

Green Plan

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| Distribution: | All staff and GP members of the CCG |
| Compliance: | Mandatory for all permanent & temporary employees of NHS Barnsley CCG. |
| Equality & Diversity Statement: | In applying this policy, the organisation will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic. |

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# Introduction

In January 2020, the campaign for a greener NHS was launched to mobilise our 1.3 million staff and set an ambitious, evidence-based route map and date for the NHS to reach net zero. This report sets out the initial results of this work, reaching 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 current global COVID-19 pandemic has further reinforced the connection between global public health and healthcare systems and populations across the world. The NHS response to the pandemic has demonstrated an impressive capacity to adapt and respond in an emergency. It also highlights the importance of preparedness for future pandemics, and the wider health implications of climate change.

The NHS aims to provide health and high quality care for all, now and for future generations. This requires a resilient NHS, currently responding to the health emergency that COVID-19 brings, protecting patients, our staff and the public. The NHS also needs to respond to the health emergency that climate change brings, which will need to be embedded into everything we do now and in the future.

More intense storms and floods, more frequent heatwaves and the spread of infectious disease from climate change threaten to undermine years of health gains.

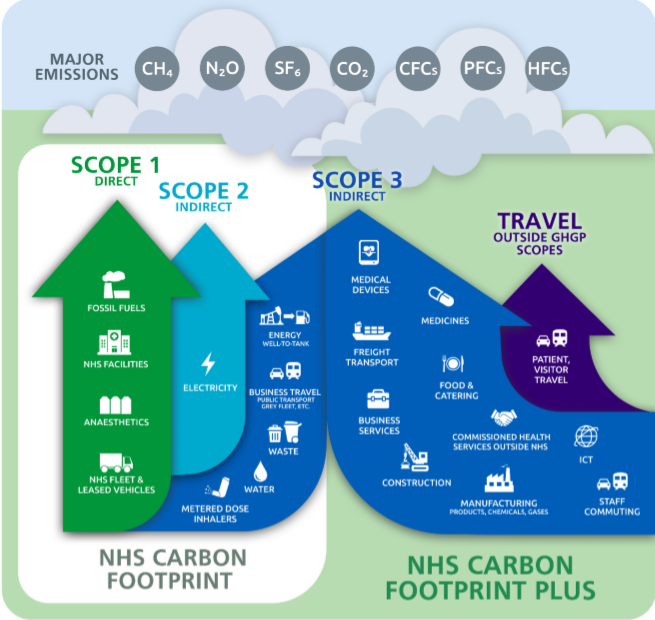
Action on climate change will affect this, and it will also bring direct improvements for public health and health equity. Reaching our country’s ambitions under the Paris Climate Change Agreement could see over 5,700 lives saved every year from improved air quality, 38,000 lives saved every year from a more physically active population and over 100,000 lives saved every year from healthier diets.

* 1. **Net Zero**

[Net Zero](https://www.england.nhs.uk/greenernhs/a-net-zero-nhs/) refers to the balance between the amount of greenhouse gas produced by the NHS and the amount removed from the atmosphere. Net zero is reached when the amount we add is no more than the amount taken away.

The NHS aim to reach net zero by 2040, for the emissions we control directly and indirectly (the NHS Carbon Footprint) with an ambition to reach an 80% reduction by 2028 to 2032. For the emissions we can influence (our NHS Carbon Footprint Plus) the NHS aims to reach an 80% reduction by 2036 to 2039, with a net zero target by 2045.

NHS Carbon Footprint



***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

## Green Plan

## A Green Plan is a Governing Body approved, live strategy document outlining the CCG’s aims, objectives, and delivery plans for sustainable development. This includes the implementation of the NHS Long Term Plan deliverables.

## Developing a Green Plan will help Barnsley CCG to:

* Deliver on the [NHS Long-Term Plan](https://www.longtermplan.nhs.uk/)
* Improve the health of the local community
* Achieve its financial goals
* Meet its legislative requirements

## It is important to recognise that these NHS Long Term Plan deliverables may not be applicable to every NHS organisation.

## In England, the carbon footprint of the NHS was estimated to account for 4-5% of the country’s climate emissions and transporting NHS products and services accounts for more than half of our carbon footprint.

## However, the NHS has already made considerable progress on climate change, with carbon emissions being reduced by 18% in the decade since 2007 at the same time as the NHS has significantly expanded the number of patients treated. This is equivalent to cutting annual emissions equal to those of a country the size of Mauritius or Cyprus. In addition, 85% of NHS provider waste is avoiding going directly to landfill and 23% of waste was recycled in 2017. The NHS water footprint was reduced by more than one fifth (21%) between 2010 and 2017.

## Prior to the implementation of this Green Plan, NHS Barnsley CCG was working towards its previous Sustainability Strategy and action plan which was agreed in September 2018 and is documented in the CCG’s Annual Reports located on the CCG website. [Annual report and accounts (barnsleyccg.nhs.uk)](https://www.barnsleyccg.nhs.uk/annualreport)

# Drivers for Change

## 

**2.1 Legislation**

|  |  |
| --- | --- |
| [***Civil Contingencies Act (2004)***](https://www.legislation.gov.uk/ukpga/2004/36/contents) | The Civil Contingencies Act 2004 requires certain organisations to prepare for adverse events/incidents. Our changing climate is a major driver of many of the emergencies and extreme events that the UK must be better-prepared for. Heat-waves, flooding and cold weather can disrupt the operation of the health and care system and have direct impacts on health. These situations are recognised as relevant to the Act, alongside major incident situations. |
| [***Climate Change Act (2008)***](https://www.legislation.gov.uk/ukpga/2008/27/contents) | The [Climate Change Act (2008)](http://www.legislation.gov.uk/ukpga/2008/27/contents) was introduced to ensure the UK cuts its carbon emissions by 80% by 2050 to become a low carbon economy. The 80% target is set against a 1990 baseline. The Act sets in place a legally binding framework allowing the government to introduce measures which will achieve carbon reduction and mitigate and adapt to climate change. As the largest public sector emitter of carbon emissions, the health system has a duty to respond to meet these targets. |
| [***Public Services (Social Value) Act (2012)***](https://www.legislation.gov.uk/ukpga/2012/3/contents) | The Public Services (Social Value Act) requires all public bodies in England and Wales to consider how the services they commission and procure might improve the economic, social and environmental well-being of the area. The legislation affects a range of organisations including those in the NHS, public health, local authorities, government departments and housing associations. |

**2.2 NHS Mandatory Drivers:**

|  |  |
| --- | --- |
| [***NHS Standard Contract***](https://www.england.nhs.uk/nhs-standard-contract/20-21/) | The NHS Standard Contract is mandated by NHS England for use by commissioners for all contracts for healthcare services other than primary care. |
| [***EU Directive on Public Procurement***](https://ec.europa.eu/growth/single-market/public-procurement_en) | The EU Directive on Public Procurement sets new rules for public bodies when purchasing goods and services, including clinical services. It includes a number of positive drivers for sustainable development. |
| [***HM Treasury’s Sustainability Reporting Framework***](https://www.sduhealth.org.uk/delivery/measure/reporting.aspx) | The guidance is applicable to all central government bodies that fall within the scope of the Greening Government Commitments. It sets out the minimum reporting requirements for the production of annual reports and accounts in accordance with HM Treasury’s Government Financial Reporting Manual (FReM). These bodies are required to report on sustainability unless exempt. |
| [***Public Health Outcomes Framework***](https://www.gov.uk/government/collections/public-health-outcomes-framework) | The Framework sets out a high-level overview of public health outcomes at both national and local level and is supported by a set of indicators. |

**2.3 Health Specific Requirements**

|  |  |
| --- | --- |
| [***Sustainable Development Strategy for the Health and Social Care System 2014-2020***](https://www.sduhealth.org.uk/policy-strategy/engagement-resources.aspx) | The Sustainable Development Strategy for the Health, Public Health and Social Care System 2014-2020 (gateway No 01011) was launched in January 2014. It describes the vision for a sustainable health and care system by reducing carbon emissions, protecting natural resources, preparing communities for extreme weather events and promoting healthy lifestyles and environments.  The challenge is how to continually improve health and wellbeing and deliver high quality care now and for future generations within available financial, social and environmental resources.  Understanding these challenges and developing plans to achieve improved health and wellbeing and continued delivery of high quality care is the essence of sustainable development.  It is important that plans factor in:  The environmental impact of the health and care system and the potential health co-benefits of minimising this impact.  How the health and care system needs to adapt and react to climate change, including preparing and responding to extreme events.  How the NHS, public health and social care system maximises every opportunity to improve economic, social and environmental sustainability. |
| [***The NHS Carbon Reduction Strategy for England (CRS)***](https://www.sduhealth.org.uk/documents/publications/1237308334_qylG_saving_carbon,_improving_health_nhs_carbon_reducti.pdf) | The NHS Carbon Reduction Strategy for England (CRS) sets an ambition for the NHS to help drive change towards a low carbon society. The strategy shows the scale of reduction in carbon required for the NHS to meet its legal targets set out in the [Climate Change Act](https://www.sduhealth.org.uk/corporate-requirements/legal-requirements/climate-change-act.aspx). It also recommends key actions for the NHS to become a leading sustainable and low carbon organisation. |
| [***NHS Long Term Plan***](https://www.longtermplan.nhs.uk/) | **While wider action on air pollution is for our government to lead, the NHS will work to reduce air pollution from all sources. Specifically, we will cut business mileages and fleet air pollutant emissions by 20% by 2023/24.**Almost 30% of preventable deaths in England are due to non-communicable diseases specifically attributed to air pollution. More than 2,000 GP practices and 200 hospitals are in areas affected by toxic air. In 2017, 3.5% (9.5 billion miles) of all road travel in England was related to patients, visitors, staff and suppliers to the NHS. At least 90% of the NHS fleet will use low-emissions engines (including 25% Ultra Low Emissions) by 2028, and primary heating from coal and oil fuel in NHS sites will be fully phased out. Redesigned care and greater use of ‘virtual’ appointments will also reduce the need for patient and staff travel. |
| [***Greener***](https://www.england.nhs.uk/greenernhs/) ***NHS Campaign*** | National ambition  The UK was the first major economy in the world to pass a law to end its contribution to climate change. This means that the UK will aim to balance any emissions generated through emission cutting or removal efforts – so called ‘Net Zero’.  Given the importance of the NHS in our national life, how quickly the NHS can advance to Net Zero will affect how quickly the country as a whole succeeds. The health and care system in England is responsible for an estimated 4-5% of the country’s carbon footprint. That is why we are committed to reaching Net Zero. |

# Organisational Vision

# NHS Barnsley CCG’s overall organisational vision is to put the needs of patients, carers and service users at the centre of our business. We aim to be lean, efficient, responsive and free from unnecessary bureaucracy.

## We recognise the importance of encouraging sustainable development and are committed to leading by example. This plan sets out Barnsley CCG’s approach to promoting and facilitating sustainable development through positive action.

## 

# 4. Areas of Focus

Due to the Covid-19 pandemic, we have continued to follow government guidance and work from home, only travelling to work if it is absolutely necessary; this has had a positive effect on our Green Plan by reducing the need to travel which has virtually eliminated our particulate emissions to atmosphere which has helped to improve our air quality. As a result of working from home, the CCG’s energy consumption has also reduced; which further reduces the CCG’s carbon foot print.

The following areas of focus will form the basis of our Green Action Plan. The following sections set out the CCG’s key aims and objectives for each area of focus.

* 1. ***Corporate Approach***

Sustainability forms part of the culture that transforms health, public health and social care delivery towards more integrated and enabling services. Sustainable and resilient services will only emerge from a culture that understands and values environmental and social resources alongside financial.

We will achieve this through strong leadership from within the CCG coupled with our staff values and engage with staff and stakeholders to ensure we can fulfil our green commitments.

We will monitor our impact on the environment and develop an ambitious Green Plan to reduce our negative impacts (carbon emissions and air pollution) as required by the NHS Standard Contract.

Our Green Plan key performance indicators will be reported to our Governing Body, encompassing the measurement of areas such as the use of resources, recycling, and carbon and air pollution.

What we currently do:

* *We report our sustainability key performance indicators to Governing Body annually, encompassing the measurement of areas such as our carbon footprint, recycling, energy usage and waste.*
* *We promote staff health and wellbeing within the workplace via Friday Round Up to all members of the CCG.*
* *We comply with environmental and other appropriate legislation (see page 5).*
* *We have included a section on sustainability in our staff induction.*
* *We have formed a sustainable forum to discuss our action plan and promote sustainability within the CCG and with external stakeholders.*
  1. ***Asset Management and Utilities***

Due to the Covid-19 pandemic, we have continued to follow government guidance and work from home; this has had a positive effect by reducing our energy usage which in turn reduces our greenhouse gas emissions to atmosphere.

However, we must continue to be mindful that when we return to work, these figures will rise, we will continue to develop plans internally and with our stakeholders to maintain this reduction as well as aiming to keep our energy and water usage to a minimum which will improve our water and energy efficiency, in line with the NHS Sustainable Development Strategy and the Climate Change Act (2008).

What we currently do:

* *We report our energy and water usage/performance in our annual report.*
* *We meet regularly with our landlord and seek ways to utilise our facilities more efficiently.*
* *We have a robust recycling scheme in place for tins, plastics, glass, cardboard, and batteries.*
* *We demonstrate through the collation of data that our approach is leading to a reduction in our levels of energy and water use and waste reduction, which should result in the reduction of our carbon footprint.*
* *We have advised staff through our sustainable group of the benefits of turning off lights in empty rooms.*
* *We have increased the awareness of printing costs to the CCG and encourage all staff to be mindful when printing and to use monochrome.*
  1. ***Travel and Logistics***

Our health and the health of the environment are damaged by pollutants released and resources used in delivering care. The world’s first combined health, public health and social care carbon footprint for a national health system estimates the health and care system carbon footprint to be 32 million tonnes of carbon dioxide equivalent (MtCO2e).

The NHS aims to reach every individual and community in the country. Consequently travel, by patients, staff and visitors, is a crucial part of the way the NHS delivers services. The NHS accounts for 5% of all road traffic in England and travel is responsible for 18% of the NHS carbon footprint in England. This is an important area for reducing carbon impact, improving sustainability, convenience and safety, as well as saving time and money.

Reducing the use of private cars, either travelling to the NHS or on NHS business, is one of the big opportunities to reduce our carbon related to travel. In total they account for over 50% of carbon emissions in the UK domestic travel sector. 56% of all journeys by car are less than five miles and 23% are less than two miles.

During the COVID-19 pandemic, government guidance has been to work from home and only return to work if absolutely necessary and for a minimal amount of time. This has had a positive effect with regards the reduction of our travel emissions to atmosphere.

However, when the restrictions are over and greater numbers of staff will be returning to work, our aim will be to try to minimise the impact the increase in travel will have on our emissions.

To try to maintain our reduced emissions:

* We will calculate our pre-Covid carbon footprint for our transport and travel; this will form our benchmark which we will aim not to exceed.
* We will continue to use virtual meeting platforms were possible to avoid business travel mileage which will save staff travel time and improve health and wellbeing.
* We will promote and encourage active travel if our staff are required to travel to site and ensure our staff are provided with information about the cost savings and personal benefits of sustainable modes of commuting (e.g. commuter travel club, cycle to work scheme).
* We will meet with our stakeholders and discuss the feasibility of installing electric vehicle charging points at our sites or increasing the numbers if they are already in place if practicable which can be accessed by staff and visitors.
* We will review the impact of remote consultations on the environment and our patients as we go forward after lockdown.

What we currently do:

* *We promote the bikes to work scheme, through a salary sacrifice arrangement.*
* *Our mandatory training courses are conducted online via ESR to reduce travel.*
* *We encourage the continual use of virtual staff meetings to reduce travel time because of the Covid pandemic, all CCG staff now has appropriate equipment and VPN connections to facilitate remote working.*
* *We have developed a Home Working Policy.*
* *Ensure stationery orders are placed in bulk, ideally on a weekly basis to limit the number of journeys the supplier must make.*
* *We review the provision of care with the aim of providing services as close to home as possible and moving care close to home when appropriate. Therefore, reducing the need to travel for patients and their families.*
* *We have adapted to the challenges facing us due to the pandemic and use remote technologies for consultations, this has reduced the need for patient travel and has had a positive impact on our carbon footprint.* 
  1. ***Adaptation***

Climate Change is recognised as one of the biggest public health threats this century.

The impacts of climate change are already being felt in the UK and these impacts will increase in the future.

To help combat climate change we engage with our local stakeholders, such as Local Authority, community groups, Local Health Resilience Partnerships and other healthcare providers/commissioners; to identify risks posed by current weather and climate. We have developed local protocols aligned to national heat wave plans, cold weather plans and multiagency flood plans) in relation to Civil Contingencies Act and National Adaptation Plan to ensure our vulnerable communities and patients are supported in the event of major and extreme weather events.

According to the UK Climate Change Risk Assessment (UK CCRA 2012), the UK is projected to see an increase in the frequency and intensity of weather-related hazards including heat waves and floods. While winters are projected to become warmer and wetter, cold spells will still occur.

The UK CCRA 2012 highlighted several key health risks from climate change including:

* Heat (increased summer temperatures and heat wave events).
* Cold (reduced deaths and illness but with continued risk from cold ‘snaps’).
* Ground level ozone.
* Flooding and Storms (resilience and continuity of health and social care services, mental health impacts and injuries).
* Incidence and exposure to marine and freshwater pathogens.
* Sunlight (UV risk).

What we currently do:

* *We involve members of the community in the planning and delivery of healthcare.*

***4.5 Commissioning and Procurement***

In England over £88 billion of public money is spent on health and care services commissioned for local people. Delivering health and care services in turn involves the procurement of a large amount of goods, services and infrastructure, with the health and care system spending over £40 billion each year. Every pound spent enables positive health, social and environmental outcomes. The commissioning of services and the procurement of products are powerful levers to influence the delivery of sustainable services.

NHS Barnsley CCG recognises that it can develop and use criteria to stimulate more ambitious and innovative approaches to delivering care that costs less, creates less environmental harm and reduces inequalities. Sustainable commissioning takes a whole system approach to improving health and wellbeing of the people it buys services for. The CCG understands that commissioning services in a way that utilises local assets, improves the local environment and empowers local people and communities can achieve wider benefits from the same investment.

Our key deliverables are:

* Securing the needs of the people who use our services;
* Improving the quality of the services; and
* Improving efficiency in the provision of the services

What we are currently doing:

* *We ensure compliance against sustainable development clauses in the NHS standard contract. i.e. Embed relevant policies in contracts*
* *We have a strategic goal in place to deliver care as close to home as reasonably practicable which we are delivering through the co-location of services in primary and community settings where possible.* 
  1. ***Green Space and Biodiversity***

Green space and biodiversity can play a key role in improving patient recovery rates and patient experience, as well as supporting staff health and wellbeing.

Urban green space is a necessary component for delivering healthy, sustainable and liveable cities accordingly to a new report published by the World Health Organisation (WHO) Regional Office for Europe.

The CCG can help to increase or improve urban green space which can deliver positive health, social and environmental outcomes for all our population groups, particularly among lower socioeconomic status groups by the potential integration of green space into the clinical and working environments for example; tree planting (NHS Forrest), integrated allotment space, bee boxes on site roofs. (<https://www.sduhealth.org.uk/news/544/world-health-organisation-report-highlights-importance-of-urban-green-space-for-health/> )

* 1. ***Sustainable Models of Care***

We aim to be able to deliver the best quality of care with the resources that are available. This will always be a challenge and will become increasingly so as costs escalate, resources diminish and weather patterns become more unpredictable.

To be prepared for changing times, climates and events it is increasingly important that we continue to consider new ways the environmental and social impact of how our services can be delivered and look for new ways of working which could reduce our overall emissions to atmosphere.

* 1. ***Our People***

Our workforce is key to ensuring the CCG is sustainable; every person within the CCG has a part to play to ensure we meet our targets and help to fulfil our obligations to reduce our carbon footprint and promote a healthy lifestyle for staff and members of the public.

To accomplish this:

* We promote the Barnsley staff values and encourage innovation, new ideas and support new technologies that could help reduce our carbon footprint and improve the health of our staff and patients.
* We conduct regular staff surveys and report back on their findings. We have used this data to develop an action plan on staff wellbeing.
* We have an Equality, Diversity, Inclusion and Human Rights Policy that is aligned to the requirements under the Equality Act (2010).
* We have a clear and publically available Modern Slavery Statement.
* We have analysed the training needs of our workforce and produced a working plan to up skill our staff.
* We have an action plan to promote and support health choices in all parts of the workplace, including off site, (e.g. managing sick absence policy, alcohol, drug and substance misuse policy, procedure for managing stress in the workplace and the promotion of healthy food choices).
* Our staff are given information during their induction about the organisation's sustainability plans and how they can support them.
* The CCG supports our staff to use smoking cessation services.
* We have visible processes and support to improve the health of our workforce (e.g. offering fitness classes, enabling active travel).
* We offer flexible working and support to accommodate specific personal needs of all staff (e.g. parent, carers, accessibility etc.) to enhance staff health and wellbeing.
* We are a living wage employer.
* We can demonstrate that the health and wellbeing of our workforce is improving as a result of our action to reduce sickness absences, staff health and wellbeing surveys and stress avoidance/management.
* We have clear processes in place to manage our duty of care (e.g. health and safety) to all contractors and third party personnel working on our site or on our behalf.
* We support our staff volunteering in the community and with our local charities (e.g. collecting for food banks, dress down day for charity).
* We continually support our staff to improve their health and well-being. E.g. Fitness classes, active travel, Mindfulness sessions.
* We encourage daytime activities while working from home. E.g. lunch time walking, desk exercises, virtual coffee mornings, pub quizzes. Etc.
* We encourage our staff to walk / cycle to and from work or in their lunch hour, we have shower facilities in place for staff to utilise after exercising.
  1. ***Sustainable Use of Resources***

NHS Barnsley CCG will develop a clear process with our stakeholders for reducing our overall carbon footprint. We will capture and monitor waste outputs and their associated costs closely across the organisation and over time such as reducing the need for single use plastics, continuing to purchase recycled copier paper from FSC (Forest Stewardship Council) certified sources.

We will explore initiatives and discount schemes that allow our staff to procure more sustainable products (e.g. NHS staff discounts programme with a sustainable products category).

What we currently do:

* *We have increased the awareness of medicines waste to our stakeholders.*
* *We review local, regional, and national best practice and guidance and consider for NHS Barnsley CCG.*
* *Cycle to work scheme and online bike shop, enables staff to purchase bicycles and accessories at discounted prices.*
* *Our car leasing arrangements offer staff discounted prices on electric and low emission cars.*

***4.10* *Carbon / Greenhouse Gases (GHG’s)***

As a responsible organisation, where we can measure / monitor the carbon impact of each of our activities and set targets where practicable and set SMART targets in partnership with our stakeholders.

We will review our sustainability impacts to reduce our negative impacts (carbon emissions and air pollution) and promote benefits (health promotion, illness prevention and social value) as required by the NHS Standard Contract, and set SMART carbon targets in relation to various carbon hotspots (e.g. energy, travel,), with a baseline year and clear target date (e.g. aligned to or exceeding the Climate Change Act targets).

# 5 Equality Statement

In applying this strategy, NHS Barnsley CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

# 6 Monitoring and Review

This plan will be reviewed every three years and in accordance with any changes to relevant legislation, good practice guidelines or after a significant change in the structure of the CCG. Where review is necessary due to legislative change, this will happen immediately.

Following ratification, the Green Plan will be disseminated to staff via the intranet.

# 7 References:

# [Greener NHS Campaign](https://www.england.nhs.uk/greenernhs/a-net-zero-nhs/)

# [Sustainable Development Unit](https://www.sduhealth.org.uk/)

# [NHS Long Term Plan](https://www.longtermplan.nhs.uk/)

# [Natural Resource Footprint](https://www.sduhealth.org.uk/policy-strategy/reporting/natural-resource-footprint-2018.aspx)

# World Health Organisation – [Urban Green Space Interventions and Health](https://www.euro.who.int/__data/assets/pdf_file/0010/337690/FULL-REPORT-for-LLP.pdf?ua=1&utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=8277405_NEWSL_HWBB%202017-05-22&dm_i=21A8,4XEVX,FLWQCU,IQX93,1)

# [Civil Contingencies Act](https://www.legislation.gov.uk/ukpga/2004/36/contents) (2004)

# [Climate Change Act](https://www.legislation.gov.uk/ukpga/2008/27/contents) (2008)

# [Public Services (Social Value) Act](https://www.legislation.gov.uk/ukpga/2012/3/contents) (2012)

## Appendix A

## About NHS Barnsley Commissioning Group (CCG)

NHS Barnsley Clinical Commissioning Group, sometimes shortened to CCG, represents 32 GP practices and over 230,000 patients and is based at Hillder House in Barnsley.  We have responsibility for commissioning healthcare for the population of Barnsley. Commissioning is a process of planning and buying services to ensure that the people who live in the borough have the right healthcare. The steps involved in this process are:

* Determining the needs of local people to improve health outcomes, reduce health inequalities and prevent ill health.
* Finding out what people think about the healthcare they receive.
* Designing better ways to deliver healthcare.
* Contracting with other organisations to provide the healthcare services that are needed.
* Monitoring the healthcare provided to make sure it is of the right quality and offers good value for money.

## NHS Barnsley Clinical Commissioning Group was formally established on the 1 April 2013 and is run and led by a team of local GPs, Consultants and Nurses. CCGs are overseen by NHS England, which is a national body formed under the 2012 Act.

## Hillder House is a single occupancy NHS building and our landlord is NHS Property Services Ltd. Prior to 1 April 2013, the owner and landlord was NHS Barnsley Primary Care Trust.

## NHS Property Services were established on the 1 April 2013 and are responsible for our premises and grounds as follows:

## Grounds

## Pest Control

## Security

## Energy & Water

## Mechanical & Electrical services

## Fire arrangements

## Appendix B – NHS Barnsley CCG, Hillder House – Annual Waste Metrics

## The energy consumption figures below are provided by our landlord NHS Property Services Ltd

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Consumption | | | CO2 Emissions to atmosphere (ton) | | |
|  | Electricity (kWh) | Gas (kWh) | Water (m3) | Electricity | Gas | Total CO2 to atmosphere |
| 2020/2021 | 38,333 | 153,514 | 607 | 20.6 | 28.4 | 49 |
| 2019/2020 | 64,150 | 128,868 | Not available | 34.5 | 23.8 | 58.3 |
| 2018/2019 | 58,913 | 107,011 | 816 | 31.6 | 19.8 | 51.4 |

**NHS Barnsley CCG Electricity & Gas usage (kWh)**

## NHS Barnsley CCG Water usage (M3)

**NHS Barnsley CCG CO2 total emissions to atmosphere (ton)**

## NHS Barnsley CCG, Hillder House – Monthly Waste Metrics

## Figures provided by the Health & Safety Manager

***Due to the Covid-19 pandemic; Government guidelines have stated that staff should work from home and only return to site if it is absolutely necessary, and for the minimum amount of time. During this period, the energy readings have been read sporadically.***

## 2020/2021

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hillder House – Monthly Meter Readings** | | | | | | | | | | | | | | | | | | | |
|  | |  | Apr | May | Jun | Q1 | Jul | Aug | Sep | Q2 | Oct | Nov | Dec | Q3 | Jan | Feb | Mar | Q4 | Total |
| Electricity usage – kWh | | Covid – 19 (April - October = 21,696) | | | | | | | | | 3989 | 4602 |  | 3563 |  | 4651 |  | 33,850 |
| Gas usage - kWh | | Covid – 19 (April - October = 65,605.86) | | | | | | | | | 18390.6 | 26604.1 |  | 28410.6 |  | 23933.7 |  | 139,011.16 |
| CO­2 to atmosphere - ton | | Covid – 19 (Co2 calculation - April - October = 23.61) | | | | | | | | | 5.5 | 7.4 |  | 7.2 |  | 6.9 |  | 43.71 |
| Copier paper | Colour |  |  |  | 13,847 |  |  |  | 3,371 |  |  |  | 2,234 |  |  |  |  | 19,452 |
| Mono |  |  |  | 34,516 |  |  |  | 16,695 |  |  |  | 22,115 |  |  |  |  | 73,326 |

## 2019/2020

## March 2020 figures have been calculated using information provided by NHS PS utilities and previous months readings taken by the H&S manager

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Hillder House – Monthly Meter Readings** | | | | | | | | | | | | | | | | | | | |
|  | |  | Apr | May | Jun | Q1 | Jul | Aug | Sep | Q2 | Oct | Nov | Dec | Q3 | Jan | Feb | Mar | Q4 | Total |
| Electricity usage – kWh | | 5202 | 9246 | 2168 | 16616 | 6821 | 4097 | 5246 | 16164 | 6095 | 4434 | 6998 | 17527 | 5214 | 5040 | 3589 | 13843 | 64,150 |
| Gas usage - kWh | | 13835 | 7192.4 | 0 | 21027.5 | 1256.7 | 2614.4 | 1750.4 | 5621.5 | 15203 | 16438.2 | 29083.8 | 60726.1 | 18042.8 | 18783.3 | 4467 | 41293 | 128,868 |
| CO­2 to atmosphere - ton | | 5.4 | 6.3 | 1.2 | 12.8 | 3.9 | 2.7 | 3.1 | 9.7 | 6.1 | 5.4 | 9.1 | 20.6 | 6.1 | 6.2 | 2.8 | 15.1 | 58.3 |
| Copier paper | Colour | No information currently available | | | | | | | | | | | | | | | | |
| Mono | No information currently available | | | | | | | | | | | | | | | | |

**NHS Barnsley CCG Electricity usage (kWh)**

**NHS Barnsley CCG Gas usage (kWh)**

**NHS Barnsley CCG CO2 emissions to atmosphere (ton)**

**NHS Barnsley CCG CO2 total emissions to atmosphere 2020/2021 (ton)**

**NHS Barnsley CCG CO2 total emissions to atmosphere 2019/2020 (ton)**

**NHS Barnsley CCG – Copier paper used 2020/2021 (sheets)**

## Appendix C

## NHS Barnsley CCG

## Green Action Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area for Development** | **Action** | **Lead** | **Time Scale** | **Actions completed / in progress** | **Priority** |
| Corporate Approach | Lead from the top, encourage from within | Head of Governance & Assurance | On-going | Green plan to be discussed at the Radiators meeting before sign off by SMT | High |
| Introduce a green suggestions system to encourage staff to feed in sustainable ideas for consideration | Radiators Group | On-going | Suggestion box | Low |
| Participate in national sustainability campaigns e.g. Sustainability Day, Climate Change Week, Energy Saving Week | Health & Safety Manager / Radiators Group | Upon the return to Hillder House |  | Low |
| Asset Management and Utilities | Increase awareness of printing costs to the CCG, encourage staff to only print if necessary | Receptionist / Communications & Engagement Team | Upon the return to Hillder House | Friday round up | Med |
| Analyse usage of shredding bins to reduce numbers | Receptionist / Communications & Engagement Team | Upon the return to Hillder House | Friday round up | Med |
| Discuss with staff the potential waste saved if magazine subscriptions can be accessed electronically instead of being delivered to Hillder House | Receptionist / Medicines Management Team | March 21 |  | Low |
| Travel and Logistics | Promote electric car use | Head of Governance & Assurance | Upon the return to Hillder House | Discuss potential provision of charging port with NHS PS | Low |
| Adaptation | Measure how well the CCG’s activities support sustainability inside the organisation and outside in the community | Health & Safety Manager / Receptionist | Upon the return to Hillder House | Update and refresh the Metrics in the GP | Low |
| Green Space and Biodiversity | Explore the benefits of signing up to the NHS Forrest scheme | Health & Safety Manager / Radiators Group | Upon the return to Hillder House |  | Low |
| Our People | Support staff to obtain maximum benefit from using IT. E.g. Workshops to ensure portable devices and installed programs are being used to their full potential. | Head of Governance & Assurance | On-going |  | High |
| Carbon / Greenhouse Gases (GHG’s) | Promote the reduction in energy usage. E.g. turning off lights when rooms are empty. | Communications & Engagement Team | Upon the return to Hillder House | Friday round up | Low |
| Determine cost per kWh for our energy used, communicate to staff the potential cost savings and reduction in our carbon footprint by turning off lights in meeting rooms | Health & Safety Manager | End of Feb 2021 | NHS PS have been emailed requesting the figures | Med |

## Appendix D

**Equality Impact Assessment**

|  |  |  |
| --- | --- | --- |
| **Title of policy or service** | Green Plan | |
| **Name and role of officers completing the assessment** | Ian Plummer, Health and Safety Manager | |
| **Date assessment started/completed** | November 2020 |  |
| **Type of EIA completed** | Initial EIA ‘ screening **X**  ‘Full’ EIA process |  |

|  |  |
| --- | --- |
| **1. Outline** | |
| **Give a brief summary of your policy or service**   * Aims * Objectives * Links to other policies, including partners, national or regional | The NHS’ aim is to reach net zero by 2040, for the emissions we control directly and indirectly with an ambition to reach an 80% reduction by 2028 to 2032. For the emissions we can influence the NHS aims to reach an 80% reduction by 2036 to 2039, with a net zero target by 2045.  NHS Barnsley CCG is required to contribute to meeting this target.    The aim of the Green Plan is to comply with the NHS Carbon Reduction Strategy for England (2009) which requires the CCG to identify a clear strategy for tackling these significant challenges. |

**Identifying impact:**

* **Positive Impact:** will actively promote or improve equality of opportunity;
* **Neutral Impact:** where there are no notable consequences for any group;
* **Negative Impact:** negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible, it is justified, eliminated, minimised or counter balanced by other measures. This may result in a ‘full’ EIA process.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2. Gathering of Information**  This is the core of the analysis; what information do you have that might *impact on protected groups, with consideration of the General Equality Duty*. | | | | | |
|  | **What key impact have you identified?** | | | **For impact identified (either positive**  **or negative) give details below:** | |
| **Positive**  **Impact** | **Neutral**  **impact** | **Negative**  **impact** | **How does this impact and what action, if any, do you need to take to address these issues?** | **What difference will this make?** |
| **Human rights** |  | X |  |  |  |
| **Age** |  | X |  |  |  |
| **Carers** |  | X |  |  |  |
| **Disability** |  | X |  |  |  |
| **Sex** |  | X |  |  |  |
| **Race** |  | X |  |  |  |
| **Religion or belief** |  | X |  |  |  |
| **Sexual orientation** |  | X |  |  |  |
| **Gender reassignment** |  | X |  |  |  |
| **Pregnancy and maternity** |  | X |  |  |  |
| **Marriage and civil partnership** (only eliminating discrimination) |  | X |  |  |  |
| **Other relevant group** |  |  |  |  |  |

***IMPORTANT NOTE:*** *If any of the above results in ‘****negative’*** *impact, a ‘full’ EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.*

Having detailed the actions you need to take please transfer them onto the action plan below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3. Action plan** | | | | |
| **Issues/impact identified** | **Actions required** | **How will you measure impact/progress** | **Timescale** | **Officer responsible** |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **4. Monitoring, Review and Publication** | | | | |
| **When will the proposal be reviewed and by whom?** | **Lead / Reviewing Officer:** |  | **Date of next Review:** |  |

Once completed, this form **must** be emailed to the Equality Lead [barnsleyccg.equality@nhs.net](mailto:barnsleyccg.equality@nhs.net) for sign off:

|  |  |
| --- | --- |
| **Equality Lead signature:** | G:\HR_Administration\SEC1\Equality & Diversity & Inclusion\Signature\Colin's Signature.png |