

REPORT TO THE TRUST BOARD IN PUBLIC 27 January 2022

Title	Green Plan April 2022 – March 2025
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Purpose of the report

Environmental sustainability is an important element of the Trust Strategy, and our commitment to improving the quality of life of all we serve. As part of the Greener NHS programme, each trust is required to produce by January 2022 a board approved Green Plan that aligns to ambitions in *Delivering a Net Zero NHS*. These include to reach net zero carbon emissions by 2040 for directly controlled emissions; 2045 for those we can influence. Trust plans submitted to NEL ICS will form the basis of an ICS plan supported by the London Region Greener NHS team. We ask that the board receive and approve this plan.

Committees/meetings where this item has been considered

Date	Committee/Meeting

ELFT's Green Plan has been developed in line with Greener NHS *How to Produce a Green Plan* guidance and the NHS London *Green Plan Assessment Framework* and in consultation with stakeholders, staff, service users and senior managers, and in collaboration with systems partners.

The plan is underpinned by a set of principles:

- To develop climate leadership
- To work across 'the system' in a spirit of inclusivity and mutuality
- To further embed sustainability in quality improvement
- To embed sustainability and climate action in the core business of the Trust
- To centre marginalised and disadvantaged voices in our communities
- To align this work with our ambitions on equalities and on the social determinants of health
- To galvanise the energy and expertise of our staff and service users

The plan highlights what has already been achieved in recent years, including

- Switch to 100% renewable energy
- Numerous projects tackling waste
- Development of Sustainability and Value Steering Group
- Begun a transformation of MH services in line with Long Term Plan

The plan outlines a set of goals across 9 workstreams, summarised in a driver diagram, and including:

- Appointment of clinical leads and service user reps
- Development of a network of climate leaders across the trust
- Training for all staff

- Embedding sustainability in QI
- A new travel plan, travel planner role and logistics manager
- A 5% reduction in energy usage
- Divestment of our controlled funds
- Auditing sites for retrofit, rewilding, NHS Forest, energy generation, EV and cycle infrastructure
- Improved access to food and farming projects
- New plans for sustainable medicines, procurement and digital
- Increase in social and natural prescribing, and lower carbon interventions, and in peer led work
- A climate arts club
- Research into adaptation and mitigation

We aim to use the momentum provided by this plan to achieve a 40% reduction in direct emissions by 2025 and a 40% reduction in indirect emissions by 2036.

Strategic priorities this paper supports

Improved population health outcomes	<input checked="" type="checkbox"/>	Health co-benefits of active travel, reduced pollution and improved diet
Improved experience of care	<input checked="" type="checkbox"/>	Leaner and more sustainable services
Improved staff experience	<input checked="" type="checkbox"/>	Opportunities to contribute to meaningful action
Improved value	<input checked="" type="checkbox"/>	Reduction in waste and financial savings

Implications

Equality Analysis	This plan is an element of the Trust strategy to improve the quality of life for all we serve, and to address inequalities within communities, not least given the projected disproportionate impact of the effects of climate change on those who are already amongst the most deprived.
Risk and Assurance	The plan provides one response to the risk associated with climate change, i.e. if the Trust does not anticipate, and proactively respond to, external changes, including factors outside the Trust's control.
Service User/ Carer/Staff	Service users, carers and staff involved in design and delivery of the plan.
Financial	Funding addressed in the plan
Quality	Plans will be partly managed through existing Quality Improvement Programme



Greener ELFT Climate Action (Green Plan)

April 2022 – March 2025



Foreword from Steven Course, ELFT Chief Finance Officer/ Deputy CEO and Chair of the Sustainability & Value Steering Group



At East London NHS Foundation Trust, we are dedicated to improving the health of our communities and delivering services that are efficient and effective. From 2015 on, our Sustainability Development Management Plan delivered impressive reductions in greenhouse gas emissions. In June 2021 ELFT declared a Climate and Ecological Emergency, with a commitment to raise awareness and drive down emissions from the work that we do. Working with all our stakeholders, service users, carers, communities, staff and partners, we have committed to a more ambitious approach. To succeed, we must focus our effort on actions that adequately meet this challenge and integrate sustainability into all the work that we do.

We understand that the climate and ecological crisis is fundamentally a public health crisis that threatens the health of our communities¹. Air pollution alone accounts for thousands of excess deaths and is linked to neuro-developmental damage and dementia. The mental health impacts of the climate crisis are profound². Many of the same systemic problems and social determinants of health also contribute to the unequal effects of the climate and ecological crisis. Healthcare itself accounts for 5% of our national emissions. We will need a monumental effort from all parts of society to limit global warming to 1.5°C above pre-industrial levels and prevent the most devastating impacts of climate change both locally and globally. The health and social co-benefits of sustained action have never been clearer.

We now need to do more, much more, to reduce the Trust's carbon footprint in all our operations. Our Green Plan outlines the ways in which we plan to reduce our emissions in the next 3 years and looks to even greater gains over the next 20 years and beyond. We are committing here to use our resources and our influence in innovative ways that are also rooted in social justice. We will continue to work alongside stakeholders and partners as we go, to ensure the plan remains fit for purpose and responds to the environment around us.

Delivering the plan will depend very much on the enthusiasm, expertise and focus of all our staff and communities. As a key part of our Trust strategy, we are committed to making the gains from this climate action plan a reality, for all our futures.

The climate emergency is a serious issue that affects us all and as a service user and parent I am proud to be involved with ELFT and working together in partnership to do everything we can to tackle this. This will affect everyone and we must all do everything we can to reduce the NHS carbon footprint to protect our health our future and the future of our planet.

Anita Anderson, People Participation service user and carer representative for climate action

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In the garden at Whichello’s Wharf, an allotment project by The Lighthouse, in partnership with GroundWorks - from Sheila O’Connell, Service Manager and Staff Governor, Bedfordshire and Luton

1. Introduction

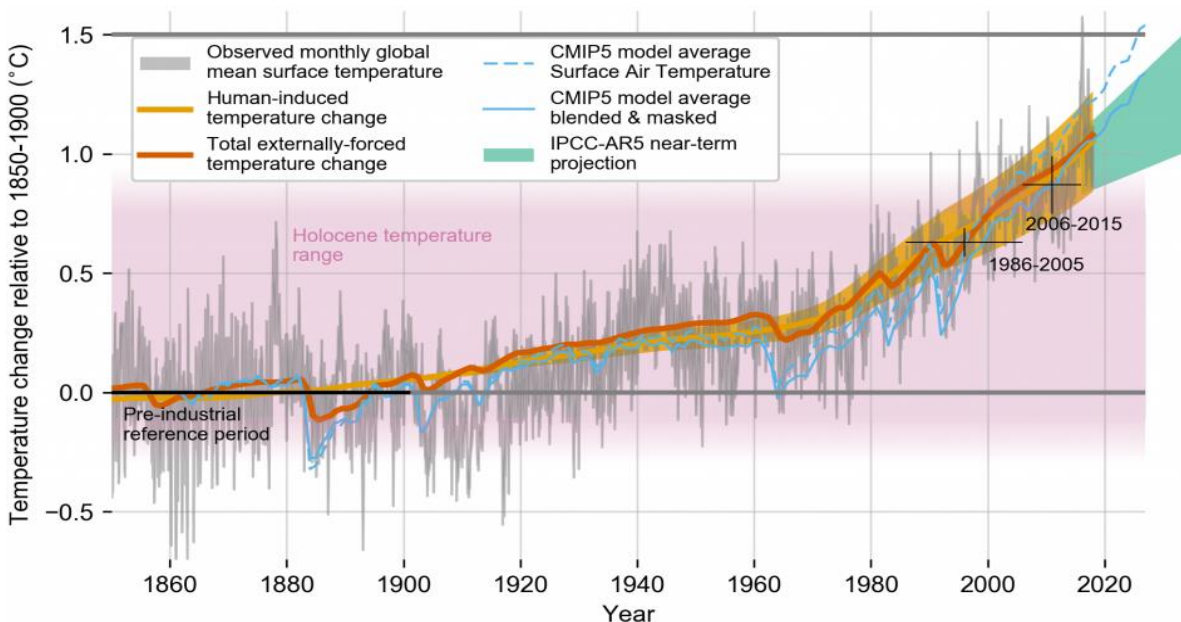
1.1 Context

The greatest threat

At ELFT, we recognise that the climate emergency is a health emergency. We acknowledge the threat that climate change and ecological damage poses to the health and wellbeing of our communities. We acknowledge the unequal distribution of poor outcomes and impacts be it globally or locally. We see climate action align with our ambitions to tackle health inequalities, to be an anchor institution and a Marmot trust, and to deliver on our strategic objectives. We aim to centre marginalised communities and our patients and carers in this work. In June 2021, we declared a climate and ecological emergency.

The climate and ecological emergency is a health emergency, a public health crisis, a mental health emergency and a community health emergency, mediated via physical health impacts, mental health impacts, social impacts and psychological impacts. At present, globally we are on course for at least a 2.4°C increase in global mean surface temperature compared to pre-industrial levels even if governments deliver on promises made. Global warming is a direct result of the release of greenhouse gases, mostly due to the burning of fossil fuels. Now 30 years since the Rio Earth Summit of 1992, no government target has yet been met. Emissions continue to rise annually. Over 50% of the greenhouse gases in the atmosphere were released in the last 30 years. The impact of global warming is ecosystem collapse.

In the measured words of the Intergovernmental Panel on Climate Change: 'Climate-related risks to health, livelihoods, food security, water supply, human security, and economic growth are projected to increase with global warming of 1.5°C and increase further with 2°C. ... Poverty and disadvantage are expected to increase in some populations as global warming increases; limiting global warming to 1.5°C, compared with 2°C, could reduce the number of people both exposed to climate-related risks and susceptible to poverty by up to several hundred million by 2050'³.



Source: Global mean surface temperature change, IPCC Special Report 15, 2018. Accessible at <https://www.ipcc.ch/sr15/>

Experts agree that we must rapidly decarbonise our society by 2030 in order to limit temperature rises to within 1.5°C. While we already see catastrophic effects at less than 1.5°C, increases above this figure will lead to the mass displacement of millions of people (an estimated 200 million people by 2050) and global food scarcity across multiple regions. The effects of extreme weather events and poor air quality are compounded by the impact of deforestation, monocultures in farming, soil degradation, and plastic waste. There are 6 London boroughs at particularly high risk of flooding and overheating. They include Hackney, Tower Hamlets and Newham⁴.

In summary, we face:

- **An ecological crisis** – changes in land and water usage have led to degradation of the natural world, extensive biodiversity loss, and increased exposure to zoonotic disease. Loss of connection to the land has meant we may struggle to see these effects before our food security and peace are threatened. Lack of access to and connection with nature is detrimental to our mental and physical health.
- **A climate crisis** - the physical and mental health burdens of flooding, drought, heat, air pollution, food insecurity, displacement, loss of home and managing the realities of the climate crisis.

'We are in the midst of an ecological collapse of our own making, one that threatens everything we hold dear, that will test our capacity to care for one another, and menace all our efforts at peace. We need all the collective wisdom and courage we can find to face the painful reality of our situation. Because I know the scale of the crisis we face, I feel despair. Because I know and love the people I work with, and I know and love the communities we work in, I feel hope. We still have a slim opportunity to decide on a much better future but we need to see radical change that can and will improve the lives of all of us. We hope this plan and the work that flows from it will be a catalyst for us to come together in whatever way we are able to face this existential threat.'

Dr Juliette Brown, Clinical Lead for Environmental Sustainability and Climate Action, London

The greatest opportunity

According to the 2021 Lancet Countdown on health and climate change: 'Climate change is the greatest global health threat facing the world in the 21st century, but it is also the greatest opportunity to redefine the social and environmental determinants of health'.

Urgent climate action could prevent millions of deaths globally through:

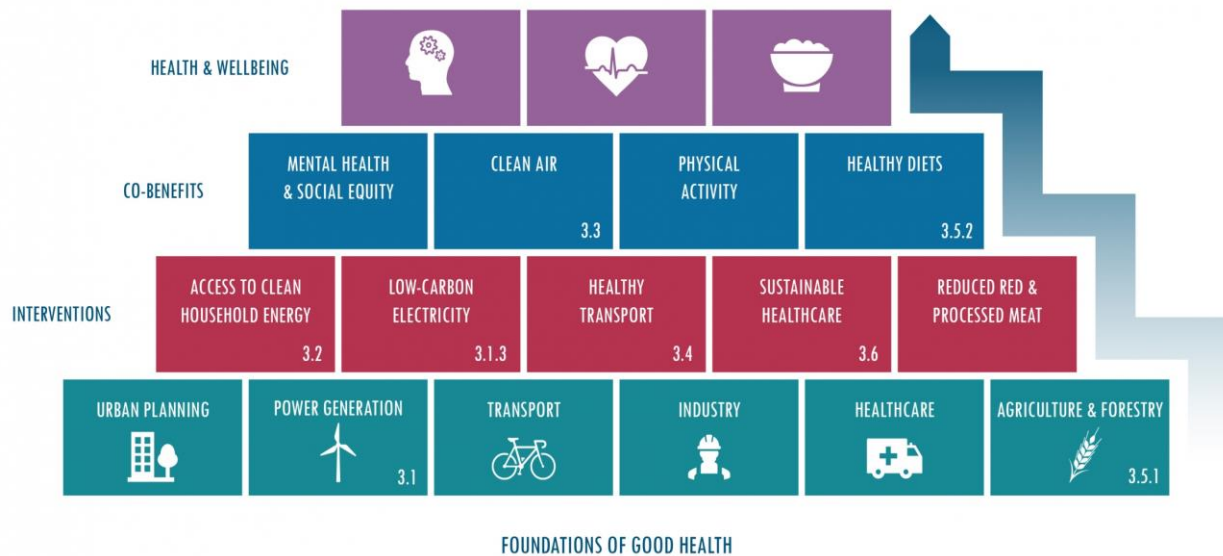
- Improved air quality
- Increases in physical activity
- Healthier diet
- An end to fuel poverty
- Reduced risk of cardiovascular, respiratory, neurological disease and cancers
- Reduced exposure to zoonotic disease
- Improved mental health
- Reduced risk of disruption to healthcare delivery.

In one example, rapid decarbonisation could prevent most of the 3.3 million deaths from air pollution that occur each year.

In recognition of this opportunity, in October 2020, the Greener NHS National Programme published its strategy, *Delivering a net zero National Health Service*, outlining the impact of climate change on human health and on the delivery of healthcare and committing the NHS to becoming the world's first net zero healthcare system⁵.

The report set actions for the entire NHS to reach net zero carbon emissions by 2040 on direct emissions (80% by 2028-32) and 2045 on those we can influence (80% by 2036-2039). These actions include for trusts to develop local Green Plans detailing our approach to emissions reductions in line with national targets.

INDICATORS OF MITIGATION ACTIONS AND HEALTH CO-BENEFITS



Source: The 2021 report of the Lancet Countdown on health and climate change: code red for a healthy future. Accessible at: <https://www.lancetcountdown.org/data-platform/>

Our Regional Greener NHS teams (in London known as the Sustainability Clinical Network) will focus on core deliverables for 2021/22, and on three priorities:

a) Meeting the NHS's net zero targets:

- An 80% reduction in the emissions we control directly (NHS Carbon Footprint) by 2028-2032, and net zero by 2040
- An 80% reduction in the entire emissions profile (NHS Carbon Footprint Plus) by 2036-2039, and net zero by 2045

b) Improving health and patient care and reducing health inequalities

c) Building a more resilient healthcare system that understands and is responding to the direct and indirect threats posed by climate change

In addition, the London Sustainability Network will focus on improving air quality in line with the ambition of the London Vision.

Every single one of us working in healthcare has a responsibility to understand how the climate and ecological emergency will have a devastating impact on both physical and mental health. It is our duty to act on this most significant threat for the benefit of ourselves, our patients and our planet.'

Dr Emma Radcliffe, GP, The Aberfeldy Practice, Tower Hamlets

1.2 Our Trust

East London NHS Foundation Trust (ELFT) provides a wide range of community, mental health and primary care services to children, young people, adults of working age and older adults to the City of London,

Hackney, Newham, Tower Hamlets, Bedfordshire and Luton. Additionally, we provide Talking Therapy Services in Richmond. We also provide primary care services in two GP practices in Bedfordshire along with primary care services to homeless people from three practices, one each in Tower Hamlets, Hackney and Newham. The Trust provides forensic services to the City of London and the London Boroughs of Hackney, Newham, Tower Hamlets, Barking and Dagenham, Havering, Redbridge and Waltham Forest. The specialist Forensic Personality Disorder Service serves North London. The Trust's specialist Mother and Baby Psychiatric Unit receives referrals from London and the South East of England.

ELFT provides local services in total to a population of around 1.8million people across Bedfordshire, Luton, Richmond and East London. We provide Forensic Services to a population of 1.5 million in North East London. East London is one of the most culturally diverse parts of the country but is also one of the most deprived areas, as is Luton. The county of Bedfordshire is a predominantly rural area with some of the most affluent communities in the country living alongside some of the most low-income and deprived groups. Both areas therefore pose significant challenges for the provision of mental health, community health and primary care services.

The Trust operates from over 100 community and inpatient sites, employs just over 6,000 permanent staff and has a total annual income of £467million. Around £330million (70%) of that income is associated with Mental Health Services and about £100million (21%) with Community Health Services.

We are recognised as a centre of excellence for innovation and improvement. Our extensive work in research and education has led to a number of pioneering health solutions, giving us a strong academic reputation. The Trust has university status and is linked with the University of London, City University and South Bank University.

In 2022, ELFT achieved its third consecutive 'Outstanding' rating from the Care Quality Commission (CQC), the first Mental and Community Health Trust in England to do so.

2. Organisational vision

At ELFT, it is our vision to deliver the highest quality mental health and community care to our local communities. The Trust's values are at the heart of everything we do and underpin our vision.

Our five-year strategy takes into account the changing needs and strengths within our local populations, the impact of the pandemic on our communities, greater collaborative working between local health and social care organisations and the views of local people and stakeholders. The environmental, financial and social issues most important to our communities and staff are those that improve health outcomes while also addressing inequalities and access to services.

There are four objectives in our 5-year trust strategy. They are:

- To improve population health so that our communities are healthier and able to get more out of life.
- To improve the experience of care – so that anyone in contact with our services feels safe, feels involved in decisions about their care and knows that the staff around them are focused on their recovery and their future goals.
- To improve staff experience – so that staff are able to grow, learn, feel supported and enjoy what they do.
- To improve value – by making the best use of our resources, making the best use of everyone's time, removing obstacles that delay or hold things up, and by adopting systems and processes to make things more efficient and effective for everyone.

This Green Plan 2022-2025 forms a part of that vision, and touches on all aspects of our work. In deciding our priorities, we have accounted for available data on sources of carbon emissions across the NHS, and specifically in the mental health and community health sector. We have consulted and co-designed the plan with the help of senior leaders, our passionate sustainability and value group and representatives from the People Participation team. We are linked in with colleagues from partner organisations and we are grateful to members of the future NHS community for mutual support and advice. We have worked as a trust to identify the improvements we feel will most benefit our local communities, staff and the overall organisation. In this plan we outline our key objectives for 2022 – 2025.

Acknowledging the need for accelerated action, we aim to deliver:

- A 40% reduction in the emissions we control directly (NHS Carbon Footprint) by 2025
- A 40% reduction in the entire emissions profile (NHS Carbon Footprint Plus) by 2036

We approach this work with key priorities:

- To work across 'the system' in a spirit of inclusivity and mutuality
- To centre marginalised and disadvantaged voices in our communities
- To align this work with our ambitions on equalities and on the social determinants of health
- To galvanise the energy and expertise of our staff and service users
- To integrate sustainability and climate action into the core business of the Trust
- To use a quality improvement approach to understand key drivers and find those actions with the greatest benefit.

We have already:

- Established a trust-wide Sustainability and Value Steering Group
- Appointed a board lead for Environment and Sustainability (Net Zero)
- Recruited a people participation representative for climate action
- Joined the Future NHS Greener NHS community
- Appointed Clinical Leads for Sustainability and Climate Action for London and Bedford and Luton

- Joined emerging local authority networks
- Begun a weekly sustainability message in trust comms and intranet – with information and opportunities for action
- Switched to 100% renewable energy
- Supported numerous team-lead projects to improve the sustainability of services, and tackling inefficiency and waste
- Set up a number of inspirational social and therapeutic gardening projects – including those in forensic services at the John Howard Centre and Wolfson House, an allotment with wildlife garden at the Lighthouse mental health drop-in centre in Bedfordshire and Older Adults gardening group and harvest at First Avenue.
- Trained and recruited 50 – 60 peer support workers
- Expanded our remote consultation offer
- Have a print strategy that has reduced colour print by 75% saving £400,000 annually
- Renewed our focus on the social determinants of health, and on population health inequalities,
- Committed to work as an anchor institution in our local communities.
- Developed a trust-wide quality improvement programme in order to enable staff and service users to work together on reducing inefficiencies and unwarranted variation in care.
- Begun a programme of transformation of mental health and community health services, based on the NHS Long Term Plan which aims to promote sustainable healthcare, improve timely access to care, deliver targeted interventions closer to home, work more closely with local voluntary and community sector organisations and deliver on integration of care.
- Eliminated out of area placements

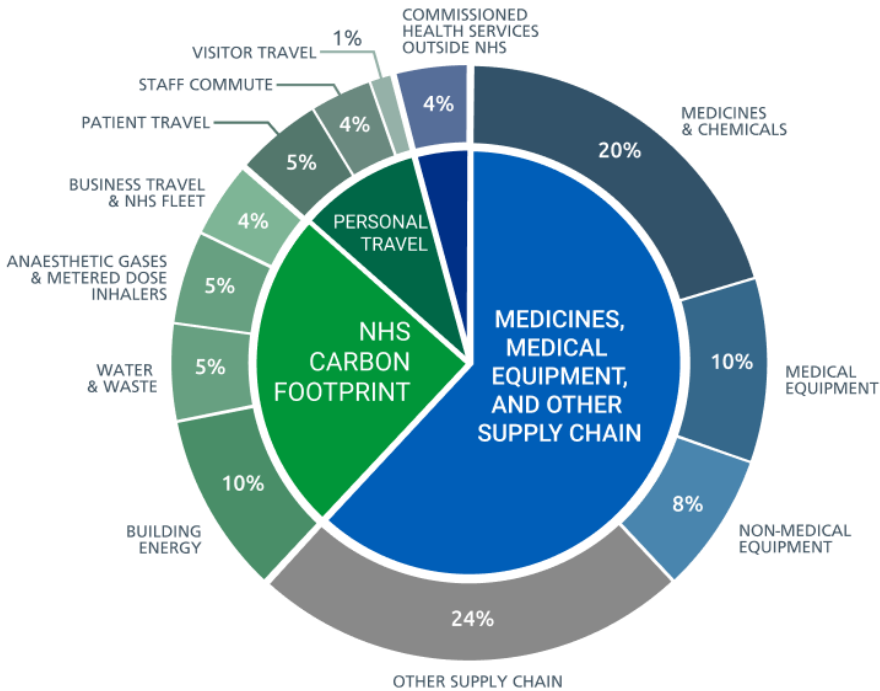
By 2025 we'll see

- New workstreams in sustainable pharmacy, procurement, and digital
- A new plan to reduce energy usage and waste across the estate.
- A travel planner and a logistics manager leading on a new green travel plan enabling active travel for staff and patients
- Climate Leaders in every team, a Climate Leaders Network and Visible Actions
- Divestment of all controlled funds from fossil fuels
- Advocacy for divestment of health funding from fossil fuels
- Reduce energy consumption by 5%
- Embedded work from home options
- Audit all sites for retrofit, energy generation, NHS Forest and rewilding potential
- Sustainability and climate action embedded in our operations and through all our quality improvement work – with visible pledges from senior leaders across individual workstreams
- Our climate actions rooted in social justice – feeding into our work as an anchor institution, our work on social determinants of health and on health and social inequalities
- Defunding of the most carbon intense travel for business or academic work
- Clinical and service user leadership - a board level lead, clinical leads for sustainability and climate action and service user representatives for climate action
- 100% feasible sites with sufficient EV and cycling infrastructure
- 100% staff can access carbon literacy training
- 100% increase in allotment and therapeutic gardening sites
- Water fountains at our inpatient sites.
- More service users accessing community food and farming projects
- Expand on our work with community, health and social care partners across the system
- Investment in peer led work
- Investment in social, natural and psychological interventions
- A climate arts club, helping us draw on arts and literature to imagine our decarbonised future

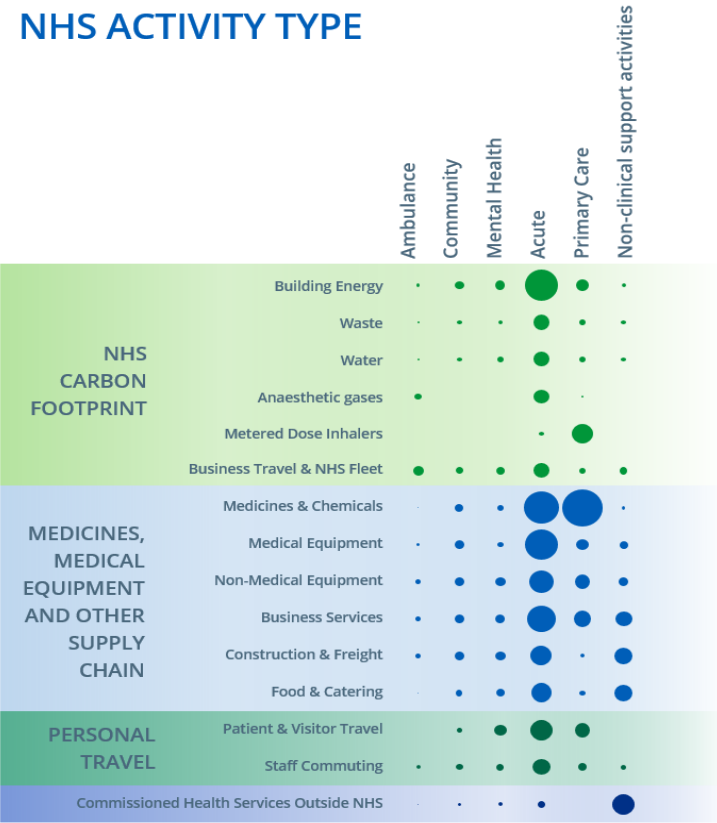
Below we outline in detail the actions we are committed to taking in the next 3 years. They reflect available data on our main sources of emissions as well as the opportunity provided by this work to mobilise staff to make changes in their professional and personal lives. These include actions across every aspect of the work of the Trust.

- Practical changes in the way we manage our estate,
- Policy changes designed to help us make better decisions,
- Actions designed to embed climate action in every part of the Trust,
- Ensuring everyone has access to the information they need to make the best choices they can,
- To empower us all to take part in this work.

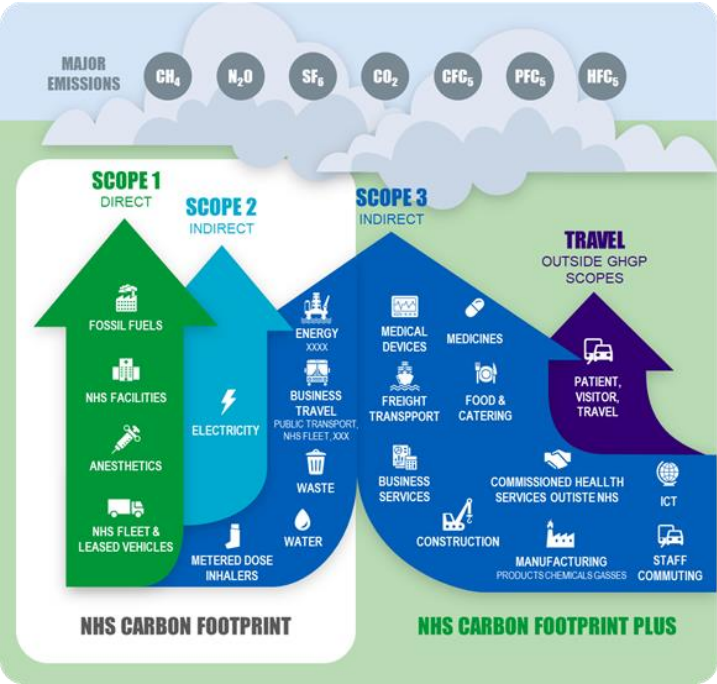
Sources of carbon emissions by proportion of NHS Carbon Footprint Plus(from ‘Delivering a net zero NHS, 2020)



NHS ACTIVITY TYPE



Sources of carbon emissions by activity type and setting of care (from ‘Delivering a net zero NHS, 2020)



Greenhouse Gas Protocol scopes in the context of the NHS (from ‘Delivering a net zero NHS, 2020)

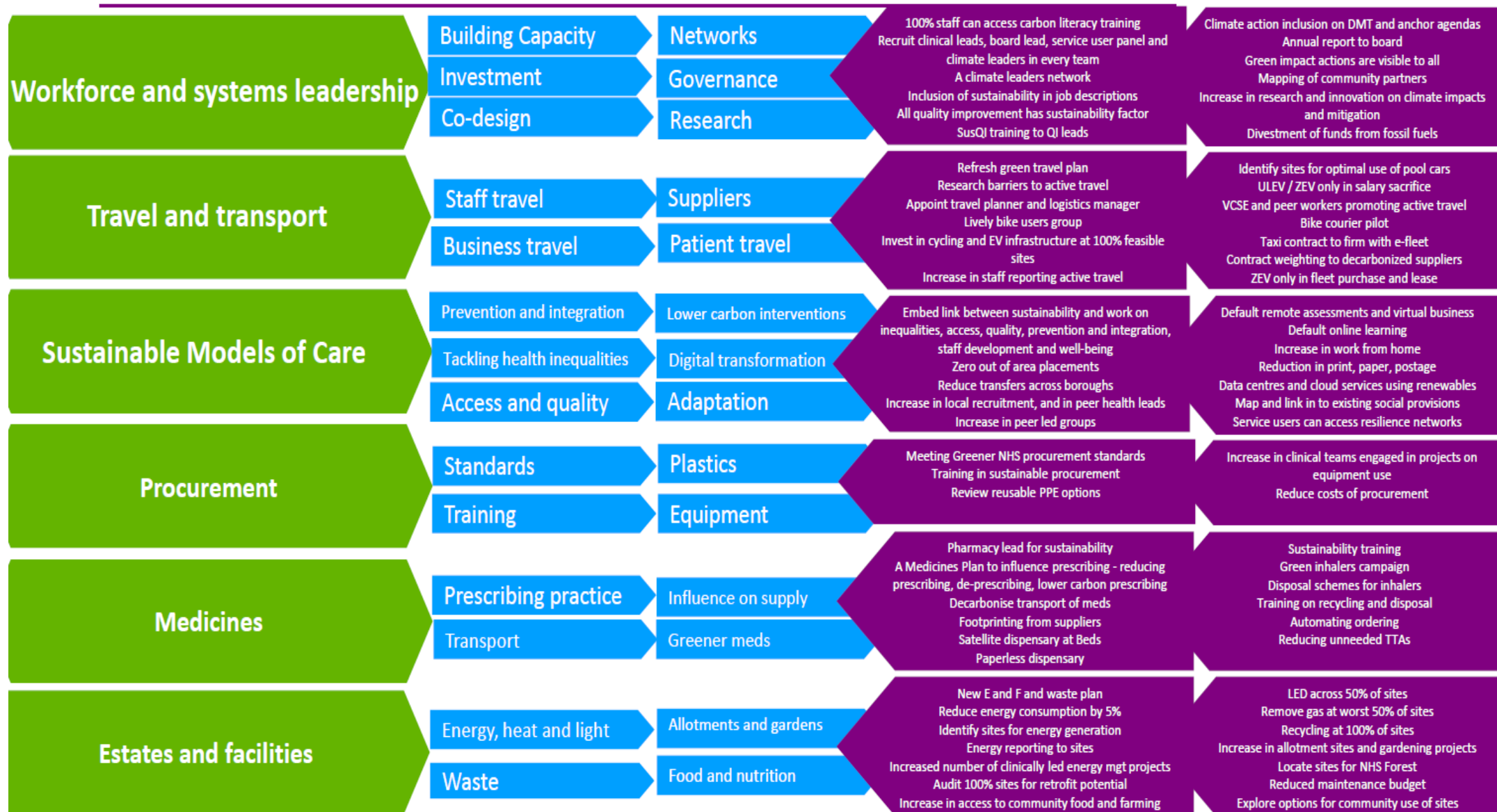
Carbon emissions are defined under three categories or ‘Scopes’ – Scope 1, 2 and 3. These are defined by the Green House Gas Protocol and the Greener NHS.

Scope 1 – All Direct Emissions from the activities of an organisation or under their control. This includes fuel combustion on site, from owned vehicles and fugitive emissions. Examples include fleet vehicles, fuel combustion, gas emissions from boilers and air-conditioning refrigerant leaks.

Scope 2 – Indirect Emissions from electricity purchased and used by the organisation. Emissions will be created during the production of the energy and eventually used by the organisation. Examples include purchased electricity, heat and steam.

Scope 3 – All Other Indirect Emissions from activities of the organisation, but occur from sources that they do not own or control. This is usually the largest share of the carbon footprint, especially for office-based companies and the health system, covering emissions associated with business travel, procurement, waste and water.

GREEN PLAN: Reduce direct and indirect GHG emissions by 40% by 2025



3. Workforce and system leadership

At ELFT, delivering on climate action means engaging and developing our workforce and system partners. We know how motivated our staff and service users are in addressing issues of social justice and inequalities. We approach this work with enthusiasm for the great potential in our workforce to champion climate action and a sense of humility about the lessons we can learn from partners in the community and voluntary sector, many of whom have dedicated years to climate action and social justice. We see action on the climate and ecological crisis very much as part of our burgeoning work as an anchor institution and as a trust dedicated to taking action in our communities on the social determinants of health, including social inequalities.

With the momentum provided by this programme of work, we will develop our sustainability and value group and associated working groups and integrate sustainability into all our operations. We will develop online sustainability training and expand our sustainability team as well as forming robust networks with local partners. We will further integrate sustainability into our award winning quality improvement programme. We will support research on climate impacts, and nature based interventions, and join in campaigns for action on the social determinants of health, including deprivation, discrimination, poorer housing, educational opportunity, unemployment and occupational precarity, food and fuel poverty, debt, disenfranchisement, and divisive policies and political cultures. In this way, we will support efforts to deliver a Green New Deal. Our capability building work with staff and service users will focus on awareness of the urgency of the crisis, on the health co-benefits of climate action, the significance of existing inequalities, and on meaningful collective action and mutual aid, identifying the many and varied opportunities to make positive change.

To date, we have:

- Established a trust-wide Sustainability and Value Steering Group
- Appointed a board lead for Environment and Sustainability (Net Zero)
- Recruited a people participation representative for climate action
- Joined the Future NHS Greener NHS community
- Appointed Clinical Leads for Sustainability and Climate Action for London and Bedford and Luton
- Joined emerging local authority networks
- Engaged actively in the North East London ICS Anchor Charter Development
- Begun a weekly sustainability message in trust comms and intranet – with information and opportunities for action

In the next 3 years we will:

Our goal:	Demonstrated by:
Build a climate literate workforce	100% of staff can access carbon literacy training Board training in carbon literacy QI team training in SusQI Developed role and profession specific training e.g. on Greener Procurement, Greener Pharmacy, Green AHPs Training co-led by staff equalities networks Primary care is signed up to Greener Practice tools Maintained consistent framing of health impacts, health benefits, unequal impacts locally and globally and includes learning on the root causes of climate change and systemic approaches to climate mitigation and adaptation

Co-design and co-produce our climate actions	<p>Recruited people participation representatives to our steering group</p> <p>Developed Recovery College sessions on climate action</p> <p>PP leads, Working Together Groups and peer support workers access carbon and climate literacy training</p>
Engage staff and service users	<p>Climate leaders in every team</p> <p>Climate leaders staff network</p> <p>Green impact actions are visible to all</p> <p>Included sustainability and value in job descriptions at recruitment</p> <p>Weekly comms on climate action</p> <p>Climate arts club</p>
Develop robust governance structures and accountability	<p>Appoint a board level lead, a sustainability and net zero lead, and clinical leads for sustainability and climate action</p> <p>Climate action pledging from all senior leaders linked to individual workstreams</p> <p>Sustainability and Value Group includes key decision makers as well as enthused staff and service users</p> <p>Workstreams are clinically led and accountable</p> <p>Outcomes are accountable to and align with those of the wider system (ICS)</p> <p>Quarterly emissions data to Greener NHS programme and Quality Committee and an annual report to Board</p>
Build networks with partners	<p>Senior participation in ICS, acute trust, local authority and mental health sustainability networks</p> <p>Involved in networks across local VCSE</p> <p>A mapping exercise of community partners</p> <p>Use our organisational wealth and voice to champion local VCSE</p> <p>Share learning in Greener NHS Future NHS collaborative</p> <p>A joint annual conference with mental health and community health trusts</p> <p>Support for primary care partners to engage in Greener Practice programme</p> <p>New opportunities for local organisations and voluntary and community sector groups to work with us on common solutions</p> <p>Tracking funding opportunities and synergies with local partners</p> <p>Sharing network initiatives on renewable energy, travel and transport, housing, energy efficiency and divestment of funds from fossil fuels.</p>
Integrate sustainability and climate action into all our work	<p>All quality improvement work has sustainability factored in</p> <p>An increase in value and sustainability projects</p> <p>Using improvement methods to structure our workstreams</p> <p>Climate action is on the agenda at anchor steering group and directorate management teams</p>

Support research and innovation on climate impacts, action and mitigations

An increase in research and innovation on climate impacts, action and mitigations within clinical and non-clinical teams

An increase in research and innovation on health benefits of climate action, including nature based interventions and positive impact on existing inequalities.

Psychiatry trainees taking up special interest in sustainability

Capital and community investment

Divest all our capital funds from fossil fuel investments

Advocate for divestment by partners and others in our communities

Advocate for actions that will address social determinants of health – deprivation, fuel poverty and food poverty, poor housing, access to green spaces, employment opportunity, debt, discrimination.

Support movements that seek to challenge inequalities in our society that contribute to climate vulnerability in our communities

Consideration of global impacts of local actions (avoiding shifting emissions to global south)



I'm extremely concerned about the climate crisis. As a psychiatry trainee working in the Trust, I particularly welcome the opportunity to learn more and to become involved in sustainable mental healthcare. It's essential that ELFT continue to demonstrate such leadership, as organisational change is one of the most effective tools we have to face this crisis.

Dr Liam Embliss, Core Trainee in Psychiatry, East London NHS FT and member of Psych Declares



> 100,000 protest climate inaction and injustice, Glasgow 6 November 2021, COP26 climate justice march

4. Sustainable models of care

How we deliver care is critical to prevention and to reduction in emissions associated with our activities, and is also linked to the overall sustainability of our services. We have faced a long period of austerity, lack of parity in funding of mental health care, variation in the provision and quality of services, a workforce crisis and an increase in need for mental health and community services in addition to the devastating impact of the covid-19 pandemic. The sustainability of our health services and systems are not separate or distinct from environmental sustainability but are intricately linked.

Further to this, work to reduce the impact of healthcare on the environment takes place in a context of transformation of mental health services. The NHS Long Term Plan (2019) and the Mental Health Implementation Plan (2019) herald a shift towards more integrated, population-level health systems, intended to address health inequalities in both prevention and treatment, and tackling variation in particularly underfunded services. They highlight the role of leadership from the Voluntary, Community and Social Enterprise (VCSE) Sector.

Sustainable healthcare includes:

- Primary and secondary prevention of ill-health – including action on social and environmental determinants of health, adverse childhood experiences, discrimination and disadvantage
- Reducing variation and inefficiencies and improving access to care
- Expanding on lower carbon interventions including more localised and integrated services, digital services, psychological services, allied health professionals, nature based and social 'prescribing', cultural and arts sectors, peer-led work, and services or interventions led by the voluntary and community sector
- Prioritising the delivery of effective, high quality treatment, to enable recovery.

To date, as a Trust, we have:

- Expanded our focus on the social determinants of health, and on population health inequalities, including our collective responsibility for population health.
- Committed to work as an anchor institution in local communities.
- Committed to work on social determinants of health as a Marmot trust.
- Developed staff equalities networks and committed to become an anti-racist trust, incorporating and expanding on workforce race equality standards, to work on gender pay gap, and to work with LGBTQ+ and Ability staff networks to improve the experience of staff and service users facing discrimination.
- Developed a trust-wide quality improvement programme in order to enable staff and service users to work together on reducing inefficiencies and unwarranted variation in care.
- Begun a programme of transformation of mental health and community health services, based on the NHS Long Term Plan which aims to promote sustainable healthcare, improve timely access to care, deliver targeted interventions closer to home, work more closely with local voluntary and community sector organisations and deliver on integration of care.
- Formed a part of the Integrated Care System (ICS) across north east London
- Are in process of aligning community services with Primary Care Networks
- Have eliminated out of area placements and supported neighbouring trusts with local beds
- Set up and supported a number of inspirational social and therapeutic gardening projects – including those in forensic services at the John Howard Centre and Wolfson House - and an allotment with wildlife garden at the Lighthouse mental health drop-in centre in Bedfordshire
- Trained and recruited 50 – 60 peer support workers involved in numerous projects including walk and talk groups and cycling projects.
- Led on the development of 40 BAME AHP Ambassadors across NEL
- Funded Healthy Influencer Training run by Bromley by Bow Centre.

In the next 3 years we will:

Our goal:	Demonstrated by:
Build on our equalities and social justice work	<p>Deliver on anchor institution plans</p> <p>Default to community wealth-building in procurement where feasible</p> <p>Increase in local recruitment</p> <p>Increased spend at local community sites e.g. team awaydays</p> <p>Increase in numbers of apprenticeships, peer health leads and physical activity volunteers</p> <p>Staff health and wellbeing team represented on sustainability steering group.</p> <p>Support staff and service users into social and community climate change activism</p>
Integrated care and care closer to home	<p>Investment in crisis services</p> <p>Investment in community services closer to home e.g. eating disorder service for East of England, CAMHS in Luton and Beds</p> <p>Deliver transformation programme</p> <p>Supporting ICS partners with local beds</p> <p>Zero out of area placements</p> <p>Reduced number of cross-borough transfers</p>
Expand on peer led models and collaboration with community and voluntary sectors	<p>Increase in peer led work</p> <p>Increase number of peer led groups</p> <p>Supporting our communities with routes into employment, training, volunteering, community connection, access to warmer homes information, healthy influencer networks</p>
Maintain quality of care	<p>Expand on quality improvement programme with integrated sustainability factor</p>
Expand on lower carbon interventions	<p>Develop understanding of lower carbon interventions within clinical teams</p> <p>Deliver profession specific plans on lower carbon interventions</p> <p>Deliver digital plans</p> <p>Expansion of IAPT and secondary care psychology services</p> <p>Expansion in the work of AHPs (<i>Allied Health Professionals - Art Therapists, Dance Movement Psychotherapists, Dramatherapists, Music Therapists, Dietitians, Occupational Therapists, Paramedics, Physiotherapists, Podiatrists, Speech & Language Therapists</i>)</p> <p>Increase in nature based work</p> <p>Increase in social prescribing</p> <p>Increase in health collaborations with cultural and arts sector partners to support activism, creative story telling and social movement</p> <p>Map and network with existing social provision from VCSE sector</p> <p>Increase in peer support work</p>

Reduced prescribing costs

Increase the number of therapeutic gardening and allotment projects

Support research on outcomes of lower carbon interventions in mental health

Kwagala Faith @kwagal... · 11h ...

We are the first generation to feel the effect of climate change and the last generation who can do something about it

[@Riseupmovt](#)

[#ClimateActionNow](#)



@kwagala39_faith Faith, Ugandan climate activist, Rise Up Movement, 28 December 2021 (with permission)

5. Digital transformation

Digital technology and systems can play a significant role in reducing emissions including those associated with business travel, staff and patient travel.

Sustainability is now built in to NHSX What Good Looks Like (WGLL) framework for digital transformation. According to NHSX, in the 12 months to June 2021 virtual appointments saved an estimated carbon equivalent to taking 40,000 cars off the road for a year. Remote monitoring technologies are estimated, over the next 3 years, to reduce patient travel by 28 million miles. NHS Digital has saved 4,000 tonnes of CO2 by making their data hosting more efficient, including migrations to Cloud First and Crown Hosting. SMS reminders are now widespread across the NHS instead of letters.

To date we have:

- Expanded the use of telemedicine to deliver care remotely
- Expanded use of integrated digital systems to access records
- Adapted digital technologies to reduce the use of paper records, printing and postage.
- Embarked on digital enablement activity on Trust iPads that have been damaged, for re-use in our communities

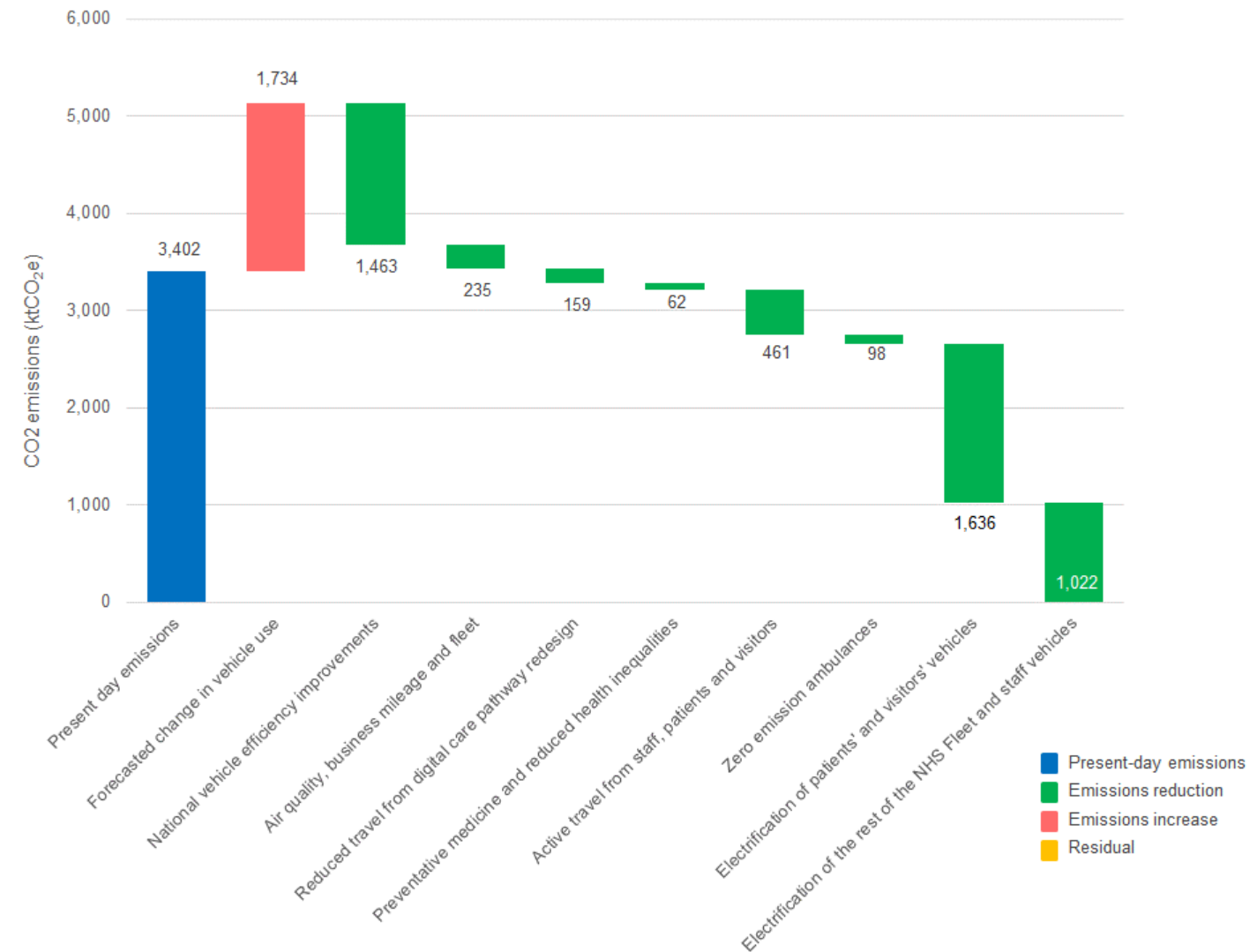
In the next 3 years we will:

Our goal:	Demonstrated by:
Further integrate sustainability into Digital Plans	Digital lead on Sustainability group and sustainability inclusion on digital transformation A digital plan for sustainability
Expand use of digital technologies	Default to remote assessments unless specific indication for face to face (with a target minimum 50% remote outpatient consultations) (with careful monitoring of balancing measures and feedback from service users) Default to virtual business meetings unless specific indication for face to face Default to online learning and CPD for staff and defund flights / carbon intensive business and academic travel Use of print, paper, and postage reduces in line with increased use of email and text Expand working from home with only deliberative commuting, with reduction in staff travel costs Support research into the impacts of remote working and remote care
Reduce Need for Hardware Duplication	Develop Virtual Desktop Interface to allow trust IT software to be accessible through multiple devices including low power devices and personal devices
Accountability for cloud and digital service providers	Cloud services are delivered from energy efficient buildings Utility provision is from 100% renewable energy Data centres use 100% renewable energy

6. Travel and Transport

Travel and transport accounts for 14% of NHS emissions. Considerable scope for emissions reduction exists with changes to business travel, deliveries, contracts with suppliers, staff transport, and patient travel and transport.

Interventions with the greatest impact are likely to be those that enable electrification of patient and visitor vehicles as well as staff and fleet e.g. EV infrastructure at NHS sites and incentives to switch to electric vehicles, in addition to enablers of active travel.



Interventions to reduce transport and travel emissions (from Delivering a Net Zero NHS, 2020)

Our trust includes inner and outer London boroughs as well as rural areas of Bedfordshire. Travel needs and barriers to more active travel vary across the trust. We see great enthusiasm for active travel in some parts of the trust. We know that personal safety is a factor in decisions around active travel as well as concerns about skills and ability. Many of our staff work close to home, others must commute long distances. Many staff are keen to switch to electric vehicles but still perceive the costs as excessive. We need a better understanding of factors influencing staff and patient travel. There is considerable scope in supporting staff and patients to make informed choices.

In the next 3 years we will appoint a travel planner and a logistics manager. We will develop a green travel plan for the trust that can account for the varying needs of our staff and patients and involves our VCSE sector partners and peer workers in promoting active travel. We will explore the barriers to more active travel and offer personal travel plans and travel audits for teams and sites. We will explore incentives to more active travel. We will invest in active travel and EV infrastructure at all feasible sites in partnership with local authorities.

We will identify sites for optimal use of pool vehicles, ensure that only ULEVs or ZEVs are available to staff through car salary sacrifice schemes, and our logistics manager will co-ordinate more sustainable business travel. We will make better use of bike couriers in London and will use only EV taxis.

We will further develop our bike users group with a focus on tackling the barriers to cycling in our communities. We will promote our salary sacrifice scheme for cyclists.

Across the NHS fleet, targets already exist ensure all vehicles purchased or leased are low and ultra-low emission (ULEV) and 90% of the NHS fleet to use low, ultra-low and zero-emission vehicles by 2028. In line with Greener NHS targets, we will work with suppliers to incentivise cleaner transport options.

To date we have:

- Conducted a trust wide business transport review
- Conducted a full travel survey and developed a trustwide travel plan
- Established a bike user’s group and a cycle to work lead
- A salary sacrifice scheme for bike purchase
- Bike Ability programmes
- Provided bikes for Peer Led Cycling Sessions
- Installed cycling infrastructure at 1 in 7 feasible sites

In the next 3 years we will:

Our goal:	Demonstrated by:
Refresh our green travel plan to support <ul style="list-style-type: none">- reducing traffic,- active travel and- public transport for staff, patients and visitors (using Health Outcomes of Travel Tool)	Appoint trust travel planner Appointment of a Walk at Work lead Green travel audits for teams and sites Personal travel plans Expanding our bike users’ group (BUG) Research in barriers to active transport and lower emissions vehicles Cycling infrastructure at 100% of feasible sites EV charging at 100% of feasible sites Staff awareness of active travel infrastructure Monitor % EV use by travel claims Identify financial incentives for switch to active transport Ensure that only ULEVs or ZEVs are available to staff through car salary sacrifice schemes. Identify sites for optimal use of pool vehicles Increase % of staff reporting active travel to and at work

	<p>Appoint Logistics Manager to the trust to co-ordinate business travel</p> <p>Reduction in business mileage</p> <p>Reduction in costs associated with travel</p> <p>Review travel expenses policies to identify opportunities to incentivise active travel</p> <p>Work with local authorities on travel and transport options</p> <p>Involve VCSE sector and peer workers in promoting active travel</p>
Review supply chain transport	<p>Pilot sites for bike couriers</p> <p>Award taxi contracts to those with e-fleet</p> <p>Weighting to suppliers demonstrating decarbonised fleet</p> <p>Set reductions targets with major suppliers</p>
Decarbonise fleet and lease	<p>Conduct review of fleet and optimised use</p> <p>For new purchases and lease arrangements, sole purchase and lease of zero emissions vehicles (ZEVs).</p>

Healthcare professionals from XR Doctors at COP26, Glasgow, protest JP Morgan bank, 5 November 2021.

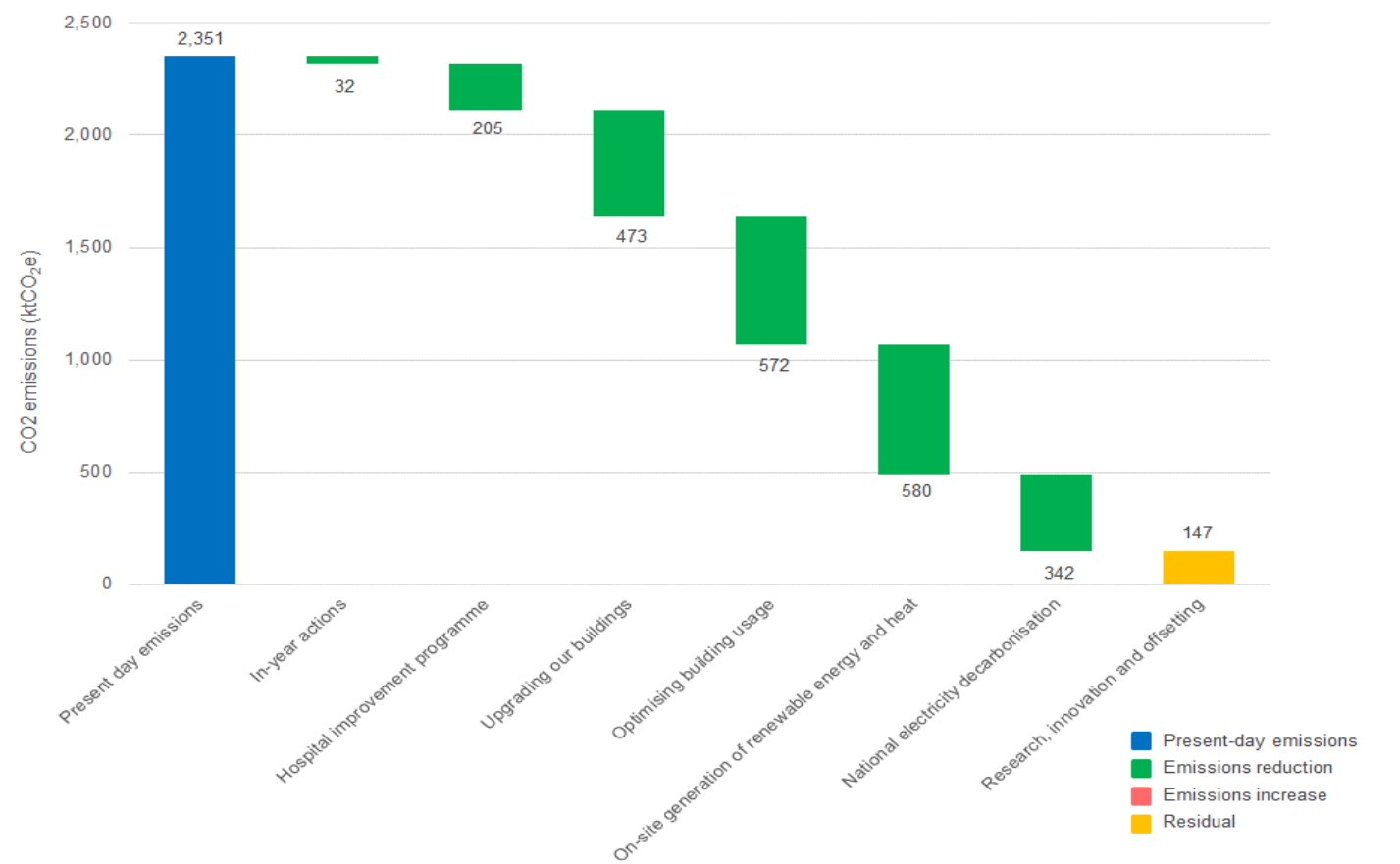


7. Estates and Facilities

Delivering a Net Zero NHS set out the critical role estates and facilities services have in achieving NHS ambitions. It focuses on eliminating emissions from our estates and facilities operations, setting out clear actions, timelines for completion and the key enablers that will support delivery. The NHS estate makes up 15% of the total carbon emissions profile of the NHS. Significant opportunities lie in reducing energy usage, in energy efficiency, in managing waste and water, and new sources of heating and power generation. New builds must be net zero compatible, and significant improvements are needed in the existing estate.

NHS buildings, from large hospitals to local GP surgeries, are the most prominent physical manifestations of the NHS. This creates an opportunity for estates to help inspire others, through low carbon building, sustainable land use, and energy generation. In addition, investment into estates and facilities supports the development and maintenance of green jobs and the transition for workers to less polluting industries.

We are taking a two pronged approach to the role of estates and facilities. On one side we are looking at reduction in emissions from energy efficiency, changes on the way we heat and light our buildings and in the way we manage waste and water. We will audit all our sites for retrofit potential. On the other, we see the estate as the site of spaces we can share with our communities, use for growing and gardening, for rewilding, and for NHS Forest, providing a boost to biodiversity and access to natural spaces so critical to our well-being and to nature based therapies.



Interventions to reduce emissions in the secondary care estate – relative contributions (from *Delivering a Net Zero NHS, 2020*)

To date, we have:

- Switched to 100% renewable energy
- Audited high consuming water sites
- Installed LED lighting at our most energy intensive sites
- Installed automatic meter reading equipment
- Installed boiler and heating insulation at inpatient sites
- Improved current Building Management Systems to provide energy saving practices
- Installed cycling facilities at ten additional sites since 2015
- Installed waste saving equipment and food waste machines at our inpatient sites

In the next 3 years we will:

Our goal:	Demonstrated by:
Create a new estates and facilities plan	A plan to reduce energy usage and waste, improve efficiency, generate energy, and improve land use across the estate.
Improve energy management	<p>Reduce energy consumption by 5%</p> <p>Pioneering decarbonisation pilot programme at Beech Close Resource Centre to fully decarbonise an existing site</p> <p>Link up site building management systems to improve energy efficiencies</p> <p>Identifying sites for onsite energy generation</p> <p>Delivering energy reporting directly to sites to encourage reduction</p> <p>Increased number of clinically led energy management projects across services using Qi methodology</p> <p>Identifying potential for combined energy purchasing or combined renewables</p>
Improve efficiency of heating and lighting	<p>Identifying opportunity in the NHS Energy Efficiency Fund (NEEF)</p> <p>Auditing 100% of sites for retrofit and insulation potential</p> <p>Switch to LED across 50% of sites</p> <p>Remove gas heating at worst performing 50% of sites</p> <p>Install lighting controls, motion sensors and timers at all sites</p>
Integrate net zero practice into business as usual	<p>Routine consideration of net zero principles in upgrades and maintenance programmes including on Capital Projects Working Group</p> <p>Ensure that all Capital Programmers and investment decisions take full account of sustainability and focus on NZC / energy reduction initiatives</p> <p>Ensure that our decision making in Asset Programme Management take full account of sustainability and rate sustainability equal to statutory compliance</p>
Improve waste management	<p>Increase recycling provision to 100% of sites</p> <p>Work with waste carriers to improve efficiencies and reduce waste</p> <p>Install water saving measures at all sites</p> <p>Initiate a reuse scheme</p>

Land use

Increase number of allotment sites and therapeutic gardening projects across our estates, in partnership with VCSE sector

Locate sites for NHS forest

Reduce maintenance budget based on rewilding principles

Explore options for community use of sites

Presenting the Children's Charter at the Lord Mayor's Parade, 13 November 2021. Photography with kind permission from Feng Ho

<https://extinctionrebellion.uk/wp-content/uploads/2021/11/Childrens-charter.pdf>



8. Medicines

Across the NHS, emissions embedded in the production and delivery of medicines account for 20% of total emissions. While the percentage is lower in mental health trusts, we know that a significant proportion of primary care prescribing is in psychotropics, and there is considerable potential for sustainability work across our healthcare system to improve the impact of prescribing.

Our focus is on reducing unnecessary prescribing, switching to lower carbon alternatives, optimising medication usage, reducing waste and appropriate disposal of waste. Inhalers are a particular focus in our primary care settings, as is de-prescribing of psychotropics.

To date we have:

- Developed capability in sustainability across pharmacy services
- Established a Green pharmacy team to focus on sustainability strategy for pharmacy department
- Produced a plan for reducing emissions from medications
- Introduced push bikes/ cargo bike to deliver smaller parcels of medicines across London sites
- Encouraged recycling of medicine receptacles dispensed to in-patient services and on discharge with addition of stickers to labels indicating items are recyclable.
- Developed waste projects including use of patient own drugs, and electronic prescribing (EPMA) to reduce use of paper charts
- Switched to paper bags to supply in-patient medicines to the wards
- Used admission as an opportunity to check inhaler techniques
- Medicines reconciliation on admission
- Developed guidance to reduce the use of blister packs trust wide.
- Developed a business case for a specialised older adult pharmacist with a role in coordinating de-prescribing.

In the next 3 years we will:

Our goal:	Demonstrated by:
Reduce Emissions from Medications	<p>Medicines Plan to include specific consideration on reducing prescribing, tackling over-prescribing, alternatives to prescribing, de-prescribing, and lower carbon prescribing</p> <p>Decarbonised transport of medicines across all ELFT sites</p> <p>Request carbon footprint data from wholesalers for medicines delivered</p> <p>Install a satellite dispensary in the new Bedford build.</p> <p>Reduce cost of medicine transport to Bedfordshire</p> <p>Use automation to reduce over-ordering - Omnicell cabinets (electronic medicine cabinets)</p> <p>Funding of interoperability of the purchased Prescription Tracking System (PTS) with electronic prescribing system which would fully enable a paperless ELFT pharmacy dispensary</p> <p>Introduce system to establish if dispensing is needed on discharge</p> <p>Appoint an Older Adult Pharmacist to coordinate better and reduced prescribing in the over 65's.</p>

	<p>Expand on links with primary care prescribers to better share good practice</p> <p>Improve understanding of disposal options across our communities</p> <p>Increase number of improvement projects on medicines waste</p> <p>Further audit transport of medicines to identify opportunity to reduce travel</p> <p>Policies reviewed in line with sustainability goals</p>
Develop capability in sustainability across pharmacy services	<p>Appoint pharmacy lead for sustainability</p> <p>Include sustainability education in pharmacy post graduate training</p> <p>Sustainability training for pharmacy team</p> <p>Set up sustainability awareness campaigns for pharmacy staff</p> <p>Joint enterprise across ICS on sustainability projects</p>
Reduce the carbon impact of inhalers	<p>Joined North East London wide greener inhalers campaign</p> <p>Support patient choice for green inhalers</p> <p>Ensure schemes for correct disposal of inhalers</p>
Procurement and medicinal equipment	<p>Work with ICS partners, procurement hubs and commercial medicines units (CMUs) in establishing stock list of greener medicines</p> <p>Use biodegradable containers to supply medicines</p>
Conduct sustainability audit	<p>Sustainability audits across the department</p> <p>Each site present actions with regards to meeting sustainability agenda</p>
Increase training and awareness	<p>Patient and staff training on blister pack recycling and disposal of medicines.</p> <p>Medication labelling re: recycling</p> <p>Include sustainability agenda and overprescribing discussion in doctors induction</p>

It's inspiring to see ELFT take a lead to tackle climate emissions. As a psychiatry trainee with a special interest in sustainability, I have worked with the RCPsych Planetary Health and Sustainability Committee over the years and published on air pollution. We know there's so much enthusiasm and energy in health services to face this problem, and so many health benefits to climate action. I hope the Green Plan will raise awareness and support staff to make changes across the board. **Dr Shuo Zhang, CAMHS Specialty Trainee, Coborn Unit**

9. Supply chain and procurement

The NHS supply chain accounts for the majority of indirect greenhouse gas emissions.

The London Sustainability Network will work collaboratively on procurement projects with the London Anchors programme to reduce carbon footprint through sustainable procurement, working with and through the London Procurement Partnership.

Modelling by Greener NHS suggests that alignment of non medical suppliers with NHS targets will have the greatest impact on this emissions source. Before 2030, the NHS will no longer purchase from suppliers that do not meet or exceed our commitment to net zero. We aim to reduce emissions through more efficient use of supplies; low-carbon substitutions and influencing suppliers to decarbonise their processes.

To date we have:

- Adopted the Social Value Model (PPN 06/20) where all NHS tenders must include a minimum of 10% scoring criteria in all procurements to assess how suppliers will contribute to the NHS' net zero targets and social value in contract delivery e.g. a recent Provision of Website tender resulted in contract awarded to local SME provider paying the Real Living Wage to a diverse workforce and working in collaboration with ELFT's service users to deliver a website, with preference for sustainable energy providers and preference to hiring local residents to current and future vacancies.

Our goal:	Demonstrated by:
Develop a sustainable procurement plan	<p>A sustainability lead for procurement</p> <p>Meeting requirements of the Government Buying Standards (GBS) and examine the Green Public Procurement (GPP) instrument.</p> <p>Embed learning from the NHS supplier engagement programme</p> <p>Incentivise local supply chains that meet standards for fair wages and good working conditions</p> <p>Engage with suppliers in the pre-procurement period and during the tendering process to ensure that key sustainability issues are addressed.</p> <p>All suppliers with new contracts for goods, services, and/or works publish a carbon reduction plan for their direct emissions (only those with an anticipated contract value above £5 million per annum to April 2024, thereafter all new contracts irrespective of value)</p> <p>Training offered to improve the sustainable procurement skills of the workforce</p> <p>Reduce use of office paper by 50%</p>
Reduce use of clinical equipment	<p>Review options for reusable PPE</p> <p>Engage clinical staff in improvement work on reducing use of equipment</p> <p>Expand on existing walking aid and other AHP related refurbishment and recycling schemes</p> <p>Reduce costs of equipment procurement</p>
Reduce use of plastics	<p>Eliminate single use plastics in our catering and supply chain services</p> <p>Expand on projects reducing the use of clinical single-use plastic items</p>
Connection with NHS England and Greener NHS	Using Greener NHS support and toolkits available to NHS procurement.

10. Food and nutrition

Reducing food related emissions in our services and in our communities means exploring the content of our diet, distance travelled, the impact of the food industry, plastics, packaging, processing, and waste. The accessibility of cheap, healthy foods is a major determinant of health yet many in our communities face food poverty and are making painful decisions everyday about how best to use limited resources.

Globally, the reliance on meat eating has led to increased emissions from industrial farming, deforestation, and soil erosion. It is clear that a diet that includes more plant-based foods and fewer animal source foods has both a lower environmental impact and greater health benefits, reducing the risks of heart and lung disease, obesity, diabetes, dementia, and cancers and preventing millions of premature adult deaths per year.

In the NHS, the Hospital Food Review will consider sustainability and the impact of the whole supply chain, including sustainable procurement and waste. New national standards due from NHS England and NHS Improvement may include ensuring suppliers have sustainable production and transportation practices, and source locally and seasonally.

Food growing initiatives such as community orchards, allotments, and urban farms are abundant in our communities from Stepney City Farm to Cody Dock to Growing Communities' Patchwork Farm. Each creates opportunities for local communities to come together, and a lasting connection to the natural world, as well as better mental and physical health. We will approach local community initiatives with humility to help us educate and inform on food, farming, and nutrition.

We will work with suppliers to increase our plant based offer to inpatients, to reduce waste from catering, and to eliminate plastic packaging. We will install water fountains at our inpatient sites. We will map the community provision of food growing initiatives and explore links with our health navigators.

To date we have:

- An established food and nutrition group
- Worked with suppliers to improve on plant based offer
- Recruited a transformation dietician
- A Nutrition Steering Group (NSG) developing a nutrition policy for the trust

In the next 3 years, we will:

Our goal:	Demonstrated by:
Improve on sustainable catering	Increase plant-based food offer Reduced food waste Eliminate plastic packaging Install water fountains at sites Local and sustainable catering of all catered events
Develop local food and farming networks	Mapping of community initiatives Increase in service users accessing community food and farming projects

11. Adaptation

Regardless of our actions to reduce emissions, climate change and associated severe weather conditions will significantly hinder the delivery of health and community care in the near future. We know that a lag between cause and effect means emissions will have ongoing impacts. Adaptation is vital for our business continuity and to improve the resilience of communities, reduce the burden of illness and disease, and reduce health inequalities.

In order to mitigate the worst effects of climate change and ecological crisis, we will further develop climate mitigation plans for infrastructure, staff and patients. In order to support our communities to manage the psychological effects of the crisis, we will support research and access to resilience networks, activist and civil society supports, and climate psychology networks.

To date we have:

- Full compliance with NHS Emergency preparedness, resilience and response (EPRR) framework and core standards including for extreme weather
- Linked with Climate Emergency Centres locally
- Robust local networks for emergency planning

In the next 3 years, we will:

Our goal:	Demonstrated by:
Invest in training	Staff and service users to have training in carbon literacy, understanding of the urgency of action and ability to identify key actions both personal and professional. Staff able to identify and stratify the risks
Expand on planning	Develop team based and individual based climate mitigation plans for infrastructure, staff and patients. Support service users to access and develop climate resilience networks and civil society supports Support CAMHS population to access trained climate psychology networks to mitigate impact of climate distress
Increase research on managing impacts of climate change	Support clinical research into adaptation and management of the impacts of climate change

12. Governance

ELFT's Green Plan has been developed with input from our staff and service users and is informed by a sustainability and value steering group with members drawn from a wide range of staff.

The progress of the Green Plan will be reviewed monthly by the green plan management team, presented monthly to the Sustainability and Value Group, quarterly to Quality Committee and annually at board level. Data will be provided to the Greener NHS programme.

The management team will oversee the development of work streams covering the key primary drivers to reducing carbon emissions (see driver diagram above) and develop a QI community to combine and track QI projects in sustainability.

The progress of the plan will be monitored against work stream specific actions and data. Progress will also be provided to the regional greener NHS team. We will update this plan annually to consider:

- the progress made and the ability to increase or accelerate agreed actions
- new initiatives generated by staff or partner organisations
- advancements in technology and other enablers
- the likely increase in ambition and breadth of national carbon reduction initiatives and targets.

13. Tracking Progress

Our emissions in 2019/2020 were calculated as 3895 tCO₂. That figure included energy usage, water and business travel but excluded many important areas of our emissions. We also worked with Climate Partners to calculate current emissions across a range of activities. These figures will be further updated with the data collection methods to be introduced by the Greener NHS programme.

We await new data collection methods from the Greener NHS programme to enable more robust calculation of greenhouse gas emissions. We will continue to make use of available tools, guidance and technical resources provided by the Greener NHS programme to help us prioritise actions, and calculate the carbon reduction and costs associated with each action.

ELFT is a member of the Greener NHS Programme's Future NHS workspace. We will continue to track opportunities for funding of decarbonisation via the workspace.

The driver diagram on page 12 visualises our theory of change and identifies a set of change ideas. We will continue to work with quality improvement methods to think through ways to prioritise and test the range of changes present in the plan and will continue to support clinical teams to generate and test their own ideas around specific drivers.



14. Financing

In order to ensure finances are in place throughout the life of the new Green Plan we will continue to:

- Identify funding sources – internally and externally
- Arrange constant funding – invest to save fund to be identified
- Identify strategy and revenue provision year on year
- Quantify the benefits financially
- Identify the funding of capital schemes

Financial viability work will be required on all projects to ensure that costs and associated savings are well planned and are in line with the Trusts FBIC protocols.

From a wider view the Greener NHS programme has committed to investment in people, buildings, vehicles, material resources and innovative technology which will help us achieve net zero. In doing so we can also reduce costs, improve the quality of healthcare, and support the long-term sustainability and resilience of the NHS. The Greener NHS Programme will actively work with government to access and coordinate funds directed towards the UK wide ambition for net zero, as well as working with NHS regions and Integrated Care Systems to explore alternative ways to fund this investment.

15. Anchor Work

One of the key ways in which ELFT address both social and climate justice is through its role as an anchor institution. Anchor institutions are large, public sector organisations that have a significant stake in a geographical area. They have an impact on their local area in many ways, including through the jobs they offer, the buildings and spaces they occupy, and the supply chains they use. As a result, they can consciously use their resources and influence to benefit communities.

1. Put health inequalities at the centre of our work

Environmental sustainability is one of the five pillars of the NHS as an anchor institution, through which it can make a positive difference to local communities. But being a 'good anchor' isn't just about doing 'green' projects. Transcending all five pillars is a sharp focus on health inequalities, equity and the health needs of local communities. Environmental sustainability work provides an opportunity to have a meaningful impact on health and health inequalities, and contributes to regional, national and global efforts to mitigate the climate crisis.

2. Be intentional

For the NHS to embrace and flourish in its role as an anchor institution, it must act intentionally. This means NHS organisations and systems consciously adopting an anchor mission, and prioritising, embedding and evaluating anchor projects. It also means working with partners and non-health anchors – such as local authorities, universities and housing associations – around shared goals to maximise the positive impact for local communities and places.

In the next 3 years we will:

Our goal:	Demonstrated by:
Air Pollution	Work with local authorities to integrate measures to alleviate localised pollution through EV, cycling and schemes to enable staff and communities to make less polluting travel choices
	Work on green corridors, planting projects and carbon reduction initiatives locally
Influence	Work together with anchor organisations to improve carbon credentials of supply chain
	Utilise the combined pressures from anchor organisations to help shape government policy and initiatives on carbon reduction

16. Summary

East London NHS Foundation Trust has a longstanding commitment to sustainability. In June 2021 ELFT declared a Climate and Ecological Emergency, with a commitment to raise awareness about the urgency of the problem and the specific action needed to mitigate the crisis, including driving down emissions from the work that we do. As an organisation we fully understand that the climate and ecological crisis is a public health crisis that affects our populations here and now and will have a devastating effect of the physical and mental health of populations in the years to come. We know that children and young people in particular are harmed by the crisis, and that action of the kind we are committing to here is important in mitigating that harm. Healthcare professionals and organisations are motivated to act and we hope in this plan to have identified some of ways in which we will act to reduce some of the 5% of national emissions that are attributable to healthcare delivery, in addition to raising awareness of the urgent need for action across all sectors of society. The health and social co-benefits of sustained action have never been clearer.

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