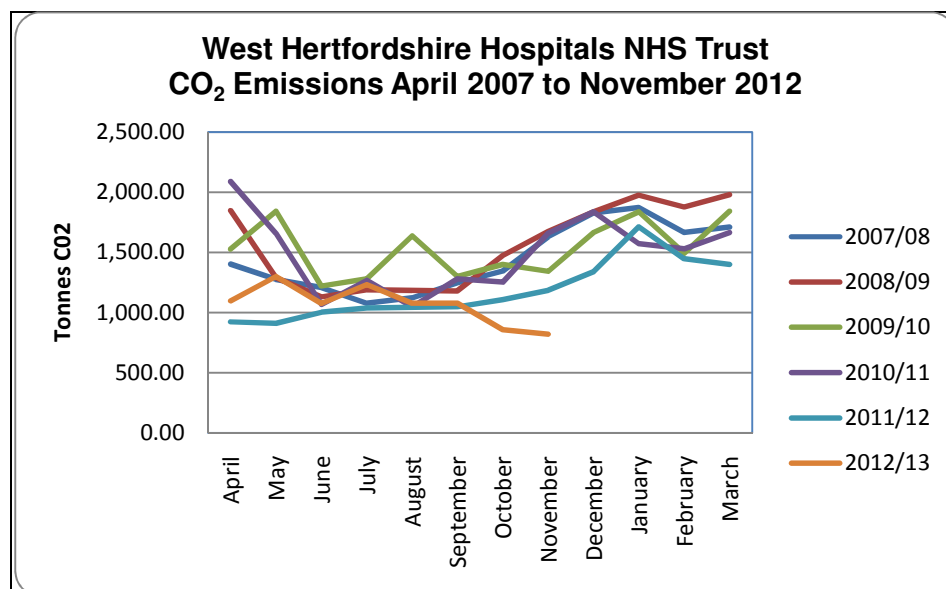


This approach is supported by the Senior Public Health Development Manager, East of England Public Health Directorate, Department of Health

5 Our Performance and Plans

5.1 Carbon Emissions and Energy Performance

The chart below shows the Trust's Building energy use CO₂ emissions for the period April 2007 to November 2012.



CO₂ emissions have reduced for the year 2011/12 due to the change of main boiler fuel at Watford General from heavy fuel oil to natural gas. This resulted in a reduction of the predicted cost of the new CRC Scheme to the Trust of £50,220 (actual amount paid £189,780). Validation of the Trust's processes is being undertaken by AEA our external Carbon consultants.

5.2 Working Differently

The Trust is in the process of implementing the business case to improve the insulation of some of the Trusts buildings plant and equipment. This involves a one off spend of £90K in year 2012/13 to release £100K recurrent savings by:

- Increasing the quantity and quality of insulation on steam & hot water pipe work
- Replacement of valve and boiler jackets.
- Providing and increasing the depth of thermal insulation in roof spaces of properties owned and operated by the Trust.
- This will reduce the total CO₂e produced by the trust by 722 tonnes per year.

Also underway is a scheme to replace inefficient electric motors throughout the Trust. The objectives of the project are to:

- Deliver £40,000 in recurrent savings in electricity costs by changing existing inefficient electric motors for modern high efficiency units
- Reduce the total CO₂e produced by the trust by 240 tonnes per year.

5.3 Carbon Reduction Projects

The most significant project underway is the Combined Heat and Power (CHP) installation at Watford General Hospital. The project cost is £2.9m and will realise savings of approx. £400,000 pa and result in a further 23% reduction in carbon emissions. The project is being reviewed by the Watford Health Campus partners to find the best solution of incorporating this into the wider scheme plans.

5.4 Waste Management

Following on from continuing work to increase recycling and reduce the volume going to landfill, waste streams now show that we have substantially increase the recycling which stood at around 4% in April 2012, latest figures in December 2012 show that at across the 3 sites they are between 35-43% with the Trust aiming for approximately 60-70% by Autumn 2013.

It should be noted there has been a slight increase in clinical waste due to a rise in activity over the same period, particularly at Watford where we have increased bed capacity. However, we are launching targeted communications for staff to raise awareness.

6. Other Initiatives

6.1 Sustainability Programme Board

The Trust has set up an Executive Committee for Sustainability, known as the Sustainability Programme Board, chaired by Louise Gaffney, Director of Strategy and Infrastructure and with Mahdi Hasan, Non-Executive Director as a sustainability champion. It is responsible for developing and implementing the SDMP. In order for the Sustainability Programme Board to set targets which are quantified and time framed in other areas of sustainability, the Trust will use the Good Corporate Citizenship Assessment as a performance measurement tool to monitor progress of the action plans, routinely assess Trust performance and report progress to the Board.

6.2 NHS Sustainable Development Unit Route Map

The NHS SDU has developed a framework for sustainable health, in line with the QIPP agenda, involving Trust representatives and leaders on health and sustainability who are tasked with addressing two fundamental questions;

- What does a truly sustainable health service look like?
- What components need to be put in place to get there?

A set of six themes has been identified to help NHS organisations co-ordinate and take actions that will save money and resources while improving health and making changes future-proof. These are;

Models of care	Use of resources
Technology	Societal behaviours & attitudes
System governance	Individual behaviours & attitudes

Organisations and individuals are asked to collaborate with each other and the SDU in shaping the Route Map. A further workshop is planned in February 2013. The standard route map is shown in Appendix 1.

6.3. Demonstrating Sustainability Implications

The SDU has asked all Chief Executives to consider the addition of a “Sustainability Implications” section to the Trust Board papers cover sheet, on the grounds that it would demonstrate that sustainability is “at the heart of your organisation’s Board decision-making process”. This emphasises that the proposal is “consistent with delivering cost savings and the pursuit of modern models of care” and should not be seen as burdensome.

7. Next Steps

The Trust Board is asked to;

- Note the report and progress made to date.
- Agree to the recommendation of the SDU to include reference to ‘sustainability implications’ as part of the Board cover sheet for all papers.

Appendix 1 - The Standard Route Map

