

# Sustainable Development Management Plan 2020 - 2025

**Version: Final** 

If you would like further information, please contact:

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This Sustainable Development Management Plan (SDMP) forms a key part of our strategy to ensure the Trust's services remain fit for purpose today and in the future. We hope to embed sustainable development in everything we do.

It outlines our plans to target actions to make a positive difference environmentally, socially and financially to create an organisation that supports the well-being of our staff, our patients and our wider community.

In order to achieve this, we plan to:

- Reduce our dependence of unrenewable resources such as fossil fuels and heavy metals
- Reduce our dependence on substances that persist in nature
- Reduce our destruction of nature
- Ensure we are not stopping people meeting their needs



### **Foreword**

Sustainability is fundamental to maintaining high quality care, which meets the needs of our local population today as well as in the future. Hospitals that thrive in the future will be those that embed sustainable development in everything they do, and that's why we are excited to share this five year plan. It is designed to guide us in a way that we are meeting the needs of today without compromising the needs of future generations whilst becoming resilient to the complex challenges ahead.

We need to accelerate our ambitious plans to reduce our waste and tackle air pollution, enhance biodiversity, improve the health and wellbeing of the communities we serve and remove our dependence of non-renewable resources.

In particular, it is clear that we must act now to tackle the issue of climate change and we will work hard to reduce our carbon footprint as part of our commitment to this. Climate change cannot be addressed by one person, organisation or even a country alone. Therefore we will use our leadership position to motivate our partners and communities to join us in tackling this unprecedented challenge.

By working together we can aspire to have a positive difference on the environment, the local economy and in society; to ensure that we are carrying out our commitment to ensure everyone matters, we are working together and making a difference, not only today but also in the future. By living our trust values in this way we hold the potential to achieve our ambitious goal to be a sustainable trust that is fit for the future and be a catalyst for a sustainable future for us and the people we serve.







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The Trust is a major acute-care hospital, providing a comprehensive range of services including medicine and surgery, services for women and children, accident and emergency services, and diagnostic and clinical support services. It is the area's major accident and emergency hospital, and provides care for the people of Bath, North East Somerset, North and West Wiltshire, Somerset (Mendip) and South Gloucestershire.

The Trust employs over 6,000 staff and provides healthcare to a catchment population of around 500,000 people.

The main site is located in a suburb of Bath, England, which lies approximately 1.5 miles (2.4 km) west of the Bath city centre. It currently has 759 beds and occupies 52 acres (21 ha).

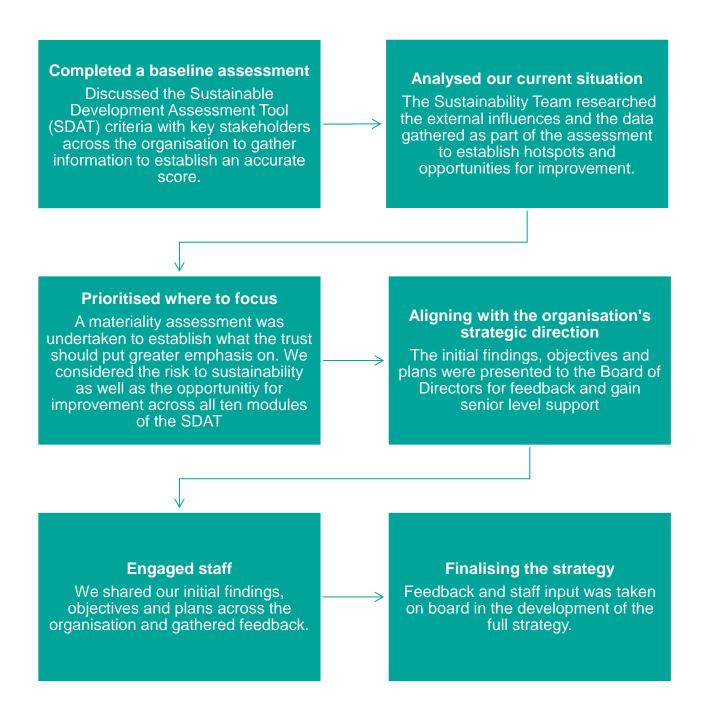
The Trust operates 24 hours a day, 7 days a week, 365 days per year and as a medium sized acute hospital we consume a significant quantity of natural resources on an annual basis, equating to a significant carbon footprint that is contributing to climate change.





# **Creating the Sustainable Development Management Plan**

The process of developing this plan involved discussions with key stakeholders as well as engaging with the wider staff. This was important to ensure that it reflected the needs and motivation of our organisation, and empowered staff to contribute and embed sustainability within their work.



# The pressures that shape our approach to Sustainability

It has been stated that 'Climate change is the biggest global health threat of the 21st century' (The Lancet). Changes in average climate conditions, increased weather variability and changes in frequency and intensity of extreme weather events is expected to entail a wide variety of public health risks, including cardio-respiratory diseases, mental health issues, and infectious disease risk. Tackling the root causes of climate change, investing in healthy environments, strengthening health systems and advocating for healthy development could reduce the burden of disease and promote population health (Menne et al., 2007).

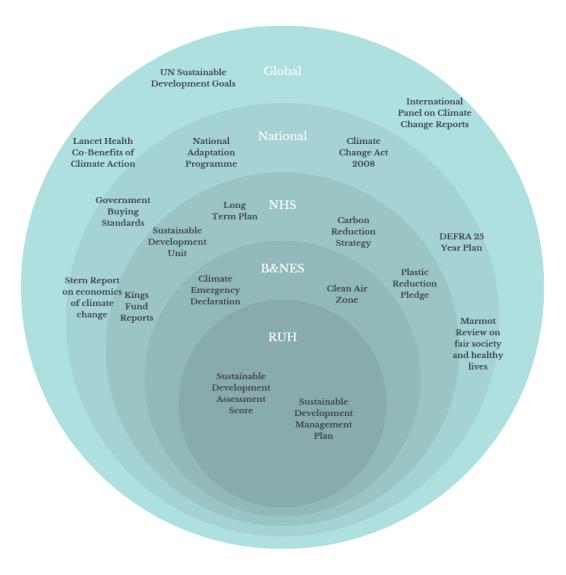


Figure 1 shows some of the key drivers for embedding sustainability in healthcare. Further details can be found in Appendix 1.



On a global scale, the Intergovernmental Panel on Climate Change have provided evidence of the scientific, technical and socio-economic aspects of climate change. In October 2018 they published a special report on the impacts of global warming of 1.5 °C above pre-industrial levels stating the importance of remaining below this level within the next 12 years. Furthermore, **The UN Sustainable Development Goals** set out the worldwide plan to build a better world for people and our planet by 2030.

The UK Government has set ambitious targets for carbon reduction through the **Climate Change Act 2008 (2050 Target Amendment) Order 2019**, reinforced further via the **2020 NHS Long Term Plan** and Carbon Budgets to help mitigate against the effects of climate change.

Sustainable healthcare in the NHS is driven through legislative requirements; mandatory requirements; International guidance; UK Guidance; and Health specific requirements as outlined in Appendix 1 and Figure 1.

The Trust has an obligation to reduce its impact on climate change not only for public health but to deliver a truly sustainable healthcare service that is fit for the future.



Figure 2 illustrates the 17 global goals designed to be a "blueprint to achieve a better and more sustainable future for all". The Sustainable Development Goals were set in 2015 by the United Nations General Assembly and intended to be achieved by the year 2030. They are embedded in how we assess the sustainable development of the trust to ensure that our local actions are supporting these global goals.



# **Ensuring the plan is delivered**

Our Sustainable Development Management Plan (SDMP) is approved by the Trust Management Board and Non Clinical Governance Committee.

Sustainable development is championed by the Director of Estates and Facilities, Brian Johnson.

The Head of Sustainability chairs the Sustainability Steering Group which meets 6 monthly and consists of a wide range of stakeholders from across the organisation. This group is responsible for the oversight, identification, implementation and support for projects that will enable the trust to deliver the objectives outlined in the Sustainable Development Management Plan (SDMP).

The Steering Group will deliver the projects using resources and channels that are already in place to ensure that it is embedded and aligned with the strategic direction of the organisation. This will include:

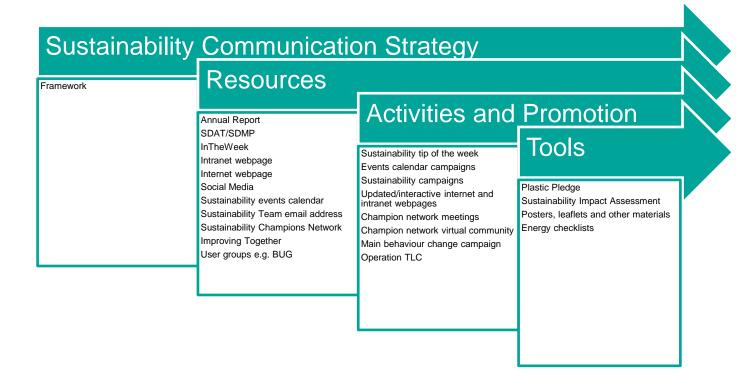
- The Sustainability Champions Programme has been relaunched to raise awareness, engage and motivate the wider workforce.
- RUH is a member of the local Sustainability Transformation
   PARTNERSHIP (STP), alongside Swindon and Salisbury. The STP has
   developed a System Operational Plan into which all organisations are
   expected to contribute.
- The PHASE 2/3 PROGRAMME AND WORKSTREAMS which have evolved out of the Trust's response to COVID-19. This provides the leadership and structure for the organisation to move forward and deliver high quality care. Providing an opportunity to embed new sustainable ways of working.
- The Trust has access to the SUSTAINABLE DEVELOPMENT UNIT (SDU), a small team of specialists providing advice and support to assist in the delivery of sustainable development.
- The Sustainability Team works as a support function to help the trust move away from tackling sustainability using piecemeal solutions and towards a systematic approach.
- The actions from this plan will be adapted for teams to monitor their sustainable development performance through the BATH IMPROVEMENT SYSTEM - IMPROVING TOGETHER - that all levels of the organisation are involved with.



# Communicating and engaging people in the plan

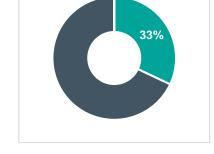
A new Sustainable Development Communications Strategy will bring more structure and encompass all aspects of sustainability communications. The purpose of this is to deliver a high quality, engaging and successful approach to encourage behaviour change and promote continuing support for becoming a sustainable organisation. Some key elements from the strategy are:

- 1. Provide a framework for the Trust's sustainability behaviour change programme.
- 2. Maintain a clear sustainability identity and agenda across the Trust.
- 3. Communicate and measure sustainability across the RUH more effectively.
- Establish internal lines of communication across the Trust in order to create consistent and connected sustainability communications for the RUH community.
- 5. Make sustainability communications regular, interesting and engaging for all staff.
- 6. Embed behaviour change programme within other organisational frameworks.



#### What we have achieved so far

In 2019 the Trust scored 33% on the nationally recognised Sustainable Development Assessment Tool (SDAT). This is the first year that we have assessed the Trust using this tool and will be used as our baseline year.



This score shows that the current practices and processes are only partially sustainable and Figure 3 illustrates the varying degree of progress when broke

illustrates the varying degree of progress when broken down in to the ten areas of focus outlined in the SDAT.

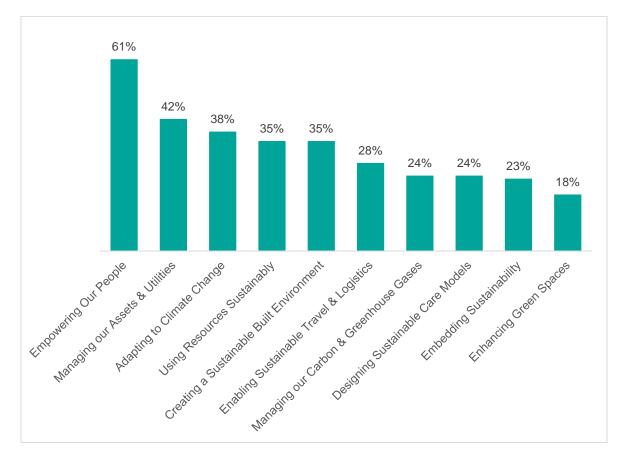


Figure 3: The Trust's scores broken down in to the sub-categories within the SDAT



# Adapting to Climate Change

We have developed local protocols aligned to national heat wave plans, cold weather plans in relation to Civil Contingencies Act

# Enabling Sustainable Travel & Logistics

Our dedicated Sustainable Travel Co-ordinator is delivering a Sustainable Travel Plan, to improve the facilities and options for staff

# Embedding Sustainability

One of our Trust's strategic goals to be a sustainable trust that is fit for the future

# Using Resources Sustainably

We have committed to the NHS Single-Use Plastics Reduction Campaign Pledge, starting with the removal of 180,000 Styrofoam containers per year

# Managing our Assets & Utilities

Three of our buildings have 410 solar panel cells installed

We have installed efficient LED lighting across most of the site

### **Empowering Our People**

We run an annual Festival of Health & Wellbeing



We have developed a clear set of shared values that we work to

# Managing our Carbon & Greenhouse Gases

Carbon is a key metric in measuring the Sustainability of the Trust, as part of the Trust's strategic improvement programme

### **Enhancing Greenspace**

Our catering and food contract exceeds government guidelines and meets Soil Association standards

# Designing Sustainable Care Models

Working with the STP, we have developed a vision to create an integrated care system

We have a dedicated Frailty Flying Squad designed to prevent admission and reduce length of stay

# Creating a Sustainable Built Environment

Our Dyson Centre for Neonatal Care was the first healthcare facility in the UK to receive BREEAM Excellence





# Taking responsibility for our carbon footprint

#### WHERE ARE WE?

We recognise that the Trust has a significant carbon footprint. Understanding where we are today as a baseline, and what our plan is going forward is crucial in us meeting the Climate Change Act requirement for net zero by 2050.

An organisation's carbon footprint is made up of 3 elements:

- Scope 1 emissions are direct emissions from owned or controlled sources;
- Scope 2 emissions are indirect emissions from the generation of purchased energy;
- **Scope 3** emissions are indirect emissions that occur in the value chain of the reporting organisation (both upstream and downstream).

The Trust has a comprehensive methodology for measuring and calculating its carbon footprint in regards to Scope 1 and Scope 2 (i.e. emission sources in direct control of the Trust). The 2019/20 Scope 1 and Scope 2 carbon footprint is detailed in Figure 4.

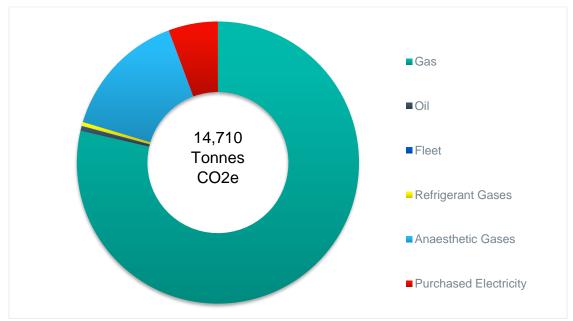


Figure 4: RUH Scope 1 & 2 2019/20 Carbon Footprint

A complete review of our carbon footprint has been undertaken to bring it in line with current best practice, which has resulted in a larger carbon footprint to be reported. For example, previously anaesthetic gases weren't included.

The work to understand the Trust's full Scope 3 emissions is underway, however it is important to note that the nature of these emissions makes it challenging to measure accurately. We acknowledge that our Scope 3 emissions are likely to be far greater than Scope 1 and 2, likely to be between 70%-80% of our total footprint.

Further detail on the Trust's carbon footprint is included in Appendix 2.



#### WHAT IS OUR AIM?

- Drive down our **Scope 1 AND 2 EMISSIONS TO NET ZERO BY 2030**. These scopes are within our direct control. This will involve reducing our emissions as far as practicable, with the remaining being offset, inset or captured according to relevant guidelines and certified methods.
- ALL SCOPE 3 EMISSIONS WILL BE MEASURED AND MONITORED AS

  ACCURATELY AS POSSIBLE BY 2025, AND A TARGET SET FOR REDUCTION OF

  SCOPE 3 BY 2030. Until we measure, we cannot manage, and cannot set a
  definitive medium target for Scope 3. A target will be quantified in the
  2025-2030 SDMP at the latest.
- BY NO LATER THAN 2050 THE TRUST WILL BE NET ZERO ACROSS ALL 3 scopes. Our progress will be monitored annually, with a revised strategy each 5 years.

These aims comply with the Climate Change Act, and also support B&NES local plan to become carbon neutral by 2030. Through making a significant reduction in our carbon emissions by 2030 we are ensuring we are making up for carbon reduction not achieved over the last 5 year plan, and also making a push for a step change in the approach the Trust takes to all projects embedding sustainability principles from the outset. This should strive to limit temperature rise to 1.5°C as required in the Climate Change Act.

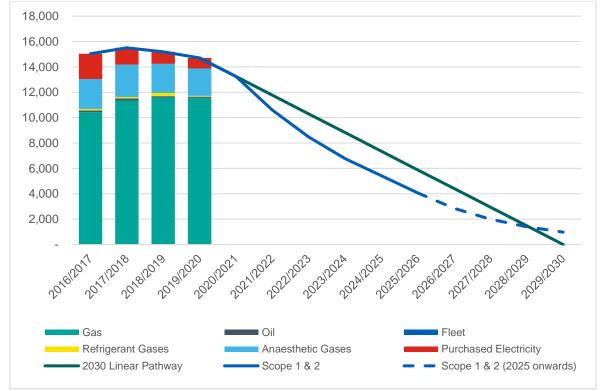


Figure 5: RUH Scope 1 & 2 suggested route to net zero 2030



Sustainability is a broad and complex subject. The following sections of the plan outline the ten areas of focus found in the SDAT. Each section illustrates the objectives and actions that we will be working on to improve this over the next five years.

The current score for each section is illustrated in the top right hand corner as shown here. This is the percentage of the set criteria we are already achieving as outlined in the SDAT.



The trust is aiming to put focus on the different sections as follows, based on our findings from the Materiality Assessment (Appendix 3).



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# **Managing our Carbon & Greenhouse Gases**

TO MANAGE OUR CARBON EMISSIONS TO REMAIN WITHIN SAFE LIMITS IN ORDER TO AVOID IRREVERSIBLE CLIMATE CHANGE

24%

Greenhouse gases (GHG) produced by human activities have caused an overall warming influence on the Earth's climate. The largest contributor to warming has been carbon dioxide.

In 2018 the International Panel on Climate Change created a special report outlining the impacts of global warming of 1.5°C above pre-industrial levels. This will be challenging. Therefore it is essential that we work fast to set ambitious targets, engage staff, suppliers and contractors and implement new technologies to reduce our carbon footprint of 14,710 Tonnes CO<sub>2</sub>e/annum (Scopes 1 & 2).



#### Action Plan

Set targets in line with the Climate Change Act and NHS Carbon Reduction Strategy (2009) for our complete carbon footprint (Scopes 1, 2 & 3).
Reduce Scope 1 & 2 emissions according to the plan outlined on page 15.
Work closely with other local agencies such as our local authority, universities and third sector organisations to contribute to B&NES's carbon neutral pledge.
Develop systems and processes for measuring our Scope 3 emissions to enable a reduction plan to be developed ahead of 2025.
Work closely with Pharmacy to investigate options to reduce CO <sub>2</sub> e from anaesthetic gases.
Implement an environmental management system starting with energy, water and waste policies. Reduce consumption of utilities through energy, water and waste saving opportunities.
Work to influence staff, visitors and patients in reducing their individual carbon footprints, through behaviour change campaigns.
Decarbonise our electricity supply by moving towards a green energy supplier and increasing the provision of on-site renewables.

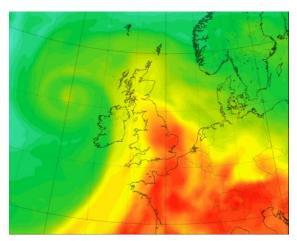
# **Adapting to Climate Change**

# DEVELOP SITES AND SERVICES THAT ARE RESILIENT TO THE ADVERSE EFFECTS OF CLIMATE CHANGE

38%

The government's latest Climate Change Risk Assessment lays out the risks of climate change to the UK, which are extreme heat, flooding, drought, pests and diseases.

Even if we meet the ambitious Climate Change Act's targets for reducing carbon emissions, we need to plan adaptation strategies in order to be a resilient organisation to a changing climate. This is due to temperatures already above preindustrial levels and time lags in the climate system.



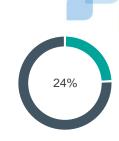


- ☐ Add Climate Change to the organisation's Risk Register.
- ☐ Develop and communicate a coordinated and integrated board approved Adaptation Plan.
- ☐ Test our contingencies for water/power shortages and supply chain failure to reduce the impact on our service delivery.
- ☐ Carry out an assessment of flood risk of access routes based on current and future projected climate conditions.

# **Designing Sustainable Care Models**

TO IMPROVE CARE WHILST MAINTAINING ENVIRONMENTAL, SOCIAL AND FINANCIAL SUSTAINABILITY

Taking account of the environmental and social impacts of service models can support the development and delivery of more sustainable models of care.



The Trust is working with the STP to have a fully functioning Integrated Care Model by 2021 supporting the population to 'Start Well', 'Live Well' and 'Age Well', based on life courses as well as a focus on preventative measure to maintain health and reduce health inequalities. In collaboration with the STP the Trust has five priority areas:

- 1. Improving the Health & Wellbeing of our Population
- 2. Developing Sustainable Communities
- 3. Sustainable secondary care services
- 4. Transforming care across BSW
- 5. Creating strong networks of health and care professionals to deliver the NHS Long Term Plan and BSW's operational plan



#### Action Plan

Create a fully functioning integrated care system that considers all aspects of sustainability with our STP.
Encourage all teams to engage in finding solutions to continuously improve the way that we deliver care, via the Improving Together Strategy.
Provide our board with training on sustainable care models and how they are developed and deployed.
Establish ways to improve the measurement of co-benefits associated with climate change and sustainable models of care.

# **Enabling Sustainable Travel & Logistics**

TO BE A TRUST THAT APPROACHES TRAVEL IN A WAY THAT IS INNOVATIVE AND PRIORITISES SUSTAINABLE MODES OF TRANSPORT THAT ARE ACCESSIBLE TO ALL

28%

The Trust is committed to supporting the improvement of local congestion and pollution concerns, as well as supporting our patient, staff and community's health & wellbeing. Driving behavioural and cultural change for staff and visitors to sustainable modes of travel and logistics will help the Trust achieve this. Through an innovative approach we aim to reduce the negative environmental impacts of travel as well as enable equal access, regardless of ability.

This year will see the launch of the Non-Patient Travel Plan, outlining the Trust's approach to staff related travel over the next five years. As part of this, a staff survey and site audit was completed. In addition we have completed an assessment of The Trust using the Clean Air Hospitals Framework and the Health Outcomes for Travel Tool to better understand our current impact and areas for improvement.



#### Action Plan

Improve facilities for sustainable travel including on site infrastructure, lockers, showers and public transport waiting areas.
Introduce a staff travel planning service.
Work with stakeholders to improve and promote public transport.
Review the car parking policy to encourage sustainable travel options.
Organise at least four travel related events per year encouraging sustainable travel, health & wellbeing that is relevant to the season.

# **Embedding Sustainability**

TO BECOME A THRIVING ORGANISATION THAT DELIVERS BENEFITS THAT EXTEND BEYOND THE TRADITIONAL ORGANISATIONAL BOUNDARIES WHILST MAINTAINING THE HIGHEST QUALITY OF CARE.



The Trust recognises the importance of being a 'sustainable organisation that is fit for the future'. It is one of the five strategic goals that are at the heart of what we want to stand for as an organisation. This sustainability goal plans to:

- Generate income and use public money wisely, maximising the benefit
  we get from all of our resources to improve value, quality of care and
  patient experience.
- Work to reduce our environmental impact.
- Be an innovative membership organisation: shaping the future, learning from others, working in partnership and challenging ourselves to do better.
- Be agile, able to anticipate and respond to changing needs of our population, and local and national developments.

In order to help us achieve the strategic goals, the organisation has embarked on a four year organisational development programme called Improving Together. Every single member of the Trust will be part of this process.



#### Action Plan

Train all senior level sustainable development leads for sharing of best practice and innovation.
Become an Anchor Organisation to support B&NES's (carbon neutral by 2030) and the Government's (net zero by 2050) response to tackling the Climate Emergency.
Develop, input and publicise key organisational policies including Energy, Sustainable Procurement, Water Efficiency, Waste, Health and Social Equality, Adaptation.
Develop a set of guidelines for staff to enable them to support the strategic goal of 'to be a sustainable organisation that is fit for the future'.

# **Managing Our Assets & Utilities**

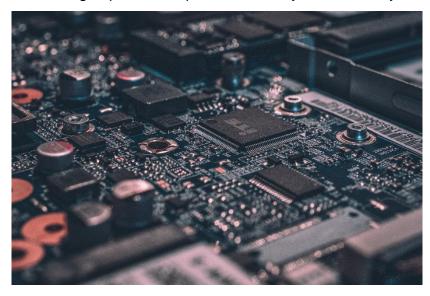
TO MANAGE THE TRUST'S OPERATIONAL ASSETS IN A WAY THAT CONTINUALLY IMPROVES THEIR EFFICIENCY AND LONGEVITY

38%

The RUH are committed to making our operational assets and buildings as sustainable as possible and reducing the impact upon the environment.

The Trust operates a Computer Aided Facilities Management (CAFM) System which stores asset and equipment information and Planned Preventative Maintenance (PPM) schedules. The PPM schedules are designed to satisfy the Trust's statutory obligations and to maintain the asset in a safe, reliable and efficient condition.

The Trust actively invests and replaces ageing equipment based on a number of factors including risk of failure and efficiency, this enables the Trust to ensure that the assets and buildings operate at optimal efficiency and reliability.



#### Action Plan

- ☐ Reduce our energy and water demand to improve our water and energy efficiency, in line with the NHS Sustainable Development Strategy and the Climate Change Act.
- ☐ Create an Estates Strategy that includes our commitment to sustainability.
- ☐ Develop a Sustainability Impact Assessment for use in business cases.
- ☐ Implement real-time sub metering to better manage our utilities to drive efficiency projects.

### **Using Resources Sustainably**

# TO ENSURE THAT WE DO NOT EXTRACT OR POLLUTE AT A GREATER RATE THAN NATURE REGENERATES

35%

In our search for prosperity, growth and success we are destroying nature, for which we are dependent on.

As set out in the NHS Long Term Plan, we must adhere to best practice efficiency standards and adopt new innovations as we work towards the target set out in the Climate Change Act. Key to this will be delivering improvements, including reductions in single use plastics, throughout the NHS supply chain, transforming anaesthetic practices, reduction in waste as well as more efficient use of water and energy. In addition, we will use our influence through the procurement processes to encourage environmental improvements, local social capital and economic value to help our suppliers adopt sustainable practices for the products and services they provide.





- ☐ Become Zero Waste to Landfill.
- ☐ Remove at least three single use plastics from the Trust each year.
- ☐ Start measuring and monitoring Pharmaceuticals and Medical Devices.
- ☐ Make social and environmental concerns a consideration in procurement and how we score tenders.

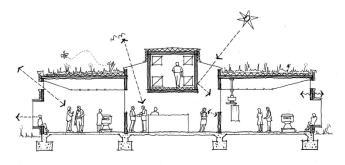
# **Creating a Sustainable Built Environment**

TO ENSURE THAT SUSTAINABILITY UNDERPINS THE DESIGN AND CONSTRUCTION OF OUR CAPITAL PROJECTS

Our Trust sits on a 52-acre site and includes a mixture of buildings, old and new. We've made significant improvements through refurbishment and upgrade work. Elsewhere we need to replace older buildings to provide the best facilities for our patients and staff and ensure we are fit for the future.

We are determined to continuously improve the quality of services we provide and to make the most of our fantastic setting. Some of our major building projects - making the RUH Fit for the Future - are taking shape rapidly, with new projects due to commence construction during 2020. Future development plans are being prepared in relation to HIP2 funding the Trust has been allocated, where all buildings will need to be carbon neutral.

We're designing a new Cancer Centre at the RUH that is centred on the patient and their experience. The use of natural light, reduction of noise, external spaces, greenery and artwork are all known to have a positive effect on healing and the patient experience. These will be incorporated into all areas of design within the new unit, including inpatient and outpatient, internal and external spaces.

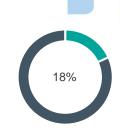


The Dyson Centre for Neonatal Care Bath RUH

Update the Estates Strategy and job descriptions to ensure that sustainability is a material concern in all Capital Projects and Small Works projects.
Incorporate whole lifecycle costing to our new buildings designed from 2020 onwards.
Include social and environmental value in the Construction and Procurement Policies.
Achieve BREEAM Outstanding or Excellent on all new buildings.
Monitor and report on the in-use performance of our new buildings and refurbishment projects.

# **Enhancing Green Spaces**

TO PROTECT AND ENHANCE THE NATURAL SYSTEMS THAT WE RELY ON, REALISING THE BENEFITS THIS BRINGS TO THE HEALTH OF OUR DIVERSE POPULATION



We rely on the natural world in order to survive, yet greenspace and biodiversity is in decline.

The Kings Fund report in 2016 found "Increasing people's exposure to, and use of green spaces has been linked to long-term reductions in overall reported health problems". However, the unabated decline in biodiversity, as outlined in the State of Nature report, indicates the condition of our greenspaces is in decline.

With a number of greenspaces on site, we are in a good position to improve these spaces for flora, fauna and the health of our staff, patients and visitors.



- ☐ Create a Biodiversity Management Plan
- ☐ Engage with suppliers of high biotoxicity risk products to identify and manage these risk
- ☐ Diversify our flora and fauna to be more resilient to disease
- ☐ Engage with clinicians to establish how the benefits of green space & biodiversity can support care pathways
- ☐ Incorporate green space & biodiversity considerations into capital projects policy for new buildings.

### **Empowering Our People**

TO CREATE A SUPPORTIVE ENVIRONMENT WHERE ALL OUR PEOPLE FEEL MOTIVATED AND EMPOWERED TO CONSIDER SUSTAINABILITY IN EVERYTHING THEY DO



The RUH offers a huge range of opportunities and benefits in a genuinely supportive working environment. We know that being a good employer is about more than providing staff benefits. We have worked with staff to develop a clear set of values that we all share.

Our values were created from 1,000 hours of listening to patients, carers, families, and staff who shared their experience of being cared for and working at the RUH. They set out our ambition for how our patients, carers, families, and staff said they want each and every one of us to behave now and in the future. They represent our aspiration for the type of hospitals we want to be.

Our values are:

- Everyone Matters
- Working Together
- Making a Difference

A new bespoke programme will be rolled out to support the ratcheting up of our approach to making the Trust a sustainable organisation that is fit for the future.



#### Action Plan

Implement a bespoke behaviour change programme to support environmentally and socially sustainable practices.
Deliver training and awareness raising programme focusing on increasing knowledge and understanding of sustainability and social value amongst our staff
Produce talent maps to identify potential to upskill staff and to support succession planning
Independently verify our workforce strategy to demonstrate our approach is leading to positive impacts on health, wellbeing and sustainable development



### Investing now to save in the future

Over the next five years, the Trust aims to significantly improve its sustainability with a key focus on reducing its carbon emissions and improve energy efficiency across the estate.

To deliver on the commitments in the SDMP finance will need to be sought. Increasing energy prices and waste disposal costs may mask some of the efficiency savings made from delivering the strategy, so ensuring transparent reporting is crucial.

In order to deliver the plan significant innovation and investment is required, which will be approached in the following ways:

- Make the Best of what we have: The Trust will work to continually improve the systems and processes that are in place in order to produce efficiencies and make them more sustainable.
- ENSURING DIVERSE FUNDING: In order to create a resilient funding stream, the Trust will actively pursue a range of external financing for larger investments in energy and water reduction schemes. This will include Salix, NHS funding and the local Community Infrastructure Levy.
- COLLABORATING: We will seek to collaborate with external partners including B&NES, Universities, Charitable organisations, STP and HEFMA in order to share best practice, materials and create an economy of scale.
- ROLLING REPLACEMENT: We will work with the Estates Team to ensure any
  replacements of equipment are appropriate and fit for purpose in terms of
  delivering the Trusts carbon reduction strategy.
- CAPITAL INVESTMENTS: We will work closely with the Capital Projects Team
  to embed sustainability principals from the outset, this will ensure
  sustainability is part of the design philosophy and can be factored for in for
  capital required.
- ALLOCATING BUDGET: Annual budgets will reflect our commitment to sustainability, including a fully resourced Sustainability Team and Steering Group as well as an increase in the Estates budget to improve the sustainability of the Trust's assets on an invest-to-save basis.



# Reporting

Measuring, monitoring and reporting on sustainability through the annual report supports the assurance process for meeting legal, reputational and policy requirements, which is mandated for Trusts. Also, The Department of Health requires Trusts to report ERIC (Estates Return Information Collection) data. ERIC data comprises essential statistics on waste, energy and water from Estates and Facilities.

In addition to the mandatory requirements, mentioned above and the governance structure outline in the 'Ensuring the plan is delivered' section, the following key areas will be monitored to ensure robust management of sustainability:

- Sustainable Development An annual assessment of the trust, using the Sustainable Development Assessment Tool will be completed to monitor overall organisational progress against each of the high level aims and objectives of the SDMP, illustrating the sustainability of the Trust.
- CARBON FOOTPRINT Organisational carbon footprint is measured and included in the Trust's Annual Report. The monthly progress on carbon reduction will be monitored and reported through the Bath Improvement System using Scorecards and Reporting up to Senior Management.
- Building Energy, Water and Waste use We monitor consumption of energy and water on a monthly basis, across the site. Waste is monitored monthly by site on a waste type basis, and annually on a local department level to ensure accurate segregation
- STAFF TRAVEL AND AIR POLLUTION An annual travel survey will be undertaken to determine changes in how staff travel to work and collate feedback. Data will be analysed using the HOTT (Health Outcomes Travel Tool) to monitor the environmental and health impact of Trust related travel & transport.
  - Diffusion Tubes monitor air pollution in four locations across site. These are sent to be analysed externally and fed in to the internal reporting process.
- EMISSIONS FROM PROCUREMENT Using the SDU's Sustainability Reporting
  Portal, we will begin measuring and reporting our emissions associated with
  our procurement practices, where possible. This will illustrate hotspots and
  focus where we will aim to find suitable low-carbon alternatives.
- CLIMATE CHANGE RISKS We will be reporting Climate Change on the Risk Register, which will generate the task of completing a Risk Assessment, generating an Action Plan and roles and responsibilities assigned. The risk will be monitored and reviewed regularly until the associated actions have been implemented.



### **Risks and Opportunities**

The Sustainability Team investigated some of the trends and challenges that may affect the success of delivering the SDMP (Appendix Four).

To ensure that risks and opportunities are identified regularly The Sustainability Steering Group will use the Corporate Risk Register. The register will contain a log of all risks that may threaten the success of achieving the plan. The logged risks will be reviewed and updated regularly when the group meets on a quarterly basis.

Some of the key areas that will need to be managed include:

- DELIVERING TARGETS ALONGSIDE GROWING PRESSURES Growing pressures
  on the NHS are expected to come from the aging and changing population
  alongside greater expectations from patients. As well as increasing costs.
  These greater pressures will require even more significant efficiencies to
  meet the targets required. We will mitigate this through normalising data
  against suitable measures to communicate our progress and finding
  opportunities to implement more efficient ways of delivery.
- LEAVING OTHERS TO LEAD There is a risk to the Trust's reputation and
  credibility if we are seen to be laggards in achieving the outcomes of this
  report and not doing our moral part in tackling the climate emergency. We
  will mitigate this through management systems that allow us to monitor,
  benchmark, report and make improvements where necessary and use the
  influence of the Trust to impact on area-wide decisions that will support the
  plan.
- PAYING FOR THE REQUIRED ACTIONS with increasing cost of utilities and
  carbon emissions, there is a greater risk to financial sustainability.
   Furthermore, substantial investment will be required to transition towards a
  more sustainable trust. We will mitigate this by reducing the consumption in
  our high risk areas, such as fossil fuels, and develop a diverse funding
  stream to support sustainability projects.
- STAFF WITH HIGHER PRIORITIES The main purpose of the Trust is to react to people who need healthcare today. Therefore Sustainability, which is often seen as something that will affect us in the future and requires proactivity, can have a lesser priority to present urgency of health issues. We will find creative ways to communicate the co-benefits of sustainability and healthcare, including preventative care, and deliver an engaging and evolving communications.
- BUILDING A CULTURE OF IMPROVEMENT the bespoke programme currently being rolled out at the trust – Improving Together – provides a suitable working environment to implement the improvements required to successfully deliver the SDMP. We will embed the actions from this plan in to the framework ensuring the sustainability objectives are achieved.



#### **Get Involved**

#### **Review**

Review the actions within this SDMP and think about how you can contribute within your role.

#### **Unleash your inner Sustainability Champion**

Sign up to become a sustainability champion <u>here</u> to see how you can start taking action. You can be involved as much as you want to or as much as your job allows. Whether you want to take a bold stance on sustainability or simply want to start with the small everyday actions- we'd love you to be a part of it!

#### Help spread the word

Let's get everybody talking about sustainability, talk to your colleagues and line manager to embed sustainability practices within your area of work and help spread the world.

#### ruh-tr.sustainabilityteam@nhs.net





# **Appendix**

# **Appendix One: Drivers for Change**

Outline of statutory, regulatory and policy requirements which were consider as part of their Sustainable Development Management Plan.

#### **G**LOBAL

UN Sustainable Development Goals	The 2030 Agenda for Sustainable Development, adopted by all United Nations Member States in 2015. Provides a shared plan for peace and prosperity for people and the planet, now and into the future. At its heart are the 17 Sustainable Development Goals (SDGs). They recognize that ending poverty and other deprivations must go hand-in-hand with strategies that improve health and education, reduce inequality, and spur economic growth – all while tackling climate change and working to preserve our oceans and forests.
IPCC AR5 2013	Update of knowledge on the scientific, technical and socio-economic aspects of climate change. Assesses the literature of climate science over 6 years. Climate system response and climate models showing human influence on the climate is causing it to warm up. AR5 expresses how different greenhouse gases have contributed in the past. Then use this information to establish what we should expect in the future. Ice core studies and paleoclimate records show trends that back this up. CO2 increased by 40% since pre-industrial times, mostly as a result of human activities.  Provides Policy related information on a regional level. This can provide more informed choices on adaptation strategies.  Three key messages:  • Unequivocal warming • Human influence on the climate is clear • Continued greenhouse gas emissions cause further climate change.
Lancet; Health Co-Benefits of Climate Action	Looks at the opportunities for smart policy responses to several connected public health and sustainability challenges in the wake of the UN Climate Talks in Paris in 2015 and the beginning of the implementation phase of the post-2015 Sustainable Development Agenda.
WHO Health 2020; European policy for Health and Wellbeing	Health policy framework for the European region. It aims to support action across government and society to: "significantly improve the health and well-being of populations, reduce health inequalities, strengthen public health and ensure people-centred health systems that are universal, equitable, sustainable and of high quality".  Conditions in which we are born, live, grow, work and age.  Empower people to make healthier choices and building greater equality.  Putting people at the centre of higher quality affordable health systems.

The Global	An alliance of health NGOs, health professional organisations and health
Climate and	and environment alliances from around the world. Publish reports on the
Health Alliance;	health benefits of climate change mitigation.
Mitigation and	Unmask my City
Co-benefits of	
Climate	
Change	
WHO Health in	Health improvements of more sustainable modes of transport
the Green	
Economy. Co-	
benefits to	
health of	
climate change	
mitigation	

#### **N**ATIONAL

VATIONAL		
Climate Change Act 2008, with the amendment (in 2019) to be Carbon Neutral by 2050	The Act made it's a duty to ensure that the net UK carbon account for all six Kyoto greenhouse gases for the year 2050 is at least 80% lower than the 1990 baseline, toward avoiding dangerous climate change. Since then, the government passed laws to end its contribution to global warming by 2050.  The target will require the UK to bring all greenhouse gas emissions to net zero by 2050, compared with the previous target of at least 80% reduction from 1990 levels.  As the largest public sector emitter of carbon emissions, the health system has a duty to respond to meet these targets which are entrenched in law.	
The Stern Review 2006; the Economics of Climate Change	<ul> <li>The report discusses the effect of global warming on the world economy. Although not the first economic report on climate change, it is significant as the largest and most widely known and discussed report of its kind.</li> <li>The benefits of strong, early action on climate change outweigh the costs.</li> <li>The scientific evidence points to increasing risks of serious, irreversible impacts from climate change associated with business-as-usual (BAU) paths for emissions.</li> <li>Climate change threatens the basic elements of life for people around the world – access to water, food production, health, and use of land and the environment.</li> <li>The impacts of climate change are not evenly distributed – the poorest countries and people will suffer earliest and most. And if and when the damages appear it will be too late to reverse the process. Thus we are forced to look a long way ahead.</li> <li>Climate change may initially have small positive effects for a few developed countries, but it is likely to be very damaging for the much higher temperature increases expected by mid-to-late century under</li> </ul>	

	<ul> <li>Integrated assessment modelling provides a tool for estimating the total impact on the economy; our estimates suggest that this is likely to be higher than previously suggested.</li> <li>Emissions have been, and continue to be, driven by economic growth; yet stabilisation of greenhouse gas concentration in the atmosphere is feasible and consistent with continued growth.</li> <li>'Central estimates of the annual costs of achieving stabilisation between 500 and 550ppm CO<sub>2</sub>e are around 1% of global GDP, if we start to take strong action now. [] It would already be very difficult and costly to aim to stabilise at 450ppm CO<sub>2</sub>e. If we delay, the opportunity to stabilise at 500-550ppm CO<sub>2</sub>e may slip away.'</li> <li>The transition to a low-carbon economy will bring challenges for competitiveness but also opportunities for growth. Policies to support the development of a range of low-carbon and high-efficiency technologies are required urgently.</li> <li>Establishing a carbon price, through tax, trading or regulation, is an essential foundation for climate change policy. Creating a broadly similar carbon price signal around the world, and using carbon finance to accelerate action in developing countries, are urgent priorities for international co-operation.</li> <li>Adaptation policy is crucial for dealing with the unavoidable impacts of climate change, but it has been under-emphasised in many countries.</li> <li>An effective response to climate change will depend on creating the conditions for international collective action.</li> <li>There is still time to avoid the worst impacts of climate change if strong collective action starts now.</li> </ul>
The National Adaptation Programme: Making the country resilient to the changing climate	Now in its second phase, The National Adaptation Programme (NAP) sets the actions that government and others will take to adapt to the challenges of climate change in the UK. It sets out key actions for 2018 to 2023.  The report also details how we will manage the third cycle of adaptation reporting.  This report forms part of the five-yearly cycle of requirements laid down in the Climate Change Act 2008.
DEFRA 25 Year Plan	25 Year Environment Plan that sets out DEFRA's goals for improving the environment, within a generation, and leaving it in a better state than we found it. It details how we in government will work with communities and businesses to do this. It sets out what DEFRA will be doing over the next 25 years.
EUETS	The European Union Emissions Trading System (EU ETS) was the first large emissions trading schemes in the world. It requires participating organisations to monitor and report their CO2 emissions.  Members of the scheme are given an emissions allocation. At the end of each year they are required to account for their actual emissions.  Installations can emit more than their allocation by buying allowances from the market. Similarly, an installation that emits less than its allocation can sell its surplus allowances. The environmental outcome is not affected because the amount of allowances allocated is fixed.

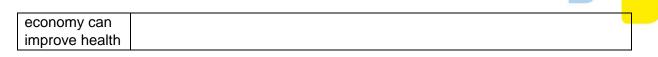
A number of NHS organisations participate in the EU ETS, which has been
simplified to make it easier for users to take part.
The Public Services (Social Value Act) all public bodies in England and Wales are required to consider how the services they commission and procure might improve the economic, 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.
The Public Services (Social Value) Act sits alongside other procurement laws. Value for money is the over-riding factor that determines all public sector procurement decisions. But there is a growing understanding of how value for money is calculated, and how "the whole-life cycle requirements" can include social and economic requirements.
Provides an opportunity for local people, communities, parish and town
councils to ask central government via local government to remove legislative or other barriers that prevent them from improving the economic, social and environmental well-being of their area.
Sets out the Government's planning policies for England and how these should be applied. It provides a framework within which locally-prepared plans for housing and other development can be produced. It states that planning policies and decisions should play an active role in guiding development towards sustainable solutions, but in doing so should take local circumstances into account, to reflect the character, needs and opportunities of each area.
Investigates current and likely adaptation actions and identifies the key barriers to actions being widely implemented, effective, timely and proportionate to the challenges facing the UK.
GBS product specifications are mandatory for central government departments and related organisations and encouraged for the wider public sector.
It forms part of sustainable procurement - the process whereby organisations meet their needs for goods, services, works and utilities in a way that benefits not only the organisation, but also society and the economy, while minimising damage to the environment.
Long-range climate projections for the UK were published in order to inform the UK's first Climate Change Risk Assessment (CCRA), required by the Climate Change Act (2008), covering 11 sectors across society. This is the third report on the health effects of climate change in the UK published by the Health Protection Agency (now Public Health England) in partnership with the Department of Health. This 2012 report complements the Health Sector report of the CCRA by providing scientific evidence of the wider risks to public health from climate change in the UK.

Fair Society,	Independent review to propose the most effective evidence-based
Healthy Lives.	strategies for reducing health inequalities in England from 2010. The
Marmot	strategy will include policies and interventions that address the social
Review	determinants of health inequalities.
	The Deview had four tooks
	The Review had four tasks:
	Identify, for the health 1 inequalities challenge
	facing England, the evidence most
	relevant to underpinning future policy and
	action
	2. Show how this evidence could be translated
	into practice
	3. Advise on possible objectives and measures,
	building on the experience of the current
	PSA target on infant mortality and life
	expectancy
	4. Publish a report of the Review's work that
	will contribute to the development of a post-
	2010 health inequalities strategy

### **NHS**

Single-use	Launched by NHS England and NHS Improvement. It requires NHS
Plastic	trusts who sign up to commit to phase out avoidable single-use
Reduction	plastic items which are used in catering services and office spaces
Pledge	over the next few years.
NHS Long	P120:
Term Plan	The NHS is leading by example in sustainable development and reducing
	use of natural resource in line with government commitments. In 2016/17
	NHS providers generated nearly 590,000 tonnes of waste. Of this only
	15% goes directly to landfill, with 23% of waste recycled190. Between
	2010 and 2017 the health and care sector reduced water consumption by 21%, equivalent to around 243,000 Olympic swimming pools. The carbon
	footprint of health and social care has reduced by 19% since 2007, despite
	a 27% increase in activity. This leaves a significant challenge to deliver the
	Climate Change Act target of 34% by 2020 and 51% by 2025. A shift to
	lower carbon inhalers will deliver a reduction of 4%, with a further 2%
	delivered through transforming anaesthetic practices. Additional progress
	in reducing waste, water and carbon will be delivered by ensuring all trusts
	adhere to best practice efficiency standards and adoption of new
	innovations. Key to this will be delivering improvements, including
	reductions in single use plastics, throughout the NHS supply chain.
NHS Carbon	The NHS Carbon Reduction Strategy for England (CRS) sets an ambition
reduction	for the NHS to help drive change towards a low carbon society. The
Strategy	strategy shows the scale of reduction in carbon required for the NHS to
	meet its legal targets set out in the Climate Change Act. It also
	recommends key actions for the NHS to become a leading sustainable
	and low carbon organisation.
	Keeping track of the NHS carbon footprint indicates how the NHS is
	progressing in reducing emissions. The SDU regularly updates the NHS

Kings Fund: Spending on health and social care over the next 50 years	carbon footprint to see how we are doing. A list of documents demonstrating progress and giving guidance on how to improve sustainability and reduce carbon can be found on our NHS Carbon Footprint page.  The original strategy was published in 2009. An update was produced in 2010 providing new information and additional tools. It should be used in conjunction with the 2009 NHS Carbon Reduction Strategy (CRS). The update includes additional analysis using Marginal Abatement Cost Curves (MACC) which identify which carbon reduction measures save the most money. Find our more information about MAC Curves.  Examination of the projections and drivers of rising costs in the health and social care sector.
Why think long	
term?	M. L. H. NIIO F. L. H.
Standard Form Contract	Mandated by NHS England for use by commissioners for all contracts for healthcare services other than primary care.
requirements for Sustainable Development 2017-19	
HM Treasury's Sustainability Reporting Framework	The guidance sets out minimum requirements that must be met, provides some best practice examples and also indicates the underlying principles that should be adopted in preparing the information for reporting on sustainability within annual reports and accounts. It is aligned with the Greening Governments Commitments (GGC) Overview of Reporting Requirements, which is applicable to central government bodies.
	It is applicable to all of the central government bodies that fall within the scope of the GGC but excludes NHS bodies.
Public Health	The Public Health Outcomes Framework (PHOF) examines indicators that
Outcomes	help us understand trends in public health.
Framework	
NHS Marginal	Show NHS managers and staff how to save money and cut carbon across
Abatement	the entire health sector.
Cost Curves	It draws attention to the range of entions or earlier reduction measures
	It draws attention to the range of options or carbon reduction measures that the NHS has, including:
	<ul> <li>which actions can save money, as well as CO2, over their life-time</li> <li>how the actions might compare in terms of both tonnes of CO2 saved and cost-effectiveness.</li> </ul>
BMJ: How low carbon	Report explaining how Health professionals are uniquely placed to guide the climate change conversation towards better policies that are good for the planet and for people.



#### LOCAL

Improving	A series of initiatives have been implemented across the Trust to build
Together	quality and ensure patients are at the heart of all we do. One of its five
Strategy	strategic goals is To be a Sustainable Trust that is Fit for the Future.
Sustainable	SDAT is the Sustainable Development Assessment Tool, which is
Development	an online self-assessment tool to help organisations understand their
Unit's SDAT	sustainable development work, measure progress and help make plans for
score for the	the future. It focuses on ten areas and uses four cross cutting
RUH	themes 'Governance & Policy', 'Core responsibilities', 'Procurement and
	Supply chain' and 'Working with Staff, Patients & Communities'
	You get a score for each module to see where good progress has been
	made and identify the areas where greater resources may be required and
	to develop actions in your SDMP.
	The tool also shows how your progress is supporting the global health
	goals (UN Sustainable Development Goals), at a local level. There are
	scores for all the Goals overall and the relevant goals for each module.
Clean Air Zone	The Local Authority plans to Introduce a Clean Air Charging Zone
Bath	(CAZ) in Bath charging all higher emission vehicles - except cars - to drive
	in the city centre from the end of 2020.



# **Appendix Two: Carbon Reduction Further Detail**

#### What is a Carbon Footprint?

A carbon footprint is a measure of the greenhouse gas emissions (usually stated as CO2e or carbon dioxide equivalent) released into the atmosphere as a result of the activities of an individual, community or organisation.

As illustrated in Figure 6, an organisations carbon footprint is made up of 3 elements:

- Scope 1 emissions are direct emissions from owned or controlled sources;
- **Scope 2** emissions are indirect emissions from the generation of purchased energy;
- Scope 3 emissions are indirect emissions that occur in the value chain of the reporting organisation (both upstream and downstream).

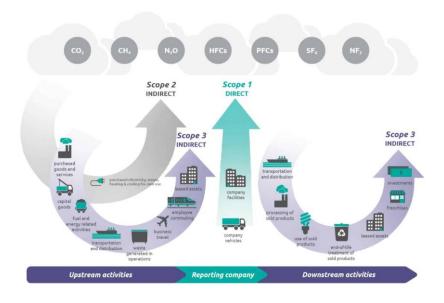


Figure 6: The GHG Protocol illustration for the different scopes

#### **Our Approach**

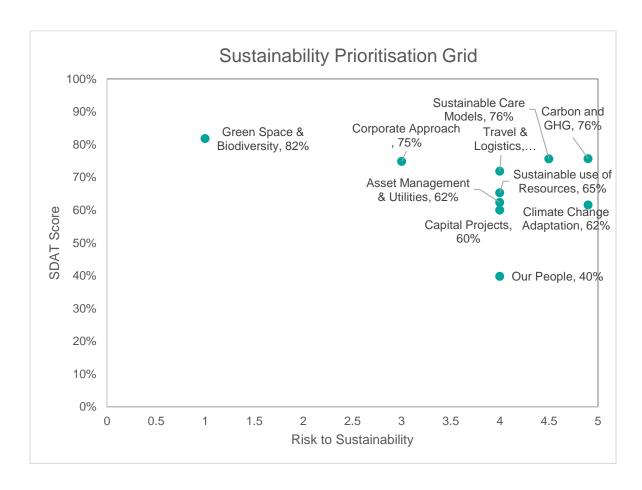
The 5 year Sustainable Development Management Plan (SDMP) covers a number of projects across the whole spectrum of sustainability which following the delivery of related projects, our carbon footprint should reduce. Of specific focus is the Carbon and Greenhouse Gases section which will drive improvements in our management of carbon, and result in a reduction.

The Trust has an understanding of initial projects, along with longer term projects which will be explored as part of HIP2, and as part of the B&NES network.



### **Appendix Three: Materiality Assessment**

A materiality assessment was carried out to prioritise the areas that form the most material issues. The exercise was completed with input from stakeholders and informs our SDMP as well as annual reporting. The assessment was carried out on the ten modules of the SDAT, using guidance published by the Sustainable Development Unit. The results are presented in the matrix below.





# **Appendix Four: Sustainability SWOT**

A swot analysis was carried out to consider the sustainability challenges and trends that may create opportunities or threats alongside our strengths and weaknesses to achieving the outcomes from the SDMP.

Increased scarcity in fossil fuels as well as dependence on other countries for our fossil fuels (Civil unrest in areas that we rely on for fossil fuels, Scotland independence)
Water availability in reservoirs and salt water intrusion of bore holes due to sea level rise

ude to sea even itse.

Waste streams are not able to deal with sustainable alternatives
Confusion with waste disposal
Food prices, removal of EU environmental standards, delays
Possible gap whilst new environmental regulations are defined post

Cost of unhealthy food can be cheaper and more accessible

Runaway climate change Global warming leading to heatwaves, flooding and increased

Ownership of car = status and SUV sales increasing No clear carbon reduction approach Commitment without consequences regarding carbon

Divided society Legislation is complex and technical evolving and changing fast

#### Strengths

- As we decarbonise our energy we are less reliant on fossil fuels Large team with clear roles and areas of focus
- Senior level understanding Bath Improvement programme in place Two water intakes from different sources
- Sustainability Network can extend the reach of the team
- Link between resource scarcity, climate change and the impact
- on health/healthcare is clearer = makes business sense The hospital has a large influence on area-wide decisions Internal catering team giving us the control to support healthier and sustainable eating and diverse dietary options
- Proactive Council in place We are tied to government targets so will be held accountable
- Main site is not in a flood risk area NHS is an influential organisation who others want to collaborate
- with
  Many people see working for the NHS a vocation, therefore
  there are many motivated staff with common values and

#### Weaknesses

- Limited direct return on investment with scope three emissions
- including sustainable transport
  Fuel price increases unpredictable and out of our control
  Don't have the investment to do 'spend to save' projects
  Current assets are dependant on fossil fuels such as the CHP
- Most decisions are based on financial ROI
- Internal processes and due diligence does not work as quickly as required for climate change action
- People find the bin structure unclear
- No food waste collection Dependency on cars wide geographic reach of staff and
- patients
  No in depth knowledge of the evolving legislation
  Time of uncertainty as we leave the EU and the relevant

- Car parking prices may be removed No clear guidance on how to meet the ambitious climate change

Aging population = long-term care and chronic disease management services
Growing middle class = sedentary lifestyles

Obesity and diabetes increasing Global pandemics

Global paridemics
Environmental resource depletion
Lack of staff
Patients are more demanding of information, alternatives and

Patients are more demanding of information, alternatives and improved outcomes More sophisticated, convenient, transparent, affordable and personalised service Patients are accepting greater accountability for their health Remote healthcare accepted mHealth – electronic and mobile health, IoT and smart tech Increasing energy prices and waste disposal costs Climate Change has increasing exposure in the news Countries missing carbon targets leads to shifting targets Mechanisms to move people to more sustainable practices: Low traffic neighbourhoods and resident parking schemes, clean air zones, environmental tax, workplace car parking levy Cost of sustainable transport is increasing Dietary changes

Cost of sustainable darksports increasing bletary changes
Rapid transport changes: Mobility as a service, on demand mobility, autonomous vehicles, micro-mobility
More services being offered by the NHS = stretched
Global warming

#### Opportunities

- portunities

  With increased exposure of climate change, is becomes more important to senior staff because of reputational risk Change = a good time to change people's behaviour Reducing the number of patients coming to site through alternative care models

  Smarter buildings and healthcare models

  External factors coming in to play requiring staff to become more sustainable

  As costs increase, the business cases can be justified

  Low carbon diet is fashionable

  Integrating technology to improve the efficiency of care

  Patients to be more engaged in their own care

  Invest in talent and train new healthcare professionals

  Invest in prevention and wellbeing

  Focus on creative solutions and strong, mutually beneficial

  collaborations

- Invest in prevention and wednessing, mutually beneficial collaborations
  Requirement for efficient working practices
  Working with B&NES to make the clean air zone a success
  Communicate the health benefits of active travel

- Greater demand on health services

- Greater demand on health services Increased numbers of patients Efficiencies may be masked by increasing costs or pressures Risk to reputation if not keeping up with the leading trusts Utilities are a significant cost, therefore any increase can have a large impact on financial sustainability

  As carbon targets continue to be missed, the issue becomes more drastic and overwhelming
  Difficult to design large transport infrastructure projects when it is unclear what transport will look like
  Could be held accountable if not seen as doing enough Reputational exposure
  Cyber security and accessibility of personal data
  Climate change impacts