

# Hertfordshire and West Essex Integrated Care System

## Green Plan 2022 to 2025

14th March 2022

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# Foreword

Responding to climate change is arguably the primary challenge of our generation. The NHS has a major responsibility to act through our leaders, staff, partners and the general public to reduce the NHS's direct carbon footprint (such as use of fossil fuels and our buildings) and the indirect carbon footprint (such as the sustainability practices of those supplying services to the NHS).

National government has set the NHS challenging net-zero carbon targets. Also, growing numbers of staff and patients are looking to the NHS to take a lead. The increased use of PPE and single use plastics during the pandemic has been a further catalyst to this groundswell. NHS Trusts have many volunteer Green Champions looking to find ways to make a difference in carbon reduction and other environmental impacts.

Many of the strategies to reduce our carbon reliance are the same as those we have for improving long term health (insulating housing, diets high in vegetables, more access to green spaces, physical exercise and use of digital methods that remove the need to travel); and for improving productivity and value for money (reducing waste, reducing travel costs, reducing energy costs). However, climate change risks increased prevalence of certain health conditions; we need to adapt buildings to rising temperatures and change our water use; we need to make major changes to our hospital infrastructures; there will be new productivity dilemmas where comparative products and services have a low financial cost but a high carbon cost.

We can only approach this challenge by working together across the NHS, Local Authorities and the wider community. This is of course the core purpose of the Integrated Care System that we are building across Hertfordshire and West Essex. This ICS Green Plan describes our vision, goals and the key areas where we aim to collaborate in the next 3 years. Our aim is that each ICS partner will take a lead on one aspect of the ICS collaboration. Ranging from sharing best practice to acting jointly. Making a change in our approach to our procurement processes from service specification, selection criteria and decision making will be especially important. We will need to be realistic regarding resources and prioritise those areas of greatest impact and achievability.

As our first Green Plan, we are at the very beginning of this challenging agenda. The document describes there are already many areas of strong progress of which we can be proud. The sophistication of our carbon literacy will continue to develop supported by regional and national colleagues. It therefore falls to each of us to take a lead in enquiring, understanding, communicating and designing how we can achieve the daunting but essential goal of a net-zero carbon NHS by 2045 and the milestones towards this.

**Peter Wightman**

Hertfordshire and West Essex ICS Sustainability Executive Lead

# 1. Introduction

## 1.1. Context

The UK government has declared a climate emergency and legislated for the UK to become a low-carbon economy, reaching net zero emissions by 2050. Radical changes are needed in all sectors of society to reduce our environmental impact, and healthcare services are no exception.

The 'Delivering a 'Net Zero' NHS' report in 2020 reinforced the urgent need for all NHS organisations to take action to reduce carbon emissions arising from their operations and embed sustainability within their strategies and cultures. The NHS ambitions are to reach net zero emissions (the NHS Carbon Footprint) for the care we provide by 2040 and zero emissions across the entire scope of our emissions (the NHS Carbon Footprint Plus) by 2045.

The climate emergency is a healthcare emergency. Rising global temperatures are already having devastating effects on global health due to more frequent extreme weather events, heatwaves, food insecurity, a rise in climate-related migration, biodiversity loss, a spread of infectious diseases and worsening air pollution. Without urgent action, the climate emergency threatens to undermine all the progress made in public health over the last 50 years.

This presents a fundamental challenge to the newly formed Herts and West Essex Integrated Care System and its ability to achieve its four purposes:

- Improve population health and healthcare;
- Tackle unequal outcomes and access;
- Enhance productivity and value for money;
- Help the NHS to support broader social and economic development.

## 1.2. This Plan

The member organisations that form the Herts and West Essex Integrated Care System (ICS) have each produced their own Green Plans describing their response to this challenge.

<b>County Level Local Authorities</b>	Essex County Council
	Hertfordshire County Council
<b>Community and Mental Health Trusts</b>	Hertfordshire Community NHS Trust
	Hertfordshire Partnership University NHS Foundation Trust
	Essex Partnership University NHS Trust
	Central London Community Healthcare NHS Trust
<b>Hospital Trusts</b>	West Hertfordshire Hospitals NHS Trust
	Princess Alexandra Hospital NHS Trust
	East and North Hertfordshire NHS Trust
<b>Ambulance Trust</b>	East of England Ambulance Trust

This ICS Green Plan focuses on how members of the ICS will collaborate to respond to this challenge. This Plan is the result of joint work between ICS partners. It describes our vision and goals; our progress so far; our priorities for collaboration and our approach to implementation. This plan focuses on the next 3 years and will be updated annually. As our first Green Plan, it inevitably reflects our current approach and thinking which we expect to continuously evolve as our understanding of the drivers and solutions develops. Also, our future work will include areas not included in this version of the plan including primary care, local anchor institutions and the voluntary community and social enterprise (VCSE) networks.

## The Hertfordshire and West Essex Sustainability Challenge

NHS England's top-down estimate for the Herts and West Essex ICS carbon footprint plus is **534,490** tonnes of carbon per annum, including scopes 1, 2 and 3.<sup>1</sup> NHS England's estimate for HWE ICS Scope 3 supply chain annual carbon emissions is 352,470 tonnes of carbon per annum. Overall, the NHS annual carbon footprint stands at 25 million tonnes.

As well as carbon reduction, our Green Plan addresses other aspects of sustainability, including reducing resource consumption, improving social value and creating sustainable models of care.

Sustainability, including environmental, social and economic aspects, should be part of everything we do, and each decision we make. This includes considering the carbon emissions and lifetime environmental impacts of all products and processes. We need to shift to a circular economy and establish behaviours and practices that eliminate disposable culture. Building consistent language and processes on carbon literacy across our ICS will empower individuals to take action and for our ICS to embed sustainability into business-as-usual operations.

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<sup>1</sup> The emissions under NHS Carbon Footprint Plus include all other indirect emissions that occur in producing and transporting goods and services, including the full supply chain.

## 2. Sustainability Progress So Far

ICS partners have been delivering against their sustainable development management plans (SDMPs) for many years prior to their recently published Green Plans.

Several of our NHS partners were not able to meet the carbon emission reduction target of 34% by 2020 based on a 2007 baseline. Learning from past performance, this demonstrates a clear need for action to meet carbon reduction trajectories for healthcare.

This section highlights a selection of successes that ICS partners have delivered so far. For further information on partner Green Plans, please refer to their relevant websites and Green Plans.

- Our eight NHS system partners are responding to the climate crisis and have developed Green Plans for their organisations
- All of our NHS partners have taken action to reduce the use of desflurane in surgery to as little as practically possible. Some have reduced usage by up to 95%
- Two of our Hospital Trusts are currently undertaking new hospital redevelopments and are targeting net zero carbon design and operations
- We have net zero representatives in all of our organisations and a regular sustainability working group meeting
- We have delivered fuel poor grants, upgrading homes in Essex with free energy efficiency improvements
- Launched The Hertfordshire and West Essex ICS NHS Procurement Service to increase our buying power and enable greater sustainability impact
- Central London Community Hospital has carried out a detailed bottom-up assessment of its NHS Carbon footprint and adopted a Board approved, costed net zero pathway
- Share our learning on digital systems, including Electronic Prescribing and remote consultations to further reduce our footprint
- Effective roll out of electric vehicle charging infrastructure at some of our Trust's sites and the initiation of fleet transformation projects
- Some of our partners have adopted a one-stop shop approach which has improved the patient experience and created clinical efficiencies
- Our Councils have published Climate Action reports which highlight current and future environmental issues in our region and the action they are taking in response

### 3. Drivers for Change

The UK was the first major economy to legislate for net zero emissions by 2050, enshrined in legislation by an amendment made to the Climate Change Act (2008) in 2019. This climate commitment and carbon budget will ensure the UK remains consistent with the Paris Agreement temperature goal to limit global warming to well below 2°C and pursue efforts towards 1.5°C. Importantly, the trajectory for emissions reductions must accelerate, and the government set into law an interim target to reduce emissions by 78% by 2035 compared to 1990 levels.

All industries and organisations will need to take action to realise this target. For example, England’s National Health Service (NHS) is responsible for an estimated 4-5% of the country’s carbon footprint. In October 2020, the NHS became the first health system in the world to commit to achieving net zero emissions.

The climate health emergency will continue to have a huge impact if no action is taken. Air pollution is linked to conditions like heart disease, stroke and lung cancer and contributes to around 36,000 deaths annually in the UK. A study by Kings College London looking at nine English cities demonstrated that on high pollution days there are 673 additional out-of-hospital cardiac arrests and hospital admissions for stroke and asthma. Changing climates are linked to more frequent heatwaves and extreme weather events such as flooding and the spread of infectious diseases. Taking action to reduce carbon impact and embed sustainability into practice will help mitigate future demand on NHS services.

Sustainability in the NHS is driven through local and national policy, legislative and mandated requirements and healthcare specifications from the Department of Health and NHS England. The NHS Long term plan includes several commitments related to health and the environment, including efforts to tackle climate change, reduce single-use plastics, improve air quality, and minimise waste and water use. In addition, the NHS Carbon Reduction Strategy for England (CRS) sets an ambition for the NHS to help drive change towards a low carbon society.

Based on the magnitude of the problem faced due to climate change, the NHS launched the Greener NHS campaign and a net zero commitment based on two major goals and a series of targets. The two main goals defined against the 1990 emissions baseline are:

- Net zero by 2040 for emissions that the NHS directly controls (the NHS Carbon Footprint), with an 80 per cent decrease by 2028 to 2032.
- For emissions, the NHS can influence (NHS Carbon Footprint plus) net zero by 2045, with an 80 per cent decrease by 2036 to 2039.

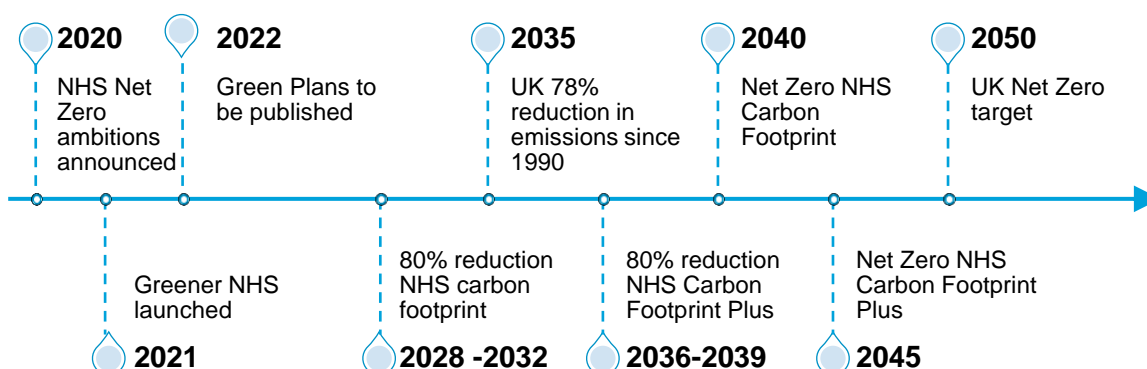


Figure 1: NHS and UK Net Zero Carbon Targets

## NHS Net Zero Carbon targets rebased from October 2020 baseline

The NHS Net Zero Carbon two major goals were rebased to an October 2020 baseline. These updates demonstrate the progress made to date on reducing the NHS carbon footprint to date. However, they also show that further focus is needed on Scope 3 emissions to reach the carbon footprint plus goal.

- To reach net zero NHS Carbon Footprint by 2040, it means we will need to reduce emissions by at least 47% from current levels by 2028-2032;
- To reach net zero NHS Carbon Footprint Plus by 2045, it means we will need to reduce emissions by at least 73% from current levels by 2036-2038.

Reflecting on the progress the NHS has made reducing carbon emissions since the 1990 baseline, a significant step change in the rate of reductions is required to continue the path to net zero by 2045

## Achieving Net Zero

The 'Delivering a Net Zero National Health Service' report published in 2020 sets out the considerable advances that the NHS has already made in improving our carbon footprint and reducing the environmental impact of our services. It provides a detailed account of the NHS' modelling and analytics underpinning the latest NHS carbon footprint, trajectories to net zero and the interventions required to achieve that ambition. In addition, it lays out the direction, scale and pace of change.

The report examines a number of the areas critical to carbon reduction and shows what the emissions sources are for the NHS. Figure 2 shows the emissions sources mapped to the Greenhouse Gas Protocol scopes and categorises the NHS Carbon Footprint.

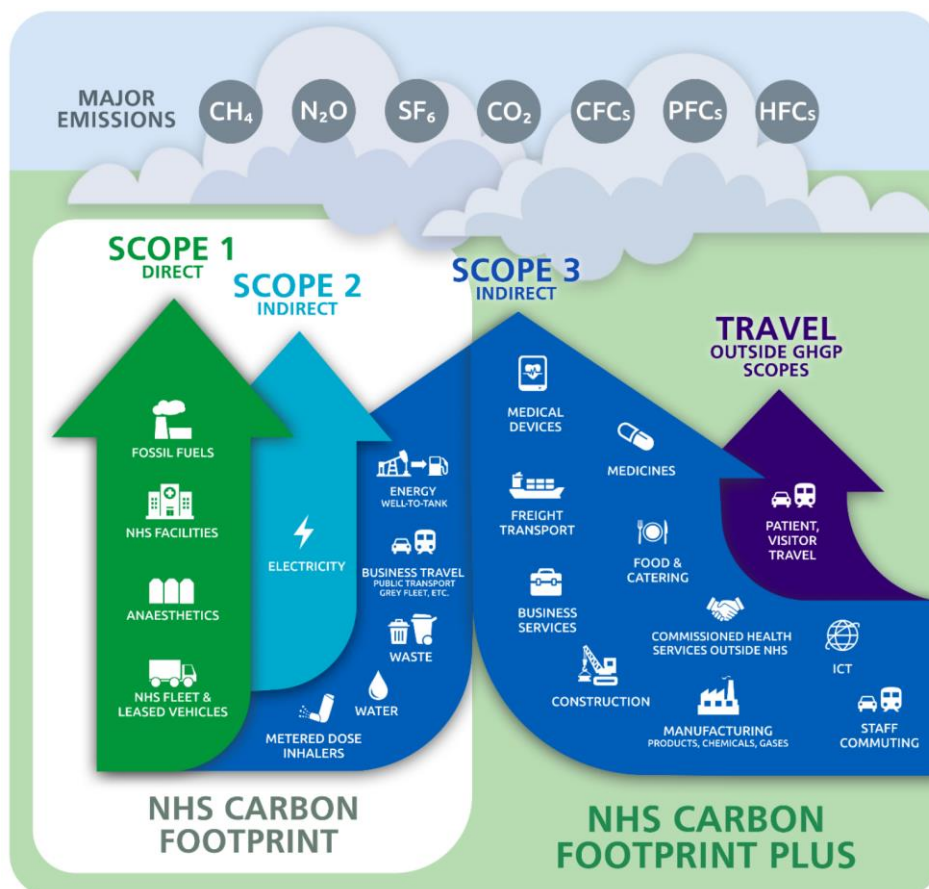


Figure 2: Greenhouse Gas Protocol scopes in the context of the NHS



**Scope 1:**

Direct emissions from owned or directly controlled sources, on site

**Scope 2:**

Indirect emissions from the generation of purchased energy, mostly electricity

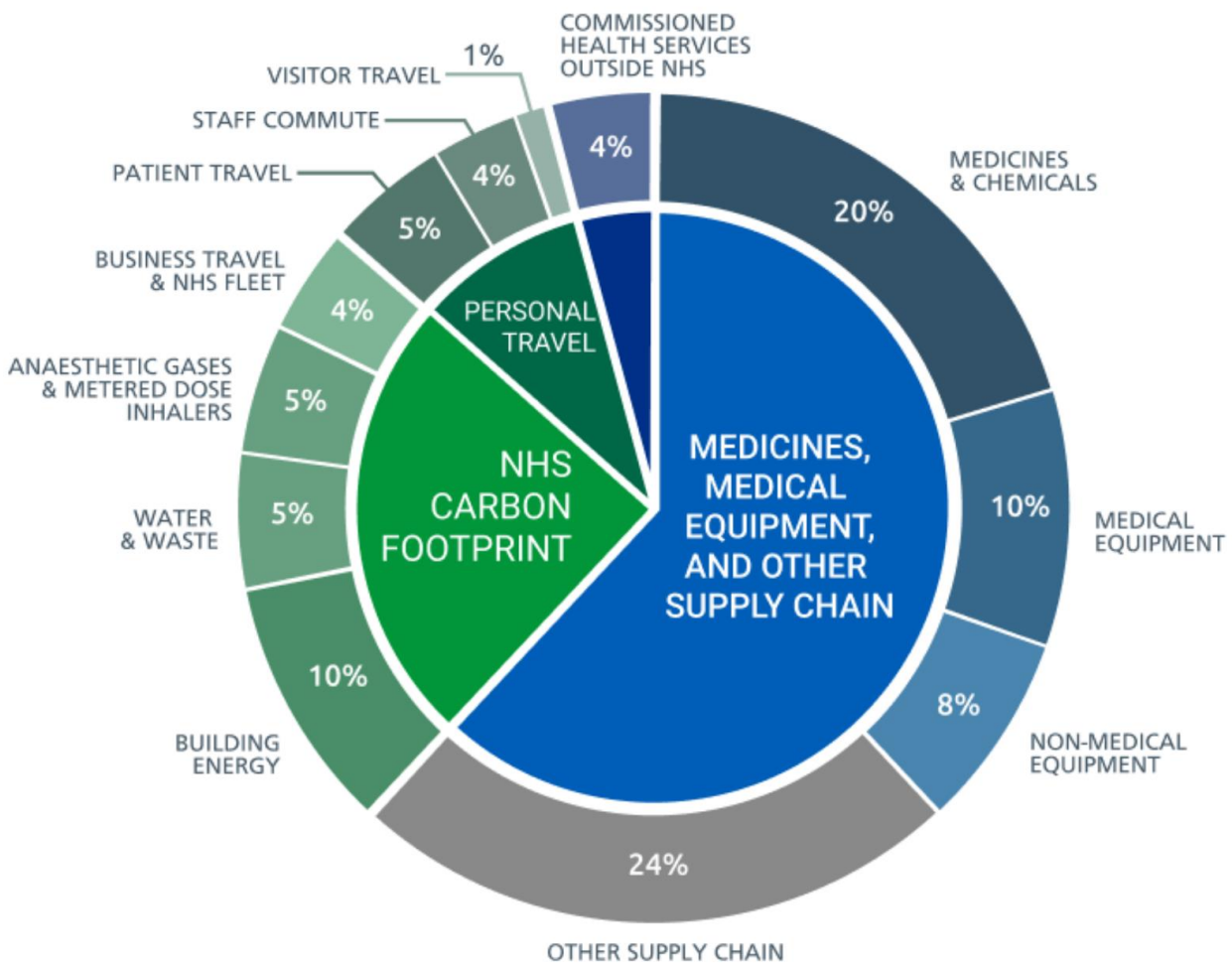
**Scope 3:**

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

NHS England's top-down estimate for the Herts and West Essex ICS carbon footprint plus is **534,480 tonnes of carbon per annum**, including scopes 1, 2 and 3. Overall, the NHS annual carbon footprint stands at 25 million tonnes.

In addition, NHS England estimates show that up to 89% of the Herts and West Essex ICS emissions come from scope three sources, including goods and services we procure and the full supply chain, patient and visitor travel.

The NHS Delivering a 'Net Zero' National Health Service report evaluated the sources of carbon emissions by proportion of NHS Carbon Footprint. The diagram below demonstrates the biggest areas of opportunity and challenge, most notably the supply chain, estates and facilities, pharmaceuticals and medical devices, and travel.



**Figure 3: Sources of carbon emissions by proportion of NHS Carbon Footprint Plus**

Source: *Delivering a Net Zero National Health Service, 2020*

## 4. About Herts and West Essex ICS

From July 2022 Herts and West Essex Integrated Care Board (ICB) will assume the functions of local Clinical Commissioning Groups and some functions from NHS England, including the commissioning of primary care services. The ICB will be responsible for strategic planning, systems leadership with the area's main providers and local authorities, procurement, monitoring and evaluation of the performance of health services to meet the needs of the local population.

The wider determinants of health impacts from climate change will not be felt equally across our communities. Our ICS will improve population health and tackle inequalities which will improve outcomes for patients and increase social and economic equity.

ICS partners agreed the following ambitions in 2019 for improving the health and wellbeing of the population:

1. Adopting a population health approach to address the wider determinants of health, reduce health inequalities, prevent illness, target resources where they will have the greatest impact and improve quality of care through integrated, affordable services
2. Meeting people's health and social care needs in a joined-up way in local neighbourhoods (where appropriate), saving time and cutting unnecessary tests and appointments. Health and social care services will support people to live independently for as long as possible
3. Adopting a shared approach to treating people when they are ill, prioritising those with the highest levels of need and reducing unwarranted variations in health and social care
4. Placing equal value and emphasis on people's mental and physical health
5. Driving cultural and behavioural change among professionals, service users and families/carers to create a healthier future
6. Improved care experience for patients and carers that is delivered compassionately, with dignity and in the right place at the right time
7. Ensuring that we have the workforce, technology, contracting, and payment mechanisms to support our plans

Sustainability, including environmental, social and economic aspects, should be part of everything we do. Our seven ambitions to improve health and wellbeing have significant co-benefits in relation to reducing our environmental footprint. For example, improving population health, reducing demand and delivering care closer to home, reduces carbon emissions for the whole system. To support our plans, our workforce must also be carbon literate. We must fully embed our vision and Green Plan into everything we do.

## 5. Our ICS Green Plan Vision



**“A Greener healthcare system in Herts and West Essex – a step change in behaviour and system so that healthcare is delivered with zero emissions and significantly improved other environmental impacts by 2045, to the health and wellbeing benefit of our people”**

Herts and West Essex ICS have adopted this vision, mirroring NHS England, East of England’s Greener NHS vision. To achieve this, we will need the support of our partner organisations, patients and visitors. We must change rapidly and at scale.

We will build on the great work being delivered by our NHS partners and anchor institutions<sup>2</sup> to seize opportunities for system change, collaboration and learning from each other.

Delivering our Green Plan will decrease our collective negative environmental and social impact while meeting provider commitments under the NHS Long Term Plan and the NHS Standard Service Contract.

Over the next three years, we will embed our Green Plan and ensure that our default position is to consider the environmental impacts of everything we do, including carbon emissions. This is our first system level plan and it is ambitious. We are asking all our partners to reduce their carbon emissions in line with the net zero trajectory, use resources efficiently, generate less waste and make a meaningful difference in the lives of our people and communities.

### Our Goals

The NHS has a clear direction of travel, aiming for net zero emissions by 2045, with most reductions achieved well before 2040. Both County Councils in the Herts and West Essex area have clear sustainability strategies, including emissions reduction pathways. Hertfordshire County Council have declared a climate emergency.

All partners agree that business as usual is not an option if we are to meet this trajectory and improve our environmental performance. As an ICS, we will achieve our vision through five goals:

1. Adopt a vision of a positive, net-zero health and care system, understood by all, and threaded through models and pathways of care, structures and policies
2. Engage with a huge community, committed to reducing our environmental impact
3. Share informative data, information and intelligence about where we are and what will work
4. Support staff, patients, care givers and members of the public with the capability and capacity to consider and improve the impact of their part in healthcare
5. Deliver meaningful transformation and improvement projects that reduce the environmental impact of healthcare services

These large-scale, overarching goals will be achieved by implementing essential activities outlined in the Green Plan, supporting partners to deliver on their own goals and collaborating on system activities. The ICS is dedicated to achieving a deeper knowledge of sustainability and carbon literacy and a truly sustainable strategy.

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<sup>2</sup> Anchor institutions are large organisations that are unlikely to relocate and have a significant stake in a geographical area

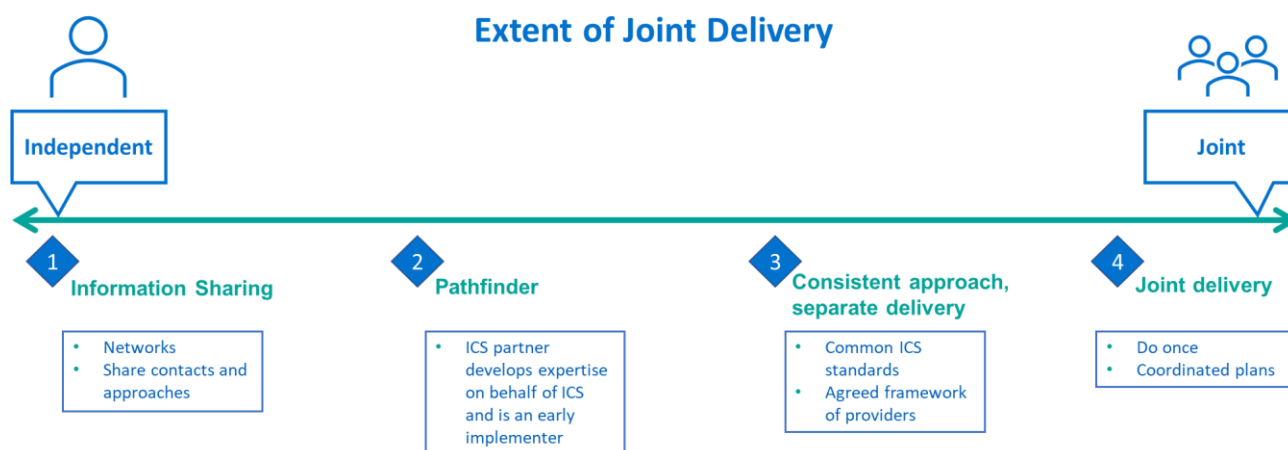
## 6. Our Approach to Collaboration

The ICS has developed this Green Plan, using guidance from Greener NHS and recommendations from all ICS partners. The Plan addresses all areas of the net zero NHS ambitions while also addressing the need to:

- improve health and patient care and reduce health inequalities
- build a more resilient healthcare system that understands and responds to the threats of climate change.

Our Green Plan provides direction and a framework for collaboration across the ICS footprint to deliver sustainable outcomes. As an ICS, we must coordinate efforts and collaborate effectively to support organisational, local, national and international sustainability goals. All NHS providers have been set targets and responsibilities in line with the NHS net zero roadmap and our ICS will be working with all NHS Trusts to ensure best practice is shared and the extent of joint delivery is most effective.

For HWE, this means we will adopt an approach of collaborating on shared priorities in the following ways:



Our partners have all published their sustainability commitments, and Green Plans to deliver on their individual goals. We can add value by working together on shared priorities as a collective.

We have agreed to adopt a lead partner working model supported with a project management office for ICS sustainability: whereby one partner organisation takes the lead on a specific Green Plan workstream with support from other ICS partners.

The ICS Sustainability Working Group will agree and develop the programme of activities further and agree on the suitable lead organisations for workstreams. This will include assigning timelines to actions. This programming will enable capacity planning across the system for the three years this plan covers.

In order to collaborate effectively and deliver the step change required, we need to adopt approaches such as:

- pooling resources (e.g., joint posts),
- pooling funding, and
- using consistent communications with our stakeholders.

## Collaboration themes

Sustainability should be part of everything we do. There are opportunities to collaborate across all aspects of sustainability, and a summary of these has been set out in section 7 of this Green Plan. They are organised under the nine Greener NHS areas of focus.

Following a workshop and engagement with system partners, the ICS has identified areas that will benefit most from the collaboration over the next three years. We are setting up workstreams to establish the extent of our joint delivery and to collaborate on the following themes:

1. **Estates and Facilities:** our buildings are core to providing services across the system and form a significant proportion of our carbon footprint within our direct control. Using existing estates efficiently and maximising health outcomes is important to the ICS and interfaces with service delivery. We will be upgrading buildings to improve quality and performance and ensuring all new developments meet best practice sustainability standards. We will use the leverage of the ICS to coordinate the approach to 3<sup>rd</sup> party landlords to make the necessary environmental changes to estates.
2. **Travel and transport:** we will be reducing travel where possible through models of care and digital interventions. Our ICS covers a large geographical region across Hertfordshire and West Essex therefore finding innovative solutions to reduce our carbon impact from travel is of high importance. Promoting green and active travel where appropriate to align to local air quality strategies and reducing exposure to poor outdoor air quality. We will take a consistent approach to the implementation of sustainable travel solutions and deliver separately.
3. **Sustainable procurement:** we will use our collective purchasing power to engage with suppliers and improve sustainability in the supply chain. Learning from and working with experts in the local authorities to improve sustainable procurement in the NHS. Training on sustainable procurement to encourage a step change in behaviour and change the long term pattern of demand. A cultural shift is required to transition from our current, linear high-cost high-waste economic model to a circular, low-carbon, low-waste economic model.
4. **Adaptation:** The impacts of climate change will be similar for all partners in the ICS. Impacts on housing, buildings, and infrastructure will also have knock-on effects on population health and wellbeing. It will be valuable for the ICS to adopt a common understanding of risks and likely worst-case impacts, so that the projection of risk is carefully developed and future exposure in the region is managed. Partners can then respond to this accordingly for their estates, operations, and communities. We will take a consistent approach to identifying and implementing measures and deliver separately.
5. **Sustainable Models of Care:** Our vision for sustainable models of care aligns with the 'first do no harm' agenda whereby our medical practices reduce pollution, environmental impact and prevalence of disease. We must embed sustainability, including carbon reduction, into how all care is delivered. Identifying and supporting models for earlier and faster diagnosis to allow for earlier and less intensive treatment, leading to healthier and more resilient people and communities. This will include collaborating on service re-design, medicines management, using digital solutions and delivering care closer to home.

In addition to the ICS and local priorities, we will also work with the East of England (EOE) region on regional priorities. The current priorities for the EOE regional Greener NHS team are travel and transport, medicines, waste and PPE.

## 7. Areas of focus

The following sections of the Green Plan follow the Greener NHS guidance on producing a Green Plan and the areas of focus. Each area of focus defines what we as an ICS and our NHS partners have delivered to date and what actions we are taking as an ICS to address the Green Plan goals going forwards.

All of our Trust partners have prepared their own Green Plans with actions to address each area of focus within their organisations. The following sections summarise these plans and draw out the common challenges and opportunities to address together as an ICS.

### 7.1. Estates & facilities

Our partners' estates and our shared buildings are intrinsic to providing services across the system. These buildings also form a significant proportion of our carbon footprint within our direct control. Therefore, using our estates efficiently and maximising health outcomes is of the utmost importance to the ICS. To achieve this, we will be upgrading buildings to improve quality and performance, and all new developments will meet best practice sustainability standards. We will also need to engage with our landlords of Tier 2 and Tier 3 sites, including NHS Property Services and Primary Care facilities. As these sites are largely multi-occupancy, effective collaboration and engagement will be required to deliver the targets of our Green Plan.



Refurbishment and new construction projects will include concepts such as net zero carbon, green areas, 'smart' buildings, and climate change mitigation and adaptation. In addition, we will guarantee that staff understand how to control the heating, cooling, lighting, and ventilation in their spaces and how to maintain optimum performance. For example, two of our Hospital Trusts (The Princess Alexandra and West Hertfordshire Hospitals) are currently planning new hospital redevelopments and are targeting net zero carbon design and operations.

We will reduce our energy consumption and procure green energy for the energy we use. We will improve energy and water efficiency across the ICS, increasing employee involvement and understanding, encouraging employees to use less energy at work and home. Awareness and education will be key enablers. Consequently, we will reduce the carbon emissions arising from running our buildings and infrastructure.

Estates and facilities have been identified as a key priority area for our ICS. A key topic within that workstream will be to explore the opportunities for shared buildings and spaces within the ICS, gaining efficiencies, sharing resources, and reducing our energy and resource consumption.

#### Tackling embodied carbon of new builds

Princess Alexandra Hospital NHS Trust are planning to deliver the first net zero hospital building in the UK. Although the impact of the embodied carbon footprint from construction works will significantly increase their overall carbon footprint for the period, (expected delivery date 2026), a pathway to net zero has been identified, covering Scope 3 and construction emissions.



## What we have done

Partners are actively looking at their estates and facilities, developing estate strategies and decarbonisation plans. Taking action to improve the performance of buildings is within the individual organisational remit, with key successes highlighted in their own Green Plans. A few highlights from partners to note include:

- A supplier has been engaged to commence the process of gas eradication from Essex Partnership University Trust with a pilot project set around Thurrock within the next financial year
- Community NHS Trusts have committed funds to install LED lights across their sites
- East and North Hertfordshire NHS Trust offers energy efficiency advice, and warm homes support for vulnerable respiratory patients via Herts Help and Hertfordshire Warmer Homes

### Local Authorities Taking Action

Essex County Council (ECC) have delivered fuel poor grants totalling £0.8m Between February and August 2021, upgrading over 80 Essex homes with up to £10k worth of free energy efficiency improvements in households with income below £30,000

ECC is now working with 11 District, Borough and City authorities to secure a further £17.2m in grant funding from the Sustainable Warmth Fund & £2.5m working with social housing providers under the Social Housing Decarbonisation Fund

## What we will do together

- Purchase or generate 100% electricity from renewable energy sources, sharing solutions and overcoming barriers to renewable energy procurement as a system
- Explore opportunities for ICS level energy generation to reduce costs and carbon and support health and wellbeing by redirecting any surplus energy supply to vulnerable populations
- Sharing intelligence on estate strategies and decarbonisation plans across the ICS, including those for heating and hot water systems
- Share knowledge on available funding opportunities and planned works for sustainable housing across the ICS. Inform staff and patients of home upgrades and how to access further information
- All partners in our ICS will replace lighting with LEDs, look to remove coal and oil boilers, replacing with low carbon alternatives and incorporate renewable energy generation within their Estate
- Develop a policy for building temperature control consistent across the ICS
- Work with our partners to collectively reduce waste, utilise circular economy principles and increase waste recycling rates through waste segregation and processing in the region
- Review our buildings across the portfolio to identify areas for improving service delivery while making the best possible use of our sites, considering changes in working locations and activities due to Covid-19. Optimising our estates would improve space utilisation, reduce patient/staff mileage and reduce carbon footprint per patient
- Coordinate learning resources to inform employees, patients, and visitors about ways to save money on utilities at work and home. Use common terminology across the ICS
- Ensure alignment with NHS Net Zero Estates guidance

## 7.2. Supply chain & procurement

Sustainable procurement has been identified as a collaboration theme for the ICS, driven by national and local priorities. With 60% of the NHS emissions sitting within the supply chain, we cannot meet our net zero ambitions without a step change in workforce development (e.g. carbon literacy), behaviour change and fully embedding sustainability into all procurement policies and activities.

As a system, we are committing resources to this collaboration theme to create and deliver a long-term sustainable procurement strategy. Within the ICS sustainability working group, we will clearly define the desired outcomes for this workstream and develop an action plan for sustainable procurement across the ICS.

Hertfordshire and West Essex have a joint ICS procurement service for Trusts, presenting a significant opportunity to use our collective buying power and enable a wider reach on sustainability topics with our suppliers.

We will agree an approach to sustainable procurement across the ICS, describing the roles, actions and resources required to positively influence the supply chain. Procurement policies and processes and supply chain engagement are tools we must leverage to reduce our resource consumption, reduce waste, and reduce the overall environmental impact of the goods and services we buy.

A cultural shift is required to transition from our current, linear high-cost high-waste economy to a circular, low-carbon, low-waste economy. As set out in the workforce development and system leadership area of focus, we will train key stakeholders on topics such as social value and carbon literacy to encourage a step change in behaviour, and to change the pattern of demand for goods and services.

### Green Procurement in Local Authorities

Essex County Council and Hertfordshire County Council both have workstreams focussing on green procurement and are sharing their expertise with all ICS partners to help progress sustainable procurement in the NHS.

The Procurement Policy Note (PPN) 06/20 details the new model by which to deliver social value through government's commercial activities. Incorporating the minimum 10% social value weighting, lifecycle considerations and including both cost and environmental impacts into procurement decision making, are all challenges for the system, but also provide an opportunity to reframe how we value sustainability. By changing consumer patterns and setting consistent requirements across the supply chain we can drive sustainable change.

### What we have done

- We have launched The Hertfordshire and West Essex ICS NHS Procurement Service, hosted by West Hertfordshire Hospitals NHS Trust, providing transactional, tactical, strategic and materials management services to the Trusts. This will increase our buying power and enable a wider reach on sustainability topics with our suppliers
- We are already working with the East of England sub-regional procurement hub to share ideas and best practice. In addition, we will continually review membership and representation at working groups to ensure the right leaders are involved
- NHS Trust partners have removed the use of plastic straws, plates, cutlery, takeaway packs and cups from their restaurants and have replaced them with suitable alternatives
- A crutch recycle scheme, preventing over 250 pieces of equipment from going to landfill to date, operates at Princess Alexandra Hospital NHS Trust



Supply chain  
&  
Procurement



## What we will do together

- Agree an approach to sustainable procurement across the ICS, describing the roles, actions and resources required to positively influence the supply chain, by the end of Q1 2022/23
- Develop a roadmap for training our workforce to build a network of 'informed customers' with regards to sustainable procurement. Identify roles that should undertake mandatory social value and carbon literacy training. Identify key stakeholders and needs by end of Q1 2022/23
- Share resources on driving sustainable procurement, particularly learning from Essex and Hertfordshire Councils experience
- Inform suppliers and adhere to the commitments in the supply chain roadmap announced at the NHSE/I Sept 2021 board, including the 10% minimum social value weighting from April 2022
- All providers within the ICS to purchase 100% recycled paper and reduce our paper usage where possible work with suppliers to minimise environmental impact
- Design and implement a Sustainable Procurement Policy, including products that the ICS should no longer use and best practice sustainable procurement
- Providers should continue to follow through on the NHS Plastics Pledge (where adopted) and identify single-use items that may be eliminated, reduced or replaced as a default
- Learn from and engage with national programmes around key items such as single-use plastics in catering, PPE and packaging, and initiate workstreams for locally significant waste items. This may include working with major suppliers to decrease packaging and waste by using our purchasing power
- Expand existing walking aid recycle schemes across the system, learning from early implementers
- Dedicate resources and funding to deliver on our sustainable procurement targets
- Embed the five principles of procurement into every policy, process and strategy (see figure 4). Educating and empowering staff to consider reduction and reuse opportunities before buying

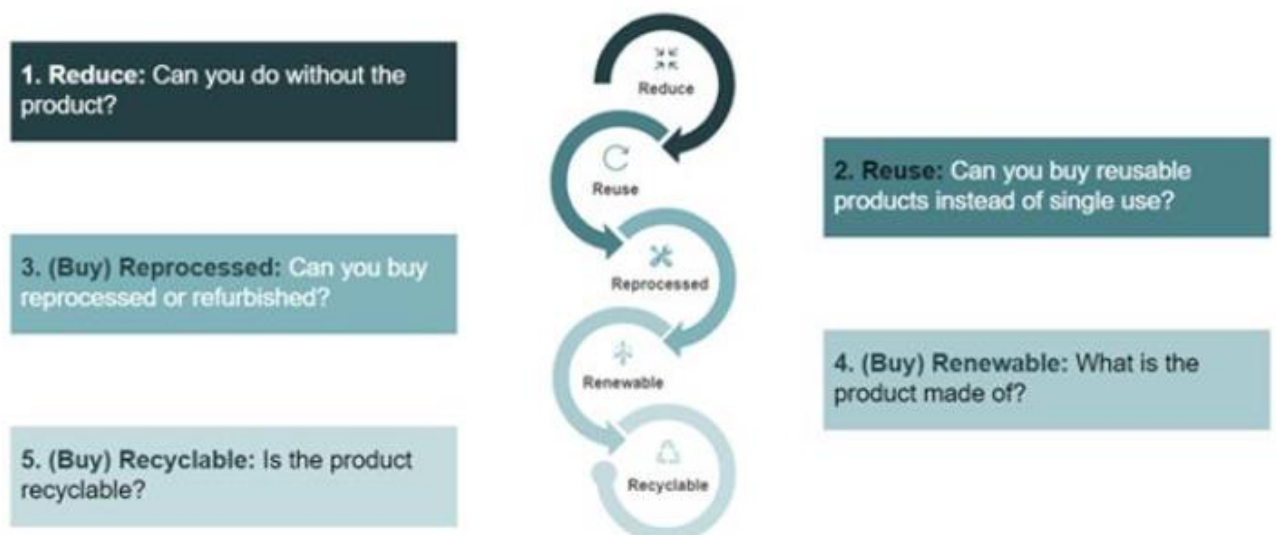


Figure 4: Principles of sustainable procurement

### East of England Regional Project - 'Developing a circular approach for single use clinical plastics'

East of England identified Waste and PPE as a priority area and the Regional Sustainability Network embarked on a project which was designed to support the region to better understand the current position in relation to plastics and explore the opportunities for the NHS as a whole.

We will be supporting the implementation of the regional plastic project 'Developing a circular approach for single use clinical plastics' in the following ways;

- Sharing the plastics project widely across our ICS
- Support pilots & feasibility studies. We will be encouraging and supporting our Trusts to take part in pilot programmes develop our thinking about the type of sorting processes that we need to introduce to retain the value of clinical plastics in Trust material streams.
- Engaging with with/providing representation on the planned 'Single Use Plastics Circular Economy Innovation and Awareness Group'. This will help ensure ICS partners (sustainability, procurement and waste leads, clinicians and suppliers) are connected and able to benefit from the learning
- Improve staff awareness – redefining waste as an asset, understanding where it goes, and influencing staff behaviour around purchase, use and disposal.

## 7.3. Medicines

As an ICS, we will examine the key opportunities to reduce the carbon emissions related to the system's prescribing and use of medicines and medical products.

Medicines account for 25% of emissions within the NHS. A large proportion of these emissions are due to a small number of medicines, namely anaesthetic gases (2% of emissions) and inhalers (3% of emissions), where emissions occur at the point of use.



The remaining 20% of emissions are found in the manufacturing and freight inherent in the supply chain. Therefore all action taken must consider the wider supply chain and the products themselves.

In 2022/23 the ICS will engage with primary care stakeholders on this Green Plan. Medicines is a key area where the system can share best practice between partners on low carbon alternatives and waste reduction initiatives.

### What we have done

- Significant progress has been made reducing the use of desflurane, with some Trusts having reduced the use of desflurane by up to 95%. We will continue to reduce the use of desflurane in surgery to less than 10% of its total volatile anaesthetic gas use, by volume, in line with the 2021/22 NHS Standard Contract
- Our partners have started to use prescribed dry powder inhalers (DPI), which are lower carbon inhalers, over metered-dose inhalers (MDI) where appropriate

### What we will do together

- Share expertise on optimising medicine usage to reduce waste and collaborate on prescribing criteria
- Develop plans for clinically appropriate prescribing of lower carbon inhalers, in line with the commitment of a 50% reduction by 2028 and a 6% reduction in 2021/22 on a 2019/20 baseline
- Coordinate information to our partners on inhaler disposal schemes
- Implement approaches to optimise the use of medical gases, including reducing nitrous oxide waste. Our partners will use their medical gas committees to measure and review nitrous oxide use and waste
- We will engage with our PCNs and GPs to on sustainable medicines and share best practice learning across the system consider lower carbon alternative medicines and share expertise

## 7.4. Digital Transformation

As an ICS, we will harness digital technology and systems to streamline service delivery and support functions while improving the associated use of resources and reducing carbon emissions.

Digital transformation is closely related to the sustainable models of care and travel and transport areas of focus in this Green Plan. Digital can be a key enabler in reducing environmental impacts of service delivery as long as the impacts associated with new digital infrastructure are managed and reduced.



**Example:** In 2020, West Hertfordshire Hospitals NHS Trust deployed an Outpatient Transformation Programme, which avoided over 42,000 physical appointments and saved an estimated 825,000 patient travel miles. The reduction in travel miles from virtual appointments delivers significant co-benefits such as improvements in air quality and reductions in environmental impact.

### What we have done

- Already using digital systems to reduce the use of paper records, printing, and postage
- Continue to adopt telemedicine to deliver care remotely where required
- Our Trust partners utilise Electronic Prescribing and Medication Administration in community hospitals

### What we will do together

- Establish a clear strategy for digital transformation and collaboration across the ICS, exploring using the same digital infrastructure and systems to gain efficiencies
- Use our collective knowledge, skills and experience to innovate in telehealth and consider getting involved with programmes like the NHS Clinical Entrepreneur Programme
- Increase patient access to virtual appointments from all our providers (for primary care, community, mental health and hospital outpatients), where clinically appropriate
- Lead the delivery and development of an ICS-wide shared care record (ShCR) which adheres to the Professional Records Standard Body's (PRSB) Core Information Standard
- Investigate and measure where possible the energy use of our data centres and take action to reduce our impact
- Expand the use of digital systems to reduce travel, paper, printing and postage for example via a major shift from paper letters to electronic letters and further expansion of electronic prescribing

## 7.5. Travel & transport

Sustainable travel and transport have been identified as a key priority area for our ICS. We will be reducing travel where possible through models of care and digital interventions. Promoting green and active travel is important, and we will ensure direct alignment to the air quality strategy to reduce exposure to poor outdoor air quality.

As an ICS, we will support our partners to deliver on their Green Travel Plans and collaborate as a group to share knowledge and best practice on the implementation of ultra-low emissions vehicles (ULEVs), zero-emissions vehicles (ZEVs) and cycle and electronic vehicle charging infrastructure.



### What we have done

- Continue to support home working where applicable to individual roles
- Continue to engage with EV suppliers around capacity queries and cost implications, sharing this knowledge across our ICS to deliver collaboratively
- Effective roll out of electric vehicles at some of our Trust's sites and the initiation of electric fleet transformation projects. Central London Community Healthcare Trust have changed their lease schemes so that all new vehicle leases will be electric.
- Some of our Trust partners have launched cycle to work schemes, encouraging active staff travel

### What we will do together

- Agree on joint standards as an ICS for remote consultation
- Establish an electric vehicle strategy, which takes supply capacity and demand into consideration and sets a consistent approach across the ICS for staff of availability and costs of EV charge points. We will work with our partners to increase awareness about where employees can charge their electric vehicles
- We will speak with EV suppliers about the potential for on-site renewable generation for EV charge points
- Share information across the ICS and explore opportunities on the usage of rental e-bikes and rental car scheme networks where possible
- Dedicate separate funding for targets and collaboration, e.g. carpooling and ICS staff travel survey and engagement
- Work with our partners to increase the number of electric vehicles in their fleets while lowering fleet mileage and reducing Scope 1, 2 and 3 emissions
- Maximise efficiencies in transporting goods and services commissioned by the ICS, such as patient transport, courier services and deliveries
- Ensure all new purchases and lease arrangements are for cars that are ultra-low emissions vehicles (ULEVs) or zero-emissions vehicles (ZEVs) and that only ULEVs or ZEVs are made available to staff through car sacrifice schemes
- Produce a plan to support active travel and improve air quality, for example, through participation in the anti-idling cleaner air hospital framework

#### Clean Air Champions Case Study

A Hertfordshire based GP is enrolled in a national pilot (DEFRA and UK HAS project) to create a group of healthcare practitioners who are 'clean air champions'.

Training will be provided through the pilot to enable the clean air champions to engage with those individuals likely to be particularly susceptible to health impacts from exposure to air pollution, providing information and educating around air quality, including potential advice on reducing exposure.

The emphasis is on reducing the health impact of poor air quality and presents an opportunity to broaden the discussions to reduce pollution and carbon emissions.

## 7.6. Sustainable models of care

Applying sustainable models of care means:

- optimising the location of care (e.g. closer to home and in the community)
- earlier and faster diagnosis to allow for earlier and less intensive treatment
- reduced treatments and interventions long-term due to early intervention
- ensuring that all activity in the system represents best clinical practice



Although the pandemic has expedited digital developments in our services, there is still more we can do to impact and implement sustainable care approaches. As more patients are treated in the community, sustainable care will become increasingly necessary to maintain operational efficiency. However, service equity is critical, and we recognise that digital approaches are not always appropriate.

We must embed sustainability, including carbon reduction, into how all care is delivered. Identifying and supporting initiatives that prevent clinical intervention and minimise demand will lead to healthier and more resilient people and communities. Our vision for sustainable models of care aligns with the 'first do no harm' agenda whereby our medical practices reduce pollution, environmental impact and prevalence of disease.

### What we have done

- Utilise technology where possible to deliver care and reduce our environmental impact, e.g. video/telephone consultations, remote monitoring, auto-scheduling/route optimisation
- Trusts have engaged with staff and patients to inform some of their most critical care models (e.g. crisis care)
- Trust partners have adopted a 'one-stop-shop' approach, which integrates multiple service areas, for example, Integrated Diabetes Service with combined eye screening and a foot clinic

### What we will do together

- Actively engage staff, patients and service users, and the broader community in choices that influence when and where they are treated, such as the design of hospital redevelopment, to ensure that it is a safe, patient-centred environment
- Create measures to prevent or shorten hospital stays, such as collaborating with community partners to assist vulnerable patients after discharge
- Identify carbon reduction opportunities in the way care is delivered, for example, which types of appointments are suitable to be delivered remotely
- Advance the provision of care closer to home
- Initiate default preferences for lower-carbon interventions where they are clinically equivalent
- Reduce unwarranted variations in care delivery and outcomes that result in unnecessary increases in carbon emissions and share this best practice across the ICS

## 7.7. Adaptation

One of the most serious public health challenges we face is climate change. Extreme weather events, such as flooding and heatwaves, are becoming more severe and frequent. We must act now to offset the harmful impacts of our previous activities and adapt to a changing environment.



Adaptation has been identified as a priority area for the ICS, with all partners looking for support to develop their adaptation workstreams. The impacts of climate change will be similar for all partners in the ICS. Climate risks pose threats to housing, buildings, and infrastructure, which will affect population health and wellbeing.

Our partners need to develop plans to mitigate the effects of flooding, heatwaves and other extreme weather events on infrastructure, patients and staff. It will be valuable for the ICS to adopt a common projection for the region's climate risks and future exposure. Partners can then respond to this accordingly for their mitigation plans. Climate and resilience risks should be raised within the ICS sustainability working group.

### What we have done

- Partners have already or are in the process of nominating adaptation leads within their organisation and developing adaptation plans
- One of our Trust partners used a resilience test exercise involving their main stakeholders to inform their Emergency Preparedness, Resilience and Response (EPRR) strategy

#### Local Council Climate Action Commissions

Our County Councils have published Climate Action reports that highlight current and future environmental issues in our region, such as water scarcity issue, coastal erosion and flooding and have identified actions required.

### What we will do together

- Use hospital redevelopment as a significant opportunity to adapt to climate change and build high-quality, resilient buildings. Incorporate green space as nature-based adaptation solution that also improve the health and wellbeing of patients and employees
- Utilise opportunities for turning hard landscaping areas to soft landscaping to improve biodiversity, resilience to flood risk through sustainable urban drainage solutions and health and wellbeing benefits for patients and staff
- Adopt a common approach to assessing climate change risk and exposure across the ICS. Consider adopting a common climate risk projection that partners can use to inform adaptation plans and resilience planning
- Review climate change risk assessments at the ICS level to identify common threats to continuity and resilience. These should incorporate clinical needs, estate quality, and supporting infrastructure. Then, share knowledge and plans for mitigation actions in response to the risks. We will also engage with the Local Resilience Forums in both counties.
- Engage with the Emergency Preparedness on climate change adaptation strategies and share lessons learnt between estates teams on managing overheating events, particularly in clinical and ward areas
- Provide training to our employees on extreme weather conditions and try novel ideas when it comes to flexible working arrangements in these scenarios
- Collaborate on district-wide adaptation projects with neighbouring Trusts and local authorities



## 7.8. Workforce & system leadership

The Green Plan's success relies on everyone's participation. All employees must be aware of how their decisions and actions affect the environment. Delivering net zero and sustainable health care requires a significant transition in how we work. This must be driven by leadership, collaboration and engagement throughout the system.

Many individuals are more concerned about environmental issues than they have ever been. We need to capitalise on this enthusiasm, promote it, and involve staff and patients who are just getting started. Then, we can all do something to take responsibility and create positive benefits, regardless of our interests or experience.

Our reach as an ICS extends beyond our healthcare services. We recognise that we have a role to play in instilling sustainable habits at home and work. With many employees working part-time or full-time from home, this is more vital than ever.



### What we have done

- Established a forum for all ICS partners to discuss sustainability and implement key actions going forwards. Sustainability working groups will be developed from this
- We have an ICS Executive lead for sustainability. All organisations within our ICS also have a Board/Executive lead for sustainability
- Created Green Champions networks at a number of our Community NHS Trusts and Hospital NHS Trusts. We will be building on this at an ICS level
- Delivered sustainability training and engagement with staff at our Community NHS Trusts and Hospital NHS Trusts

### What we will do together

- Launch an ICS wide comms campaign to communicate our targets and inform partners how to get involved
- Increase sustainability awareness using a consistent approach across the ICS. Our partners will share best practice and implement continuing professional development (CPD) training and inductions, including the Delivering a Net Zero NHS "e-Learning for Healthcare" module and climate change awareness training
- Adopt consistent carbon literacy materials in our communications and delivery across the ICS
- Hold cyclic sustainability meetings with representatives from patient organisations, healthcare settings, businesses, communities, and estates
- Offer frequent communications and education to provide advice and information on several environmental subjects through various media platforms
- Create pledge platforms for our partners and their staff to show their commitment to sustainability
- Invest in specific staff to support sustainability goals and the delivery of these goals
- Utilise opportunities for joint bids on capital funding and share funding information within the ICS



## 7.9. Food and Nutrition

As an ICS, we will consider ways to reduce the carbon emissions from the food made, processed, or served within the organisation. This will include reducing overall food waste and ensuring healthier, locally sourced, and seasonal menus high in fruits and vegetables and low in heavily processed foods.



### What we have done

- Our partners utilise local food suppliers where possible, supporting local businesses and reducing their environmental impact
- Hertfordshire Partnership University Trust and Hertfordshire Community NHS Trust have implemented digital meal ordering to reduce their food waste
- Hertfordshire Community NHS Trust, through the use of their Nutrition & Dietetics Service, has promoted the use of alternatives to reduce the consumption of Oral Nutrition Supplements

#### Hertfordshire County Council reducing food waste

Hertfordshire County Council introduced food waste bins at its major office locations, diverting tonnes of unavoidable food waste to composting.

### What we will do together

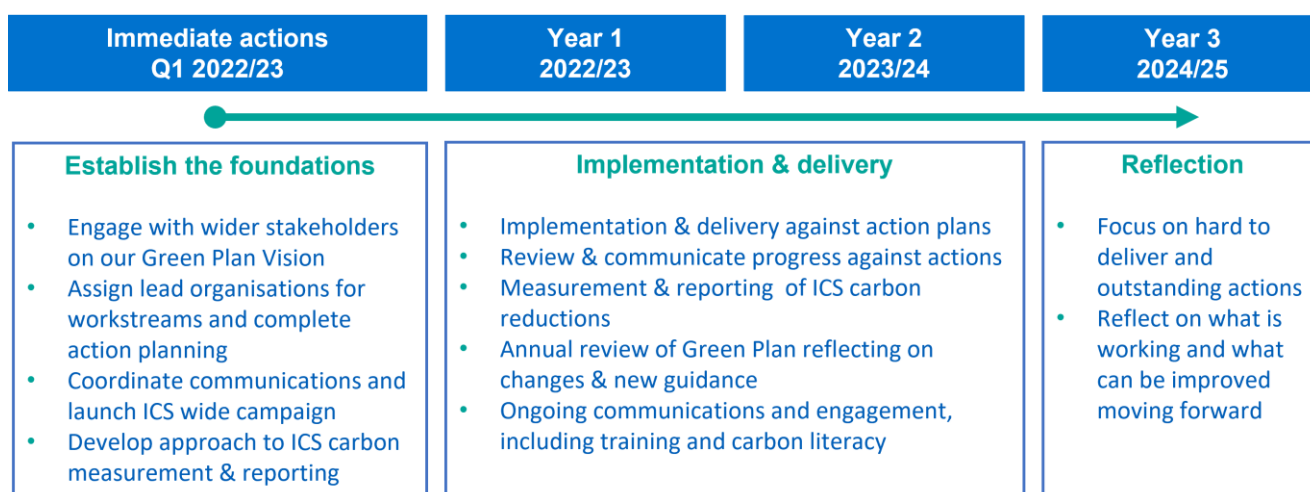
- Share best practice with our partners on sustainable catering menus minimising meat intake as part of a healthy and sustainable diet, and promote plant-based diets to staff within the catering and retail facilities
- Share knowledge as an ICS on creating seasonal menus that are updated at least twice a year by 2025 to maximise the use of seasonal ingredients
- Explore opportunities as an ICS to use food waste in renewable energy generation, e.g. use of an anaerobic digester on our sites
- Work as an ICS to explore opportunities to reduce food waste at our partners' inpatient facilities

## 8. Implementing the Green Plan

This is the first Green Plan for Herts and West Essex ICS, and it has been developed using partner organisation Green Plans and strategies as the foundations. It is a three-year strategy, focusing on the actions we can do now to have an immediate positive impact while setting the system up for long term positive change.

The ICS Sustainability Working Group will agree and develop the programme of activities further and agree on the suitable lead organisations for workstreams by May 2022.

It will be reviewed each year and updated fully every three years or after a significant change in the structure of the ICS. Reviews will incorporate new areas of best practice, new guidance and changes in legislation. Where review is necessary due to legislative change, this will happen immediately.



All should do's and could do's from the NHS Standard Contract 2020/2021 regarding Green Plans will be delivered by the end of this 3-year plan. We will have a coordinated communications campaign running across the system and all staff patients and communities will know our Green Plan vision and objectives. We will have delivered carbon literacy training to all key roles and responsibilities, supporting training initiatives within partner organisations. Carbon reduction targets will be fully embedded across all partners, with supporting policies and procedures in place.

### 8.1. Governance

The ICS Governance will not be in place until the establishment of the ICS in July 2022. In the meantime this plan has been:

- co-developed with input from each partner of the ICS
- discussed with the ICS Senior Leaders Group (lead executive of each ICS partner)
- approved by the Governing bodies of the 3 CCGs, meeting in common in March 2022

The ICS Senior Leaders Group will hold us accountable. In addition, senior personnel will ensure that our sustainability goals are included in all policies, procedures, processes, and business cases across the ICS.

As the ICS structure develops, we will review the governance to effectively support Green Plan implementation.

The Herts and West Essex ICS and each trust within the ICS now have a nominated Net Zero Board level lead accountable for Net Zero and a nominated Sustainability lead responsible for Net Zero. Our executive sustainability lead is Peter Wightman, Managing Director at West Essex CCG.

An ICS sustainability working group meets monthly with the sustainability leads from across the ICS and will lead coordination of delivery of the ICS strategy. The aims of this group are to:

- Implement system Green Plan collaboration themes and deliver on projects
- Report on Green Plan progress
- Align Green Plan and sustainability communications for the system, providing two-way information sharing
- Share knowledge and lessons learnt on sustainability initiatives

The Herts and West Essex ICS project management office (PMO) will coordinate the sustainability working group meetings and supporting meetings, including relevant documentation, to progress the implementation of this Green Plan.

It is the responsibility of the sustainability leads to be the contact point for information sharing with their organisations. The leads share progress and insight from their organisations, representing the full spectrum of Green Plan topics, drawing upon support from subject matter experts where required.

Some aspects of this work will be led through the sustainability leads and others will need to be embedded in the wider ICS function. The following collaboration areas will be implemented by our NHS partners and local authorities working together: workforce and systems leadership, travel and transport, supply chain and procurement, food and nutrition and adaptation. The collaboration areas of estates & facilities, medicines and sustainable models of care, (including digital), will be delivered predominantly through our NHS partners working with the wider NHS.

## 8.2. Equal Opportunities and Non-Discrimination

During the preparation and implementation of programmes, the ICS is committed to taking appropriate steps to prevent discrimination based on sex, racial or ethnic origin, religion or belief, disability, age, or sexual orientation. Accessibility for people with disabilities, in particular, will be considered during the development and implementation of the Green Plan.

All projects will show that they have examined the impact of funded activities on groups with protected characteristics under the Equalities Acts. In addition, their proposal will contain a description of specific steps they plan to take to prevent discrimination actively.

The ICS will guarantee that all sustainability initiatives include the needs of marginalised groups, including providing accessibility for people with disabilities. We will use a Sustainable Impact Assessment Form as a tool to ensure compliance with sustainable practices.

## 8.3. Tracking progress and reporting

We must track and analyse our performance and tell employees, patients, and the general public how effectively we meet our commitments. We recognise that delivering this Green Plan will be tough.

The Green Plan delivery will be managed by the ICS Sustainability working group, reporting to our ICS Sustainability Executive Lead and ICS Senior Leaders group. As our collaboration themes and supporting action plans develop in 2022, we will prepare and adopt a tracker to ensure we are making progress on our goals.

The Sustainability Working Group meets once a month. In addition, ICS representatives participate in the Greener NHS ICS Net Zero Leads Forum, which meets fortnightly.

Every Trust and the ICS is set up to make Quarterly Greener NHS submissions to the national data collection (via Okta).

We will deliver, monitor, and report success to the Board with the support of our Net Zero executive lead. We shall, as a minimum:

- Report progress to the Senior Leadership Team and Board regularly to support corrective action if necessary
- Include a comprehensive sustainability update in the yearly report of the ICS

We will report our progress to the Integrated Care Board (ICB) at agreed touchpoints throughout the year. We last presented to the ICB in late 2021.

## 9. Communications

Effective implementation of sustainable healthcare requires system-wide engagement, participation, and collaboration. Therefore, we celebrate our Green Plan successes and encourage engagement from all our staff and community.

Communications leads from across the ICS, including County Council colleagues will agree and implement a communications plan for the system Green Plan, that aligns with partner programmes and builds a movement behind the Green Plan activities.

As a system we communicate with our staff, patients, and the wider community through various channels, including online media, internal and external communications, and events. We share information and updates on our Green Plan in the following ways:

- dedicated ICS Green Plan web page for the public to be kept updated
- monthly Green Plan posts on social media channels
- information sharing within the ICS communications leads group
- updates within regular email bulletins to system stakeholders
- updates within ICS internal staff email bulletins
- bespoke communications around key sustainability awareness days
- annual updates on Green Plan progress

Communications is addressed in the monthly ICS Sustainability Leads Working Group through two-way information sharing. In addition, NHS Trusts within the ICS all have their own Green Plans and supporting communications plans.

### Get involved

All our communities are encouraged to get involved where they feel able. We will be continuously working towards these Green Plan targets and need your help to get there. So keep an eye out for our sustainability communications and activities that you can get involved in.

Many of our partners have a green ambassador and champion networks for interested staff to join and support.

More information on the Greener NHS can be found on their website at **Greener NHS (england.nhs.uk)**.

If you have an idea that we can work on, do get in touch with the ICS sustainability group at [enquiries@healthierfuture.org.uk](mailto:enquiries@healthierfuture.org.uk)

## 10. Risk

To effectively deliver the Green Plan, we will need to identify, manage and mitigate any risk arising. Our risks will be managed and recorded by our ICS group. We anticipate workforce personnel and capacity, project management structure and funding opportunities to be our biggest risks. We must therefore prioritise effective allocation of resource to implementation and delivery of this Green Plan. The group will regularly review and update mitigation actions, owners and progress to avoid and reduce the risk level. Our reviews will acknowledge the risk of the do nothing scenario and the huge impact this would have on the ICS.

The ICS will ask each of its partners to share their Green Plan risk registers and identify those risks that can be managed at a system level. For instance, where a risk relates to an action that crosses organisational boundaries or where sharing information will help mitigate risk. In addition, partners will be asked to annually review their carbon hotspots, resilience challenges and climate risks.

## 11. Finance

We understand securing funding and allocating sufficient technical resources is key to our Green Plan's successful delivery.

The ICS partners will seek out and prioritise funding opportunities that enable collaboration across our system. Our partners will share details of successful grant applications with the ICS to best utilise collaboration and joint delivery where possible. We will ensure coordinated support for funding initiatives for all our partners to maintain alignment between our County Council and NHS partners.

We will discuss and coordinate funding at the Sustainability Working Group meetings. In addition, we will review and share best practice as an ICS on funding approvals processes, business cases and investment plans to ensure a consistent approach to embedding carbon reduction in every decision.

To collaborate effectively and deliver the step change required, we need to adopt approaches such as pooling resources (e.g., joint posts), and pooling funding at system level for Green Plan delivery.

## 12. Acknowledgements

We would like to thank the following groups for their time and input to the production of this Green Plan: Essex County Council, Hertfordshire County Council, Hertfordshire Community NHS Trust, Hertfordshire Partnership University NHS Foundation Trust, Essex Partnership University NHS Trust, Central London Community Healthcare NHS Trust, West Hertfordshire Hospitals NHS Trust, Princess Alexandra Hospital NHS Trust, East and North Hertfordshire NHS Trust, NHS England & Improvement and East of England Ambulance Trust.