



Sustainable Healthcare in Kent A Green Plan for MTW

2023 - 2028

The Provision of Sustainable and Resilient Healthcare and Buildings to ensure Healthy People and Places in Maidstone and Tunbridge Wells NHS Trust

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Foreword

Reaching our country's aspirations under the Paris Climate Change Agreement could see **over 5,700 lives saved** every year from improved air quality, **38,000 lives saved** every year from a more physically active population and **over 100,000 lives saved** every year from healthier diets.

95%
of the lights on the
Maidstone Hospital site
have been upgraded
to LED lighting

Parliament announced a climate change emergency in 2019 and with the NHS representing around 5% of the UK's total carbon footprint, the largest public sector emitter of carbon emissions, NHS England released a report setting out the ambitious target of being Net Zero for its NHS carbon footprint by 2040 and its NHS carbon footprint plus by 2045.

By reducing our impact on the environment, we can expect to see significant improvements in our healthcare services, as well as the health of our population. The Trust's mission is to be there for our patients and their families in their time of need and to empower our staff, so that they can feel proud and fulfilled in delivering the best care for our community. We recognise that if we are to achieve this and provide the best care to our patients, we need to reduce our impact on the environment significantly.

This Green Plan identifies a framework of interventions that are needed to help us become one of the greenest NHS hospital trusts in the UK and will enable us to play a vital role in reducing carbon emissions across Kent and Medway. The Trust will review its activities to ensure that its healthcare services are provided in the most sustainable way possible.

The Trust has already seen the benefits of a number of carbon and energy reduction projects, from entering into an arrangement with Arriva which allows staff free travel to and from the hospital sites, to upgrading 95% of the lights on the Maidstone Hospital site to LED lighting, from appointing a lead Executive Director to spearhead the programme, to reducing significantly Desflurane (a harmful anaesthetic gas) and replacing it with more environmentally friendly products.

Reaching Net Zero is a priority for the Trust, has been incorporated within the Trust's sustainability strategic theme and, as such, is an area to which we wish to apply our continuous improvement effort. Achieving our targets to become Net Zero by 2040 will mean we will have to make some difficult decisions, introduce fundamental change and engage and involve staff throughout the organisation. Key to our success will therefore be our people and ensuring everyone understands the important role they can play both individually and within their Divisions. However, it is also true to say, the Trust cannot achieve this alone. In fact, national and international action on medical devices, medicines, freight and transport, information and communication technology and manufacturing will be critical in ensuring the Trust and the NHS meet the targets that have been set. Importantly though, I would prefer our staff, patients and their families, carers and visitors not to simply see this as a target to meet, but rather an opportunity for us all to make the right choices for the NHS, the country and the planet.

This plan is not final. It will require adaptation, change and improvement. The Trust's vision is to have exceptional people, provide outstanding care and to embed sustainability throughout the Trust, will support this aspiration now and in to the future.

Miles Scott
Chief Executive



Introduction

This document focuses on how the Trust will deliver the overall ambition of the NHS for environmental sustainability.

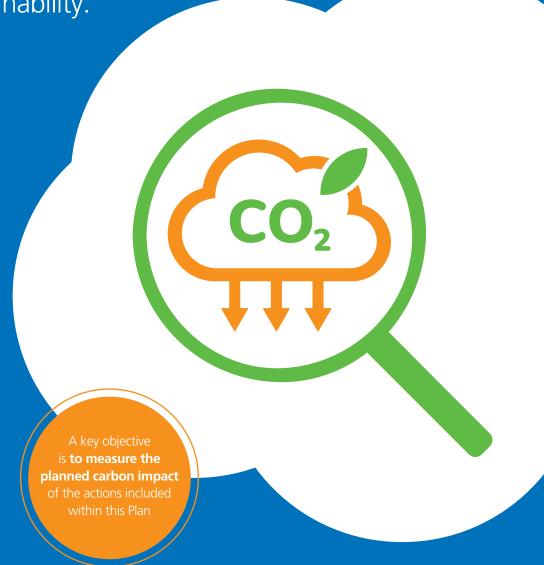
The most significant aspect of the Trust's direct environmental impact is the contribution to climate change caused by the organisation's carbon emissions, which spreads the length and breadth of the Trust – the level of our fossil fuel output, the impact of our estate and facilities, our use of medicines and gases and our fleet and lease vehicles.

The document considers some areas where our decisions and choices have an impact on indirect emissions that, for example, occur when producing and transporting goods and services to the Trust, through the supply chain.

Each of the ten Strategic Working Groups (SWGs) that have now been set up under the Green Committee, have agreed Chairs and have also discussed and approved a set of ambitious and measurable objectives for delivery over the next five years. The Green Committee will meet quarterly (as will the Green Champions) to monitor and update progress, so will be able to report our movement throughout the year to the Board. There is also detail on the Trust's current position in terms of its carbon footprint, as well as the progress we have made over the last year.

We have elaborated on the role of partners in this journey, as it clear that MTW alone cannot achieve the ambitious targets that have been set for the NHS. The national agenda that will affect the carbon footprint Plus still requires significant development. We have therefore tried to reflect a more extensive partnership agenda for each of the relevant SWGs.

Finally, a key objective for delivery in the first financial year of this plan is to measure the planned carbon impact of the actions included within this Plan, so that we are clear going forward on the effect we plan to have and then can be clear if we are making the headway expected. It will also enable MTW to start to develop a clear trajectory towards Net Zero with a planned year on year position. As county-wide and national plans begin to emerge from some of our key partners such as the ICB and the NHS Supply Chain, the Trust will be able to develop and update this trajectory.



This Green Plan has been designed in line with NHS guidance and has been designed to be as concise as possible, whilst complying with NHS Net Zero requirements.

Net Zero refers to achieving a balance between the amount of greenhouse gas emissions produced and the amount removed from the atmosphere.

Net Zero is important as it's the best way we can tackle climate change by reducing global warming. This document addresses specifically the five-year period 2023/24 to 2027/28 and will continue to be seen within the NHS's longer-term sustainability objectives that reach out over the next 20 plus years.

This Green Plan quantifies the Trust's carbon footprint and carbon reduction targets (it covers all sites where the Trust is directly operationally responsible) and is split into sections that discuss different aspects of sustainability.

The Green Plan considers:



Finally, the plan also describes the Trust's governance arrangements and how it will be implemented and monitored to ensure delivery.



Why are we doing this?

The drivers for producing a Green Plan can be divided into four categories:



Environmental

Increasing emissions: These led to an announcement of a climate emergency by Parliament in 2019 that required radical changes to minimise emissions.

The Paris Climate Agreement: This sought to limit global temperature rises to 1.5°C but there is a growing anxiety that the World is now facing increases of 2°C or even 3°C.

The International Panel on Climate Change's (IPCC) sixth assessment report:

This found that an increase in global temperatures of 3°C rather than 1.5°C would result in twice the biodiversity loss, 340m more people being exposed to drought and desertification, a three fold increase in the annual burnt area from wildfires and global sea level rises being 1.5 times higher.



Social

Public Opinion: There is a large and growing expectation amongst the public and staff members that the NHS should do more to address its environmental impacts and take action to reduce them. Citizen led activism is becoming increasingly intolerant of lethargy and inaction amongst large institutions and Government bodies and the NHS is not immune from this pressure.

Changing Demographics: Our local population is expected to increase, with the highest increases in Maidstone for 65 years and over (an 11% increase) and Tonbridge & Malling for people aged over 85 years (a 26% increase). This population increase has serious implications for health and care delivery from both a financial and activity perspective. Older people have the greatest risk of their health being affected by environmental changes, which we already see, with the majority of excess winter deaths being in people over 75 years old. The prevalence of multi-morbidity increases substantially with age, as does the prevalence of dementia.



Financial

Energy and water costs: The costs of using energy, water and emitting carbon are predicted to continue to rise in the medium to long term. The wholesale energy price is dependent upon many natural and geopolitica variables, none of which are within the immediate control of the Trust or its partners.

Funding deficits and the need to generate savings: NHS organisations are under ever increasing pressure to reduce costs, generate savings and close the gap between the increasing demand for services and the funding available.

Delivering Net Zero carbon care brings short and long term savings to fund evolving and

Supporting health and well being creates less demand on services, freeing up resources.

Healthy choices are sustainable choices, supporting care today, tomorrow and in the future.



Legislative

There are several legislative requirements the NHS needs to adhere to relating to climate change. The key legislation relating to sustainable healthcare includes:

Greener NHS Campaign: Outlining the roadmap to Net Zero carbon.

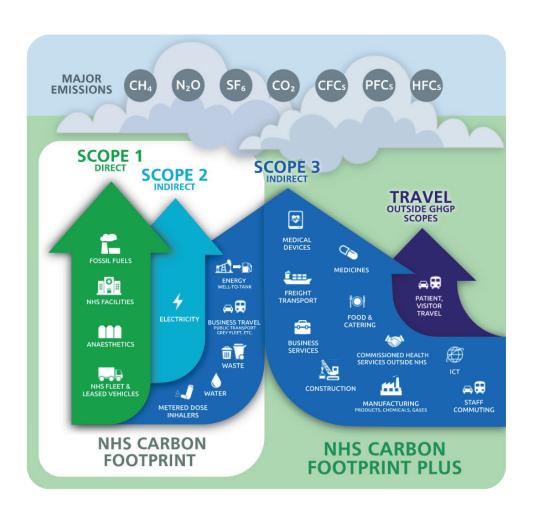
NHS Standard Forms Contract: Mandated by NHSE which contains a requirement for NHS providers to have a Green Plan demonstrating how progress will be made.

NHS Long Term Plan: Sets out actions to lead the public sector by setting an interim target of 60% reduction in carbon footprint by 2030.

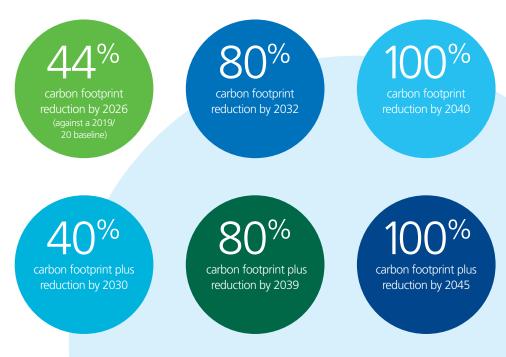
Climate Change Act 2008: Legally binding UK Government targets for the reduction of carbon emissions.

The National Adaptation Programme 2018-2023: Sets out the actions that organisations need to take within 5 years to respond to the risks identified in the Climate Change Risk Assessment.

The Trust's emissions can be categorised into two main groups – NHS carbon footprint and NHS carbon footprint plus.



It is critical that we take steps now to ensure the Trust not only meets NHS and legislative targets, but is at the forefront of sustainability in the healthcare sector. Given this, the Trust will aim to deliver the following national targets:



This Green Plan focuses on our NHS carbon footprint and calculates the Trust's carbon footprint and targets accordingly. However, the plan also touches on some of the Trust's key emissions from activities categorised in the NHS carbon footprint plus. It is envisaged that this Green Plan will be developed further to include these emissions more fully in future.

Where are we now?

Trust has established a

Green

Committee





increased the number of virtual patient appointments to

116,645

reduced patient travel by an estimated

1.3m miles





moved to a

100% REGO
(carbon free) backed
electricity supply

has in place business continuity and emergency planning processes addressing

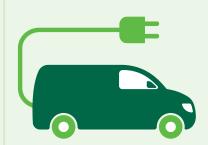
rising temperatures





switched to 100% recycled content paper for all office-based functions

replaced 14 diesel vans with **EV vehicles**





engaging local suppliers for fresh produce to be procured locally







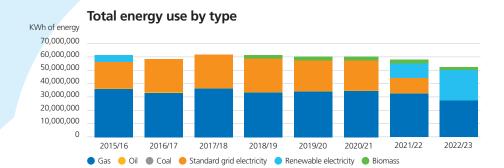
Progress since last year

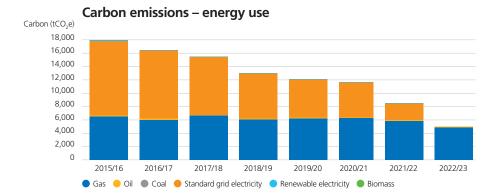
Over the last 12 months we have set up our structure – establishing a Green Committee and a Green Champions team, as well as creating the formal governance structures that we need to ensure that our progress is truly measurable and sustainable.

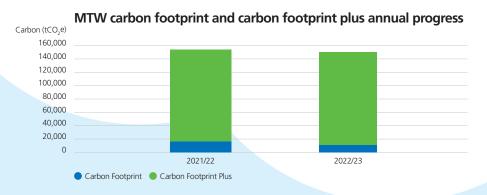
We have also mapped out the emissions associated with our carbon footprint, as well as our carbon footprint plus, for both the 2021/22 and 2022/23 financial years.

This analysis has enabled us to ensure that the actions in this plan are correctly focused and the reduction in emissions helps drive operational improvements.

The Trust has driven down energy consumption, with an overall reduction of 10% in total energy consumption in 2022/23 compared to 2021/22. This has been largely led by a 15% reduction in gas consumption and a move to a 100% renewable REGO backed electrical supply (from 1st October 2021). You can see the effect of this shift to a renewable supply in the graph shown (middle right). Our total carbon emissions for energy use in tCo2e reduced by 68% in 2022/23 against 2021/22 and whilst this represents a small reduction when the Trust's overall carbon footprint plus is considered, it does equate to a 3,000-tonne reduction. Overall our combined carbon footprint and carbon footprint plus has reduced by 2.2% between 2022/23 against 2021/22.



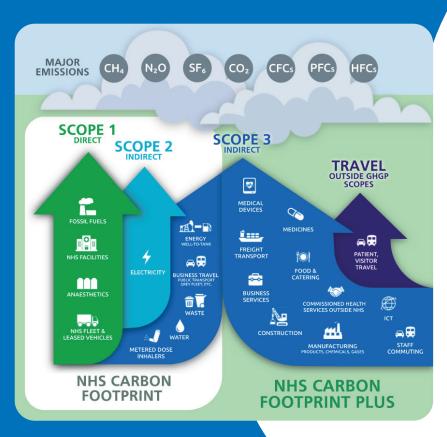




What is our current position?

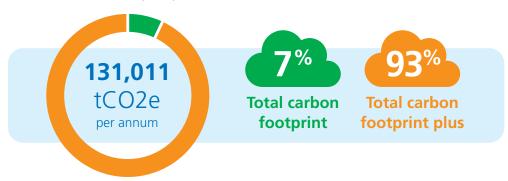
As the largest public sector emitter of carbon emissions, the health system has a duty to respond to meet the agreed targets for decarbonisation.

The NHS has committed to be Net Zero by 2040 for the emissions it directly controls (called the NHS carbon footprint) and to be Net Zero by 2045 for the emissions that are influenced by the NHS (called the NHS carbon footprint plus). In addition to this, the NHS is committed to reaching an interim target of an 80% reduction by 2032 for the NHS carbon footprint and an 80% reduction by 2039 for the NHS carbon footprint Plus.



Total emissions

The total emissions (footprint and footprint plus) of the Trust is calculated to be 131,011 tCO2e per annum, of which 7% is produced from the footprint and 93% from the footprint plus.



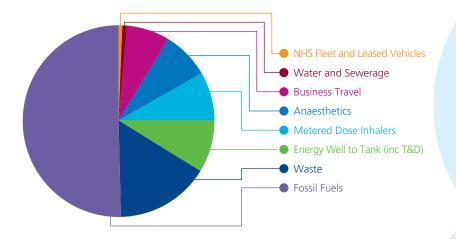
What can MTW achieve alone?

There is a stark difference between the major categories contributing to the carbon footprint that MTW can directly affect (i.e. fossil fuels, waste and metered dose inhalers), as opposed to the indirect contributors (medical devices, medicines, business services, ICT and patient and visitor travel).

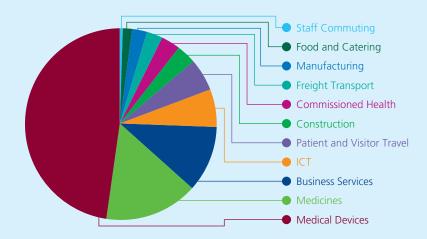
In addition, as the direct omissions that the Trust can immediately impact on only account for just over 7% (9,400 tCO2e per annum) of MTW's total emissions (131,011 tCO2e per annum), you can begin to see how important it is to work with partners across Kent and Medway, as well as national and international suppliers, to really impact on the Trust's overall footprint. Without continued political, policy, legislative and financial and/or grant support, it will be difficult for the Trust to become Net Zero by 2040.

MTW's carbon footprint and carbon footprint plus

MTW's carbon footprint breakdown 22/23



MTW's carbon footprint plus breakdown 22/23



Category	Scope	Total tCO2e	%
Anaesthetics	1	682	7
Business Travel	3	599	7
Energy Well to Tank (inc T&D)	3	852	9
Fossil Fuels	1	4,823	51
Metered Dose Inhalers	3	793	8
NHS Fleet and Leased Vehicles	1	55	1
Waste	3	1,515	16
Water and Sewerage	3	81	1
Totals		9,400	

Category	Scope	Total tCO2e	%
Business Services	3	13,590	11
Commissioned Health	3	3,873	3
Construction	3	4,012	3
Food and Catering	3	1,902	2
Freight Transport	3	3,306	
ICT	3	7,719	6
Manufacturing	3	2,999	2
Medical Devices	3	57,888	48
Medicines	3	19,199	16
Patient and Visitor Travel	O/S	6,640	5
Staff Commuting	3	483	1
Totals		121,611	

Areas of focus

Our approach

The following section outlines MTW's approach towards embedding sustainability and Net Zero carbon within the services and activities across the Trust. Our areas of focus are aligned with the Greener NHS Sustainable Development Assessment Tool (SDAT), which is linked to the United Nations Sustainable Development Goals (SDGs). For each key area, the plan highlights:

- 1 Where we are now?
- 2 Where we want to get to?
- 3 How we will get there?

The following action plan incorporates both our NHS carbon footprint and NHS carbon footprint Plus, in line with our Net Zero carbon targets.

Our immediate plan focuses more on the areas we can directly influence which will provide us with momentum, while we work to influence partners county-wide, nationally and internationally. In order to deliver Net Zero, the Trust Board has signed up to the following principles.

Wherever possible, MTW will look to:

Minimise resource use: reducing as far as possible the resources required in the first place.

Reuse wherever possible: moving away from single-use items, to items that can be reused, reprocessed or redistributed

Switch to greener alternatives: where resource use is essential, we must reduce carbon intensity as far as possible.

Offset: in due course and, in line with any government guidance, we will consider the potential for offsetting any emissions that we cannot reduce in other ways, with a focus on investing in projects that directly benefit patient communities, as well as the environment.

Priorities for focus Workforce and system leadership Digital Medicine transformation Food and Travel and Climate adaptation transport

The Trust's priorities for the next three years



Workforce and system leadership



Leads: Ainne Dolan / Debbie Morris

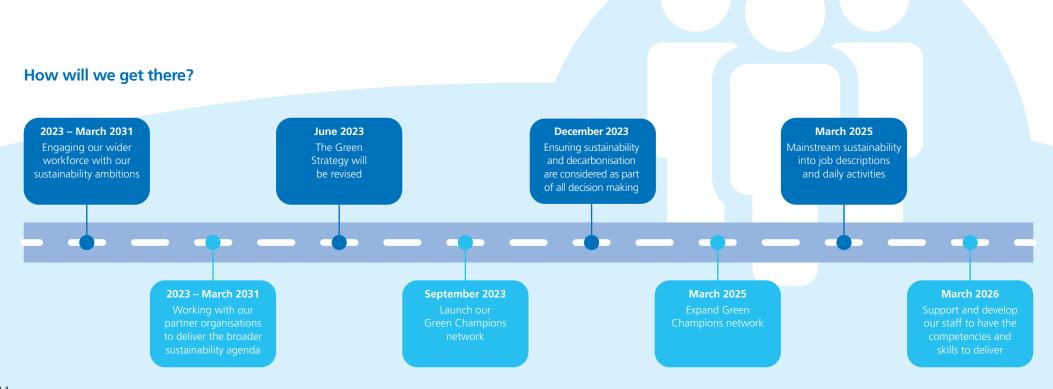
Where are we now?

To date the Trust has established a Green Committee with an appropriate governance structure and clarified responsibility and accountability for carbon reduction and sustainability within the Trust. The Trust has also been reporting on its environmental impact every year through our annual sustainability report, that is published alongside our annual report.

Where we want to get to?

We aspire to be a leader for the provision of sustainable healthcare and are committed to engaging and partnering at all levels to deliver this ambition. To implement this, the Green Plan will need to be adopted by all members of staff. Many of our colleagues are already very engaged in this agenda and have contributed to the development of

the Green Plan and other key initiatives throughout the Trust. However, achieving our Net Zero target and our wider sustainability objectives remains a monumental task. To become a truly sustainable organisation, we require the support of the workforce throughout MTW. This Plan aims to educate and engage our colleagues to empower them to take-action to improve sustainability. This is hugely important in creating a culture of sustainability throughout our workforce. We have the opportunity to raise awareness of climate change and the health impacts associated with it within our region and can use our position to work with our local communities to address health inequalities.



Sustainable models of care



Leads: Rachel Jones / Greg Lawton

Where are we now?

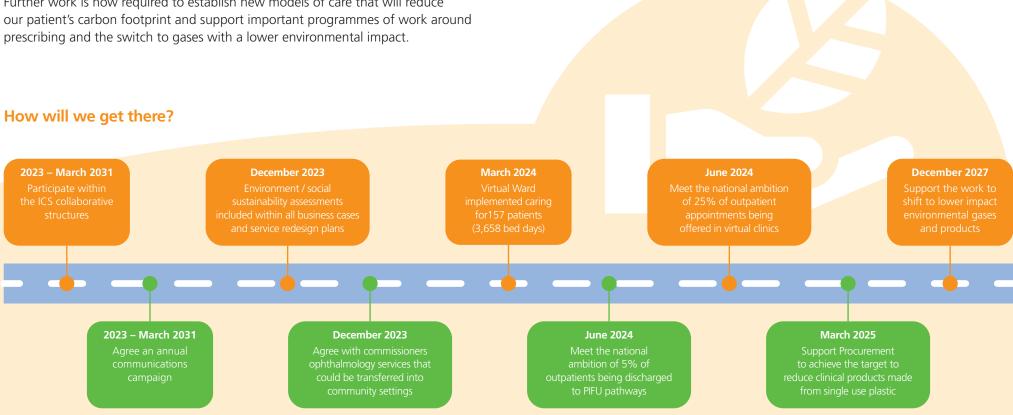
Since the publication of MTW's first Green Plan, the Trust has made some progress by increasing the number of virtual patient appointments to 116,645 and the number of patients discharged to a PIFU pathway to 3.6% in 2022/23. We have also set up a local diagnostic hub at Hermitage Court, offering CT and MRI. In 2022/23 the Trust saw 18,544 CT patients and 12,062 MRI patients in the diagnostic Hub.

Phase 2, later in 2023, will include XRAY, ECHO, DEXA and respiratory diagnostics. The Trust offers and is looking to invest further in radiotherapy services for the residents of east Kent in Canterbury and provides a birthing centre in Crowborough.

Further work is now required to establish new models of care that will reduce

Where we want to get to?

The Trust will review the location of the services it provides to minimise staff and patient travel and will maximise opportunities to utilise technology to facilitate remote working and the local provision of services including virtual appointments / wards. Reviewing and changing our models of care is one significant way we will be able to manage inevitable population and subsequent organisational growth.



Digital transformation

Leads: Sue Forsey / Alex Slack

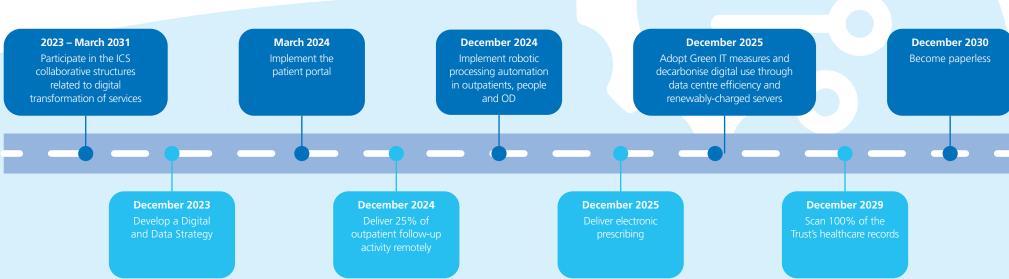
Where are we now?

The Trust is currently undertaking a significant amount of work to upgrade technology throughout the organisation to drive efficiency and improvements in patient care. 1,400 trees have been saved by a reduction in printing and through the creation of 3m electronic documents. The use of video consultation platforms has facilitated a rise in the number of virtual appointments, reducing the requirement for patient travel to our sites. In 2022/23 116,645 appointments were provided virtually either using video or telephone calls. Based on an average 18-mile average journey for patients, this has reduced patient travel by an estimated 2.1 million miles. Again, based on an average car, this is equivalent to approximately 576 tCO2e. We are continuing to facilitate these services and other remote clinical services, to provide patients with more choice and reduced travel. On average members of staff use the VPN and therefore work remotely, 2,350 per week or over 122,000 per year. This means nearly 500 members of staff work remotely each day. Finally, in the last year we have scanned a total of 5,088 paper healthcare records (1.1% of our total library).

Where we want to get to?

We are aiming to optimise the use of telemedicine, where appropriate, to offer greater flexibility to patients and reduce travel. We will also continue to support remote working for colleagues to reduce the impact of commuting and continue to transition to digital systems to drive efficiency and minimise resource consumption from paper, printing and postage. Finally, we will pursue and implement Al and robotic technology, where appropriate, to increase automation and enable rapid problem-solving and support quicker and better decisions. The aim is to improve the efficiency of care and patient outcomes.

How will we get there?



Estates



Leads: Debbie Morris / Stu Meades

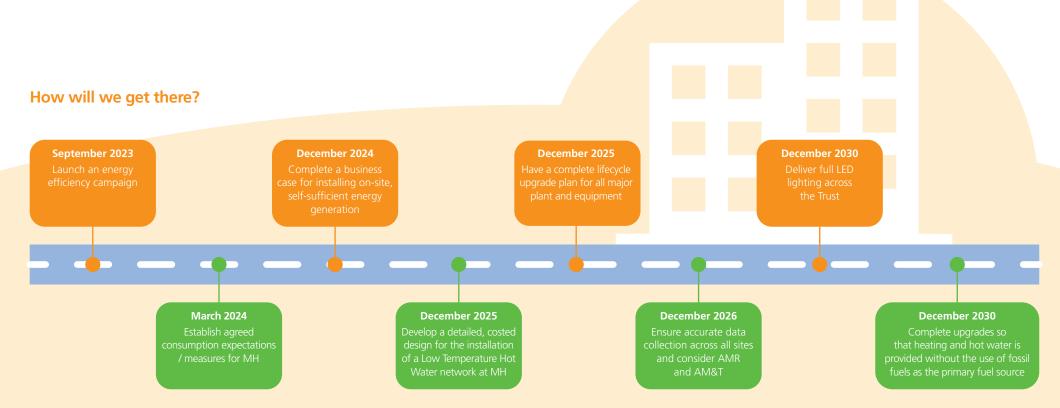
Where are we now?

The Trust moved to a 100% REGO (carbon free) backed electricity supply from 1st October 2021. The Trust has already upgraded 95% of the lights at Maidstone Hospital and 60% of the lights at Tunbridge Wells Hospital to LED. In addition to this we monitor our energy consumption on a monthly basis to ensure that our performance is in line with expectations. We are currently developing an overarching heat decarbonisation strategy for both hospital sites to allow them to move away from a reliance upon gas to electrified heat sources. The Trust is committed to ensuring that all new building projects and refurbishments achieve a minimum of a BREAAM Very Good assessment.

Where we want to get to?

The Trust will upgrade all lighting to LED by 2030 and will establish systems to monitor and report upon energy and water consumption for all geographical areas and buildings within the hospital sites. This will mean we will be able to interrogate, investigate and respond proactively to any readings that fall outside the agreed expectations.

Core to the Trust's response will be a comprehensive, costed plan and detailed strategy for the decarbonisation of heat and hot water, which will be fully delivered by 2040. In addition, the Trust will agree a strategy to achieve self-sufficient, on-site energy generation.



Climate adaptation



Leads: Debbie Morris / Rachel Jones / John Weeks

Where are we now?

Since the publication of the Trust's first Green Plan, we have focused efforts on carbon reduction rather than adaptation and therefore less progress has been made in this area. The Trust recognises the importance of preparing the organisation for climate change to ensure that we are resilient to the potential impacts and can continue to provide high quality care. This version of the Green Plan sets our objectives for climate change adaptation. This has also been recognised as a priority by the ICS and we will work collaboratively to align our adaptation strategy to those of our partners in the ICS and other anchor institutions. The Trust does already have in place business continuity and emergency planning processes that address increasing temperatures.

Where we want to get to?

In addition to impacting on patients, climate change could also threaten our ability to deliver care. Moving to buildings, services and systems that can adapt to climate change is essential to ensure we are equipped to continue providing high level care despite the changing climate. We will do this by:

- building the capacity and resilience of the Trust to anticipate and respond to the impacts of climate change through long-term adaptation planning and identification of sites / buildings at risk;
- identifying sites and buildings that trigger risk assessments from overheating and include this in reporting; and
- build long-term adaptation planning into their Green Plans by 2025

How will we get there? 2023 - March 2031 December 2023 June 2024 December 2024 Ensure any new developments Establish a clear and Integrate the process of Introduce staff planning for climate change into identify potential changes to the climate achievable trajectory for training on extreme and the impact on facilities and seek to carbon reduction to monitor existing emergency and business weather events mitigate these at design stage continuity plans progress towards Net Zero December 2023 June 2024 September 2024 risks of climate change to

Facilities



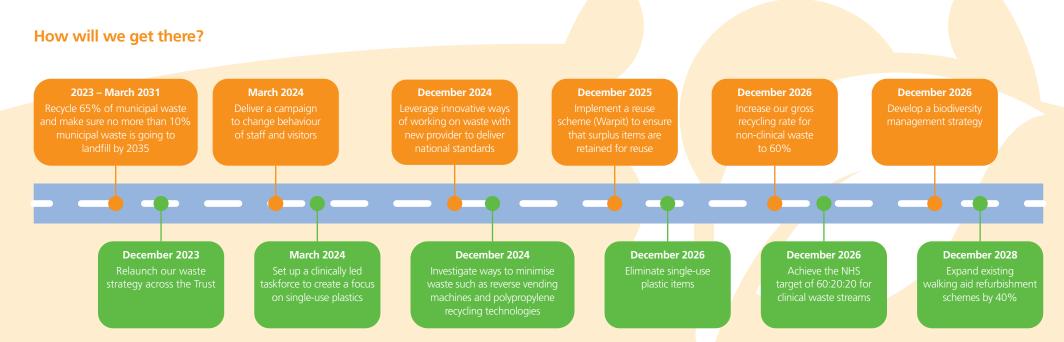
Leads: Brian Whitfield / Helen Leith / Abraham Adegoke

Where are we now?

The Trust has a valid and up to date Waste Management Strategy, has made significant improvements in its segregation and handling of clinical waste and has expanded the offensive waste stream across all aspects of clinical operations. It is enhancing its green spaces and has already worked with the Kent Wildlife Trust to create natural meadows on its sites encouraging wildlife and in particular bees to pollinate. We have implemented re-usable sharps containers across the organisation, to minimise waste that is incinerated and we currently utilise 98% re-usable products in facility run outlets. We have also switched to 100% recycled content paper for all office-based functions.

Where we want to get to?

We aim to double our current gross recycling rate by 2026 and minimise our use of single-use plastics wherever possible. We also have an ambition to integrate biodiversity into our sites and infrastructure, especially within the Trust's masterplans and capital investment projects. This will enable the Trust to support initiatives such as the creation of further wildflower meadows and tree planting schemes and will encourage us to engage with local charities and volunteer groups to further develop our green spaces and enhance our natural environment.



Travel and transport



Leads: Brian Whitfield / John Knight / Alan Hewitt

Where are we now?

We have already taken steps to reduce our emissions, electrify our fleet, reduce car journeys and support public transport. In 2011 the Trust introduced free travel between its sites for members of staff. In December 2019 the Trust entered into an arrangement with Arriva allowing staff free travel from local town centres to sites. In 2022/23 we replaced 14 diesel vans with EV replacements and installed 16 commercial EV charge points across the estate. The Trust operates a salary sacrifice cycle to work scheme. The Trust has installed 12 electric charge bays across its sites including patient bays in the oncology patient car park. We support our staff to lease green vehicles through the salary sacrifice scheme and we have developed a detailed green travel plan to identify and map all available travel routes to our sites.

Where we want to get to?

We are committed to continuing this agenda between now and 2028 and will move 100% of our NHS fleet (lease) to use low, ultra-low and zero-emission vehicles by 2025. We are also committed to cutting business mileage and fleet air pollutant emissions in line with the targets in the NHS Long Term Plan.

How will we get there? March 2025 2023 - March 2031 December 2023 March 2024 September 2024 March 2025 December 2025 Continue to provide flexible Develop a BC to Develop an 'in-house' Replace all the Trust's Cut business To purchase a Ensure the car leasing scheme working options and efficient use introduce a park and bid for the patient pool cars to electric cars mileage by 20% restricts high emission vehicles fleet dynamic of IT to reduce the need to travel ride scheme in the Trust transport service when the logistics platform and promotes ultra-low G4S contract is tendered to and between sites emission vehicles December 2023 March 2024 March 2024 March 2025 March 2025 March 2025 car share and individual travel plans

Food and nutrition



Leads: Brian Whitfield / Helen Furminger

Where are we now?

The Trust is already engaging local suppliers to establish opportunities for fresh produce to be procured locally and minimise food miles as far as possible. However, at present the demand from the Trust is making this difficult to achieve across all fresh meat, vegetables, dairy and bakery products. Where products are not fresh and are procured from further afield, such as frozen or tinned items, the Trust is reviewing supply contracts and ensuring that local procurement clauses are inserted to these where this is commercially viable and that suppliers of these items are meeting the procurement guidelines in terms of social value and carbon reduction plans.

The swap from single use packaging to 100% recyclable packing has been made and a vegan menu option for staff is being trailed on a daily basis on the Maidstone Hospital site.

Where we want to get to?

Food is estimated to produce 6% of the NHS' total carbon footprint plus each year. This is based on the way food is grown or made, processed, delivered and served. Significant emissions also result from food waste disposal. An estimated 1 in 6 meals in the NHS is wasted, costing the NHS an estimated £230 million (39%). Nutritious food whilst in hospital prevents malnutrition and has been seen to improve clinical outcomes for hospitalised patients, such as reducing complications, lengths of hospital stay and re-admission rates through preventing malnutrition.

How will we get there?

Undertake a bench-marking exercise that establishes the Trust's adherence to the National Standards for Healthcare Food and Drink

December 2023

December 2023 Reduce single use food packaging

December 2024

Using the maturity matrix in the National Standards, establish the

December 2024

Extend the current pilot at Maidstone to deliver daily vegan, plant based and vegetarian menus for staff and patients at both MH and TWH. In addition, look to offer 'Meat Free Monday' in the staff restaurants

March 2028

Reduce the level of food waste to 5%

December 2023

Replace all sauce sachets in the staff restaurants with re-useable bottles

March 2024

Explore a full range of options and produce a business case for the delivery of a paperless / digital menu

December 2024

Create a Plan to deliver the national food standards and a set of key priorities that will become future objectives for this workstream

December 2024

100% of food waste will be put into special digesters that produce sustainable food pellets

Medicines



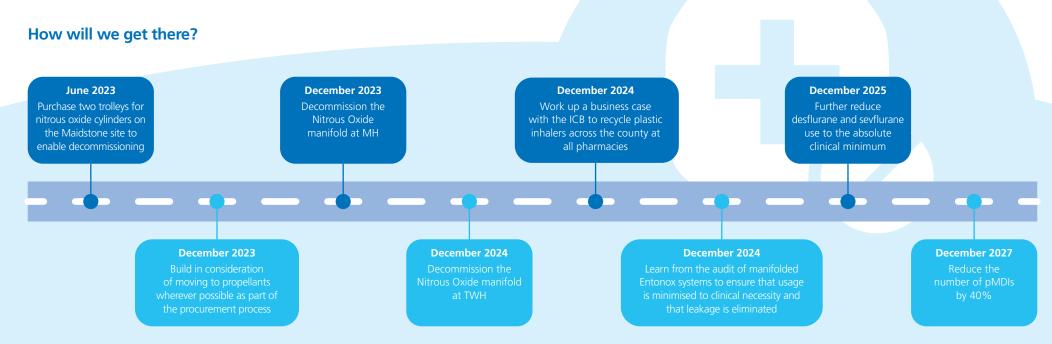
Leads: Mildred Johnson / Helen Burn

Where are we now?

In 2020/21 the production and use of anaesthetics, inhalers and medicines accounted for 16.2% of the carbon emissions of the Trust. To address this, we have managed our returned medicines and recycled them into stock to minimise waste; conducted an audit of our manifolded supplies of Nitrous Oxide and Entonox to identify opportunities for improvement and to benchmark their usage; implemented the removal of adaptors for piped Entonox for patients not using the gas reducing emissions potentially by 80%; switched from Vagifem to Vagiroux and reduced the number of applicators per packet from 24 to 1 or 9,522 applicators a year; begun to monitor the individual staff exposure of midwives and other healthcare professionals across the Trust who are using Entonox; been promoting the prescribing of low carbon inhalers; worked with the ICB to implement a patient information leaflet on how to reduce their carbon footprint and investigate a scheme to recycle plastics from inhalers; and been participating within the ICS collaborative structures related to low carbon medicines.

Where we want to get to?

As a significant proportion of emissions result from the medicines supply chain, MTW will continue to work with pharmaceutical suppliers to support their alignment to our 2045 Net Zero target. To create further carbon emission reductions from the optimisation of medicines use, we will adopt a system wide approach to addressing overprescribing to ensure that patients are receiving the most effective treatment for their condition, whilst minimising unnecessary medicines wastage and carbon impact. Many of the interventions set out within this theme will require a collaborative approach between primary and secondary care to ensure that sustainability is a consideration in our approach to prescribing. We will do this by optimising prescribing of medicines; promoting the minimisation of medicine waste and other related wastes; encouraging the responsible capture of medicines waste and improving the impacts of disposal and accelerating the transition to low-carbon medicines.



Supply chain and procurement

Leads: Bob Murray / Jaye Chapman

Where are we now?

The Trust has already begun to educate external and internal stakeholders on social value and why it is so important for procurement and embedding this in all our contracts. We have recruited a full-time Sustainable Buyer into the Procurement Team. We have also put social value measurements in the evaluation of bids for goods and services with a minimum weighting of 10%. We ensure all tenders and contracts include evaluation criteria around sustainability and social values. The assessment of carbon footprint and carbon reduction is included on all supplier bids for goods and services. We have successfully collaborated within the ICS structures related to low carbon procurement. Finally, we have an annual modern slavery assessment for all providers successful in bidding for goods and services. We are working with our direct suppliers in line with the PPN 02/23 to keep track of modern slavery risks and issues through contract management. We have mapped our carbon footprint and carbon footprint plus using spend based metrics and have identified that clinical consumables and medical devices account for the largest contribution.

Where we want to get to?

We aim to focus on identifying the amount of recycling and the level of re-useable products that the Trust uses and will work with all relevant colleagues to increase both areas. This priority will drive the procurement process, alongside a robust financial and clinical assessment of all products. We will reduce our consumption of single use goods to a minimum and deliver year on year reductions in stock waste across the organisation. We will focus on collaboration with our supplier base, our partners in the ICB and across the NHS, to drive market behaviour. This will harness the buying power of the NHS to push for a reduction in carbon, particularly in our scope three (indirect) carbon footprint plus footprint. This will be critical in ensuring we meet the national commitments for carbon reduction, but can only be achieved through regional and national partnership. Finally, we also commit that within five-years we will only contract with suppliers that are committed to a Net Zero agenda.

How will we get there?



Working as an integrated system

Integrated Care System

The Kent and Medway integrated care system (ICS), brings together local health and care organisations and local councils to design care and improve population health, through shared leadership and collective action. Together, we aim to address the issue of climate change through adopting a joined-up approach to sustainable development.

We will work with our partners to align our plan and priorities across the ICS and wider region. We are committed to working with the wider NHS system, sharing resources and undertaking collective action to reduce our carbon footprint and improve the health and wellbeing of our communities.

Working across the eight districts, together we can learn from each other and achieve more. At the heart of the programme is improving the offer to our people. A more immediate action for change is to reduce the health inequalities across our communities and mitigate against the threats posed by climate change. We will strengthen the connections between the health system and wider public sector services, the voluntary sector and community to embed sustainable behaviours and impacts across our services and communities.



The system's vision

Partners across the system are now working together to create a coordinated plan of activity to maximise the effect of our collective action in tackling climate change. Our vision is bold, it is to 'embed sustainability at the heart of everything we do, providing first-class patient care in the most sustainable way, not just by choosing greener but by using less, repurposing what we use and avoiding waste'.

It is imperative that we work at pace and at scale as partners to deliver a combined approach, not only by reducing our carbon footprint, but also promoting biodiversity and adapting to the changes in our climate that are already happening. We are confident that we can unite with our partners and our communities to achieve the ambitions of our green plan and beyond. We have responded to the NHS commitment to be the first healthcare service in the world to reach Net Zero on carbon emissions by 2040 by initially producing a five-year green plan, which we will deliver in partnership with staff, patients and suppliers.

K&M System	Kent and Medway ICS NHS Body Covering the whole of Kent and Medway	ICS Partnership Commissioners, providers, local government, voluntary and community sector and other stakeholders	Clinical and Professional Forum Clinical and managerial steer from constituent organisations	Partnerships arrangements Elected members o local authorities the Health and Wellbei Boards and Health Overview and Secu Committees	rough providers delivering ing K&M (or sub-set of) priorities and strategic	
	Four Integrated Care Partnerships Four ICPs covering defined geographies within the overarching system, incorporating local commissioners, providers of health and social care, district councils and other partners; to develop and social care, district councils and other partners; to develop					
Place	East Kent	West Kent	Dartford, and Swar	Gravesham nley	Medway and Swale ICP	
Place	42 Primary Care Netw Provide community, social Based around groups of an individual clinical dire		local needs, knowledge and challenges are reflected in the wider planning and delivery of health and care services			
	Individual health and care providers, including NHS Trusts and Foundation Trusts (our anchor organisations), primary care, social care and the wider voluntary and community sector			tions),		

Delivery of the plan

Reporting

This Green Plan is approved by the Trust's Board and is led and reported on by the Director of Estates. The objectives are implemented through an action plan overseen by the Green Committee. The action plan will be reviewed and updated annually to record progress against agreed targets and agree plans for the year ahead.

The Green Plan will be reviewed every five years, to review baseline monitoring targets and ensure that new changes in policy can be incorporated and met. Progress will be communicated via the Trust's Annual Report, the findings of which will be shared during staff engagement activities.

Furthermore, MTW reports on the progress of sustainability initiatives and the performance of key indicators in a section of the Annual Trust Report. The Trust also provides data annually via the Estates Return Information Collection (ERIC).

The Green Plan
will be reviewed every
five years, to review
targets and ensure that
changes in policy
can be met

Measurement

The calculation of our NHS carbon footprint is principally from metered consumption data that is widely available, routinely used and reported by the Trust. The consumption data is used in conjunction with emissions metrics issued by DEFRA on an annual basis.

For scope one emissions the following calculations were used: Fossil Fuels – calculated by using direct metered consumption data for both gas and gas oil;

Anaesthetics – Calculated using supply reports of Nitrous Oxide and Entonox from BOC and Air Liquid as well as from Pharmacy on exact usage of Desflurane and Sevoflurane in 2021/22 year; and NHS Fleet and Leased Vehicles – fuel consumption data from Transport Dept.

For scope two emissions the following calculation was used **Electricity** – calculated by using direct metered consumption data. A zero-emission figure for electricity has been used to reflect consumption taken from 100% REGO backed green tariffs (the Trust moved to a green tariff in October 2021).

For scope three, the following calculations were used: Energy Well to Tank – calculated by using direct metered consumption data for gas, electricity, gas oil and diesel; Business Travel – Emissions from claimed mileage for travel in personal vehicles; spend data from procurement for vehicle rental costs; arriva bus costs; hotels costs; Waste – Bespoke calculation from Stericycle for clinical waste, volumetric data for non-clinical waste with DEFRA emissions factors; Water (and sewerage) – Metered consumption data; and Metered Dose Inhalers – Calculated using report from Pharmacy on exact usage in 2021/22 year.

The calculations for the carbon footprint plus are less exact and are based principally on carbon intensity metrics issued by DEFRA.



Governance and reporting

Trust governance

Strong leadership and support from decision makers will be required to embed sustainability across the organisation. Sustainable organisations are better positioned to anticipate and react to economic, social, environmental and regulatory changes as they arise. The Trust's sustainability governance is shown below:



Roles and responsibilities

The Trust has a dedicated executive level sustainability lead to monitor the implementation of this Green Plan and to lead the agenda. The Green Committee will engage on and deliver the agreed sustainable actions and clear any blockages to progress of agreed plans. It will meet quarterly to progress actions and complete an Annual Report.

The Annual Report will be reported to the Finance and Performance Committee and Trust Board by the lead Director and will detail progress of the Green Plan. A summary of the Annual Report will also be shared internally to ensure the Trust's commitment to sustainability is communicated as widely as possible to ensure workforce engagement. The Director of Estates, supported by key members of the Green Committee, is responsible for keeping up to date with the latest policy and legislative changes affecting healthcare services. Any policy changes will be reported and incorporated into the Green Plan at the review stage.

The Green Champions will be responsible for engaging with frontline staff and will generate ideas, prioritise key areas for action and feed these into the Green Committee.



Glossary

(or questioning) and others

aM&T	Automatic monitoring and targeting	MDI	Metered Dose Inhalers
BAME	Black, Asian, and minority ethnic	NHS	National Health Service
BCPs	Business Continuity Plans	MTW	Maidstone and Tunbridge Wells NHS Trust
BREEAM	Building Research Establishment Environmental Assessment Method	NO2	Nitrogen Dioxide
CCRA	Climate Change Risk Assessment	NOx	Nitrogen Oxides
CCU	Critical Care Unit	PM	Particulate Matter
CHP	Combined Heat and Power Plant	PPA	Power purchase agreement
CO2	Carbon Dioxide	Procurement	The process used to purchase goods and services
CO2e	Carbon Dioxide and equivalent Green House Gases	PRM	Performance Review Meeting
DECs	Display Energy Certificates	R&I	Research and Innovation
DPI	Dry Powder Inhalers	REGO	Renewable Energy Guarantees of Origin
EMS	Environmental Management System	SDAT	Sustainable Development Adaptation Tool
ERIC	Hospital Estates and Facilities Statistics	SDGs	United Nations Sustainable Development Goals
F-gases	Fluorinated greenhouse gases	SDU	NHS Sustainable Development Unit
FM	Facilities Management	Solar PV	Solar Photovoltaic cells
GP	General Practice	tCO2e	Tonnes of carbon dioxide
HFMA	Healthcare Financial Management Association	UKCIP	UK Climate Impacts Programme
KPI	Key Performance Indicator	WEEE	Waste Electrical and Electronic Equipment recycling
kWh	Kilowatt hours	WRA	Workplace Risk Assessment
LED	Light-emitting diode	WTE	Whole time equivalent employee
LGBTQ+	Lesbian, gay, bisexual, transgender and queer		





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