NHS
East Sussex Healthcare
NHS Trust

care WITHOUT CARBON

Our Green Plan 2026

Our Environment | Our People | **Our Commitment**

Foreword

At ESHT we are proud of the commitment to more sustainable healthcare that we've demonstrated since our first Green Plan came into being back in 2021 . Not only because it is the right thing to do as a healthcare provider, but also because it supports innovations in care that benefit our patients, improves health outcomes, and reduces costs.

As the only integrated provider of acute and community care in Sussex we can make a valuable difference to the carbon footprint of healthcare in our region. Clinically, we have succeeded in removing Desflurane from practice, decommissioned the nitrous oxide manifolds, and installed Sagetech technology to capture wasted volatile gases for recycling. This hugely contributes to lower carbon emissions and with projects such as the low-carbon upgrade to Eastbourne District General, we are making great strides in reducing the carbon associated with our care. However, there is much still to do to meet our Net Zero Carbon commitments and to ensure that our services and hospitals are resilient as we begin to feel the impacts of climate change more strongly in Sussex.

The new NHS 10-year Plan is a key influence on our Green Plan refresh, with its focus on more care in community, a shift to more digitally enabled care and a focus on prevention. These three core elements are central to our ability to deliver our Green Plan goals.

The next phase of our work will see an increased focus on integrating sustainability into our clinical practice through a newly identified clinical lead for sustainability, development of our Evolving Care workstream and supported governance. In addition, the development of our new QI programme provides a great opportunity to support the integration of sustainable healthcare principles into projects and decision making across the trust.

With tools and sustainability expertise provided through our Care Without Carbon team, we'll continue to work in partnership with others locally to find collaborative solutions, economies of scale and share best practice. In this way we can ensure we can deliver best value for our patients and drive change as efficiently as possible. Our updated Green Plan sets out how we will achieve this in practice.

With the ever-growing pressure of limited resources and increasing demand that we all face; making more sustainable choices has never had more value, offering solutions that will support patient care, reduce costs and limit impact on our environment. This offers a positive push on the next phase of our work to be a lower carbon care provider, delivering better care together for East Sussex.

Jayne Black
Chief Executive

Contents

Why we need sustainable healthcare

How is climate change impacting our patient population at ESHT?

Key messages

"**There is substantial and growing evidence** of the effects of climate change on health in the UK"

"The health risks of **climate change will not be distributed equally across the UK**"

"The health risks of climate change will **not be distributed equally across generations**"

"Health impacts will **increase with progressive warming**"

The possible health effects of climate change

The National Study on Flooding and Health estimates that the prevalence of depression, anxiety and PTSD, is typically 4 to 5 times greater for those who have had their homes flooded.

Higher levels of UV exposure as a result of climate change could result in an extra 5,000 cases of skin cancer and 2,000 cataract cases per year by 2050

There is a clear link between deprivation and tidal flood risk. People living in deprived areas are 62 per cent more likely than others to be at high risk of coastal flooding.

Evidence indicates that attendances related to **respiratory conditions seen in those aged 65–74, increased by an average of 1.54% for each degree** increase in temperature above 16 degrees centigrade.

By the 2070s the estimated mortality rate from heat in those aged 85 years and older will be at around 277 deaths per 100,000, compared to 53 deaths per 100,000 during the baseline period (2007-2018)

Estimated emergency hospital admissions (respiratory causes) associated with short-term effects from O3 exposure in 2018 are 60,488 across the UK. It is estimated that this figure will increase by 11.7% by 2050.

More frequent weather extremes will reduce the security of food supply, increasing food prices by 20% by mid century and limiting availability of nutritious foods for our most deprived communities.

Projected increases to UK temperatures in the coming years will **increase the risks of West Nile Virus outbreaks,** with epidemics possible by the second half of the century, with South-East England the most at risk.

Delivering a Net Zero NHS:
an opportunity for better health and better care

"Climate change is the greatest global health threat facing the world in the 21st century, but it is also the greatest opportunity to redefine the social and environmental determinants of health."
– the Lancet, Countdown on Health and Climate Change

Why this matters now

Climate change is already affecting the people we care for, with more frequent heatwaves, flooding and poor air quality placing added pressure on our ageing and often vulnerable population. Communities in East Sussex that already experience poorer health, particularly those in more deprived coastal areas, are likely to feel these impacts most. This creates a widening gap in health outcomes unless we adapt how we deliver care.

Our contribution as a healthcare provider

The way we currently deliver care also plays a role in driving environmental pressures. The NHS accounts for around 5% of the UK's carbon footprint, with significant emissions from clinical activity, travel and waste. These impacts drive ill health and exacerbate the pressures our services are already facing, underscoring the need for the NHS to lead by example on net zero.

The opportunity for better health and better care

Taking action on climate change is a chance to improve health outcomes and reduce inequalities across East Sussex. Sustainable models of care, such as reducing unnecessary travel, improving air quality, supporting healthier food, strengthening green space and making better use of our estate, bring immediate health benefits while helping communities to thrive. They can also create a more resilient, efficient and financially sustainable health system. By embedding sustainability into everyday care, we can protect our population, support staff and deliver better care now and for future generations.

Why deliver a Net Zero NHS?
Legal duties and regulatory drivers

"Given the global health imperatives, the NHS must stick to its net zero ambitions. There is no trade-off between climate responsibilities and reducing waiting lists."
Darzi Report 2024

Health & Social Care Act 2022:
- Legally binding Net Zero targets (2040 for emissions we control, 2045 for those we influence)
- Duty to adapt to current and projected climate impacts
- Duty to have regard to Environment Act 2021 statutory targets (air quality, water, waste and biodiversity)
- Requirement for NHS Trusts, ICBs and NHSE to consider statutory emissions and environmental targets in all decision-making

NHS 10 Year Health Plan:
- Reaffirms the government commitment to a Net Zero NHS
- Sets three strategic shifts that support lower-carbon care: hospital to community, sickness to prevention, analogue to digital

Regulatory and planning requirements:
- CQC Quality Statement on sustainability: leaders and staff must understand climate–health impacts and deliver more sustainable care
- NHS Standard Contract, national planning guidance and commissioning requirements
- Public Sector Equality Duty, which must be applied to climate-related decisions and actions

Procurement and supply chain:
- Net Zero and Social Value procurement requirements (PPN 02/23, PPN 06/21 and Procurement Act provisions)
- NHS Net Zero Supplier Roadmap

Supporting NHS strategies and statutory plans:
- Delivering a Net Zero NHS (NHSE climate strategy)
- NHS Green Plan Refresh Guidance
- Net Zero Travel and Transport Strategy
- NHS Estates Net Zero Delivery Plan
- NHS Clinical Waste Strategy
- Other NHSE guidance developed to meet H&SC Act 2022 duties

ESHT Green Plan: our approach so far

Since the development of our Green Plan in 2022, we've made significant progress in reducing our impact on the environment. We've spearheaded a number of carbon reduction projects including a £27m decarbonisation project at Eastbourne DGH - that has seen the installation of solar panels, new insulation, and air source heat pumps, eliminating desflurane and setting up a refurb workshop to enable greater reuse across the trust.

Our activity has been focussed on actions that are deliverable in the context of current frontline and financial pressures. This has been a challenge. Healthcare demands action in the present; and as an NHS trust, our patient needs are paramount. Our challenge is meeting the immediate needs of our patients while also creating the change needed to adapt to and mitigate against climate change.

Much of our work over the last four years has been delivered in and around the estates and facilities department, along with support from other key areas including procurement, and some key clinicians driving medical gases projects.

Key to our success over the last several years has been our collaborative approach to sustainability through Care Without Carbon (CWC).

Working together across Sussex has enabled us to develop a shared team of sustainable healthcare specialists - from experts in energy and carbon to staff engagement and circular economy.

By bringing this approach to our Green Plan programmes within the NHS we can:
- Maximise the impact of our programme and avoid duplication
- Deliver joint projects that bring impact and efficiencies of scale
- Share our learning, tools and resources across trusts
- Communicate as one voice on sustainability to our staff and patient community

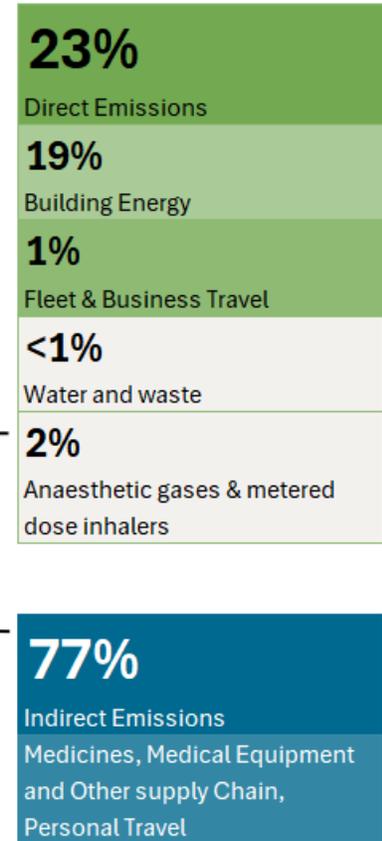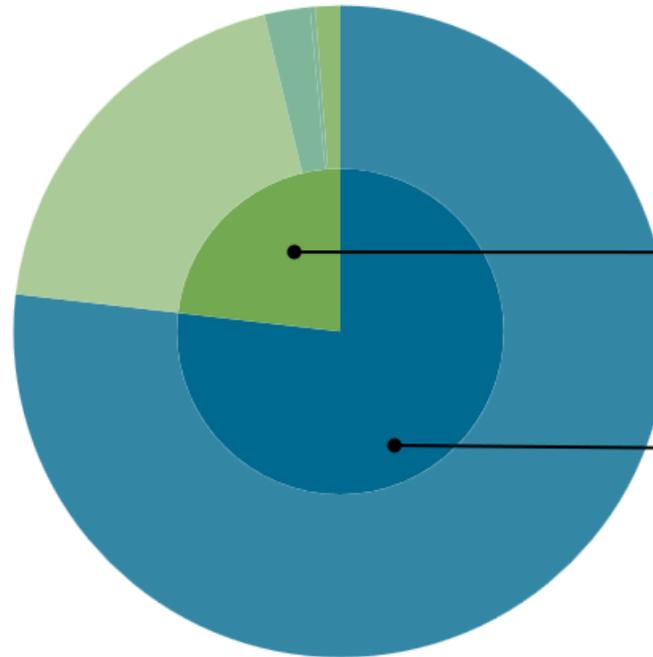care WITHOUT CARBON

Where are we now...

Five years of progress:
Our NHS Carbon Footprint Plus

NHS Carbon Footprint (our direct emissions): this includes buildings energy, travel, waste, water and medical gases – and accounts for around 23% of our total carbon footprint.

NHS Carbon Footprint Plus (direct + indirect emissions): indirect emissions these make up the remaining 77% of our carbon footprint (62,000 tCO2e), and include emissions from medicines, medical equipment, our supply chain and other areas.

NHS Carbon Footprint: 18,754 tCO$_2$e

NHS Carbon Footprint Plus: 80,000 tCO$_2$e

23%
Direct Emissions

19%
Building Energy

1%
Fleet & Business Travel

<1%
Water and waste

2%
Anaesthetic gases & metered dose inhalers

77%
Indirect Emissions
Medicines, Medical Equipment and Other supply Chain, Personal Travel

Our refreshed Green Plan will include a greater focus on our indirect emissions and strategies to identify, measure, monitor and reduce emissions in line with the Net Zero 2045 Carbon Footprint Plus commitment. Clinical leadership and integration will be key for delivery here.

The figures for the Carbon Footprint Plus have been provided by the Greener NHS team and represent the contribution from ESHT to the Carbon Footprint Plus for 2019/20. More information about the approach to carbon footprinting developed by the Greener NHS team can be found in
https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(20)30271-0/fulltext

10

Five years of progress: our NHS Carbon Footprint

The Trust's carbon footprint has fluctuated significantly since our baseline year of 2019/20 (see next page for further narrative).

In 2024/25 our carbon footprint was 18,754 tCO2e – an overall reduction of 3% (634 tonnes CO_2e) since 2019/20.

Key infrastructure upgrades at Eastbourne District General Hospital (EDGH) completed during 2024/25 are expected to deliver significant carbon savings from 2025/26 onwards.

These works, delivered through the Public Sector Decarbonisation Scheme (PSDS), included improved insulation, the installation of solar PV, and a new air source heat pump. The insulation and solar PV elements are already providing ongoing reductions in gas and grid electricity use. The heat pump was only brought online in the final month of 24/25 with reductions anticipated for 2025/26.

This shift from gas to electricity for heating at EDGH has the potential to significantly reduce emissions, as the grid decarbonises over time and in line with government targets.

Legend:
- Fossil Fuels
- Purchased Electricity
- Business Mileage
- Trust Fleet Mileage
- Water and Waste Water
- Waste
- Metered Dose Inhalers
- Anaesthetic Gases
- ····· Target
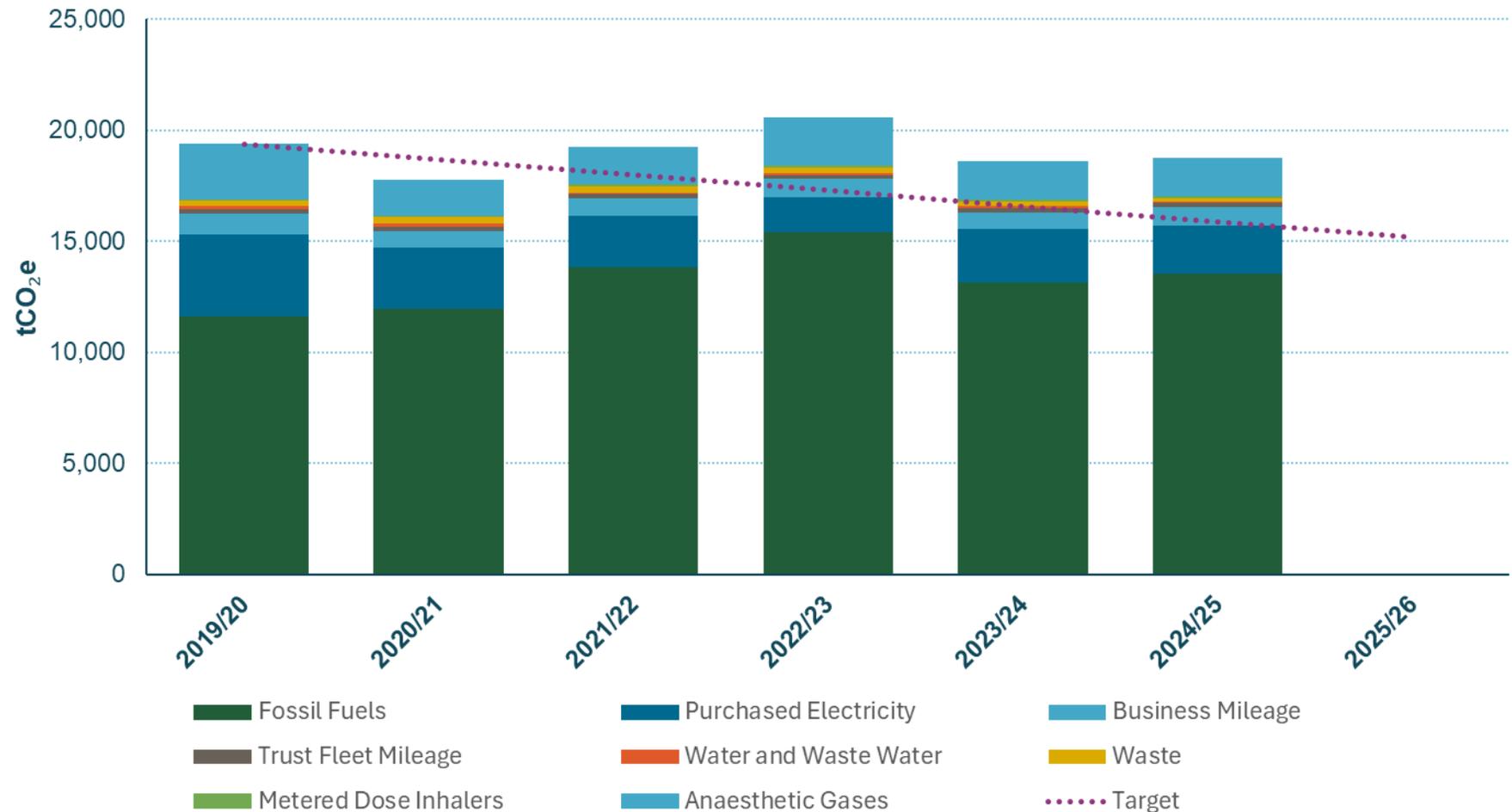
Five years of progress: our NHS Carbon Footprint

When looking at carbon emissions in the context of service delivery, a more nuanced picture can be seen.

This graph maps tCO2e per FTE for the trust over time (compared to the absolute emissions figures). Here we see a 22% reduction in emissions since our baseline year (compared to 3% in absolute terms).

The significant dip in 2020/21 is a result of COVID – with bounce back in the following years as service resumed to pre-covid levels.

This demonstrates while service delivery over that time has grown significantly, we have become much more efficient from a carbon perspective, delivering care with significantly lower emissions per staff member.

It highlights the genuine progress and impact of embedding sustainability within operations, even if overall reductions appear modest.

Change in Carbon Footprint adjusted for workforce growth

- % change against baseline year (tCO2e)
- % change against baseline year (tCO2e/FTE)
- Trendline % change against baseline year (tCO2e)
- Trendline % change against baseline year (tCO2e/FTE)
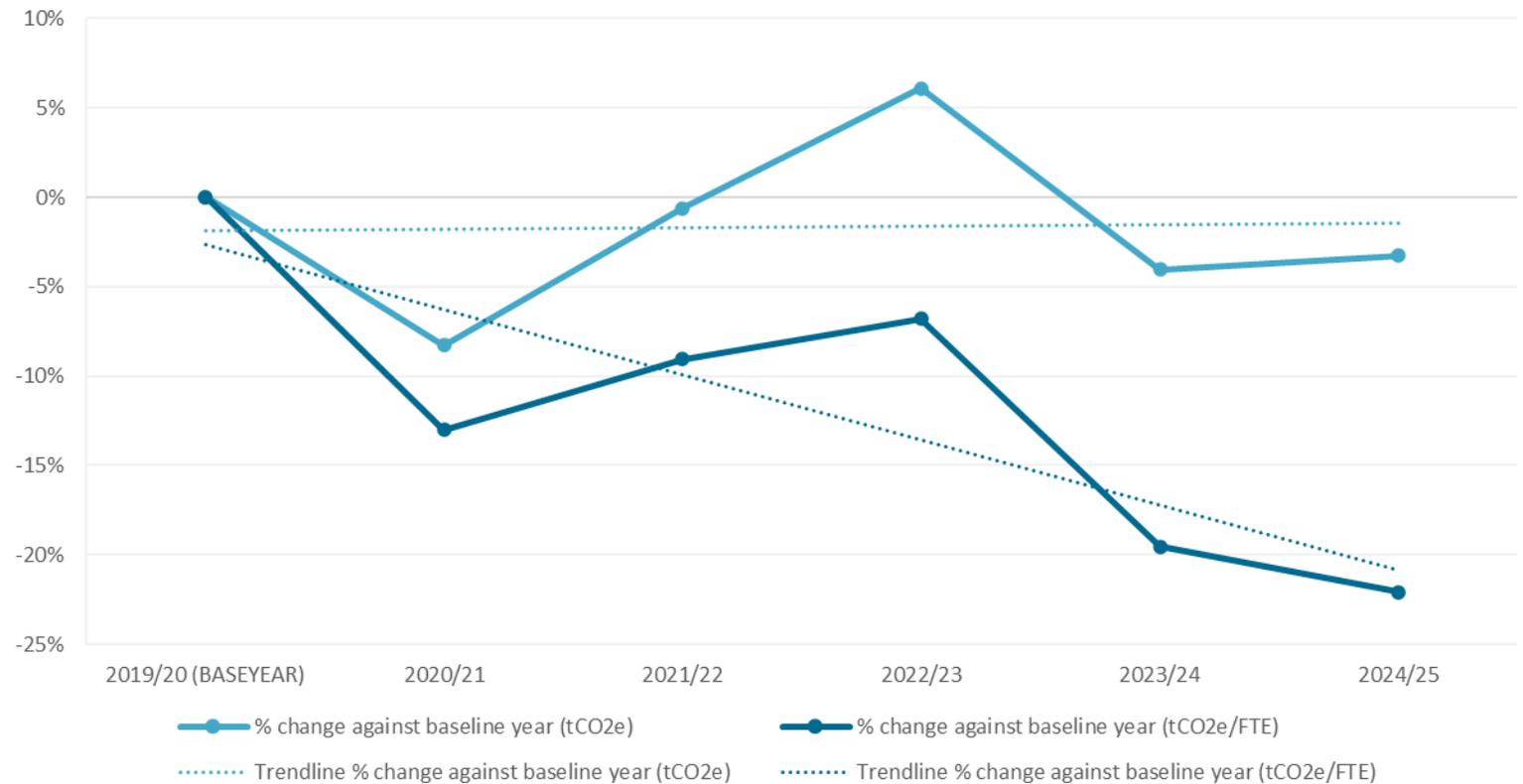
Reduced our overall pollution by

114
tonnes CO_2e

Add extra text here if possible to match the other stats

Generated savings estimated at

30k pa.

As part of the National Energy Efficiency Fund, Sussex providers received £200k for installation of LED lighting in 2024/25, generating savings estimated at £30k pa.

Complete
Net Zero hospital

Net Zero hospital upgrade at EDGH: new heating, solar panels, and refabrication **generating 1M kWh and saving 4,100 tCO_2e yearly.**

We installed
2000
square metres of double glazing at EDG

Add extra text here if possible to match the other stats

Changes will save
4,100
tonnes of carbon every year

Changes to Eastbourne District General will save 4,100 tonnes of carbon every year.

5 years of progress
Since our baseline year of 2019-20 we have...

We recycled
140
tonnes of cardboard

Add extra text here if possible to match the other stats

We recycled
87
tonnes of scrap metal

Add extra text here if possible to match the other stats

We saved over
9200
journeys for patient observations.

Rolled out Virtual Wards, expanding remote monitoring, testing and virtual hubs—supporting 3,200+ patients, reducing hospital stays and saving 9,200 journeys

Anaesthetic gas emissions reduced by
50
tonnes CO_2e per month

Eliminated desflurane use across theatres, reducing anaesthetic gas emissions by **50 tonnes CO_2e per month, versus 2019 peak usage.**

Introduced
Digital travel maps

Introduced **digital travel maps** for staff, supporting sustainable commuting choices and reducing travel emissions.

Five years of progress:
Case studies

Healthier lives

Streamlined processes and pathways

Respecting resources

Travel & Wellbeing Maps

The transport and wellbeing teams worked together to create **interactive Google Maps** for **Eastbourne DGH and Conquest Hospital.**

The maps aimed to support staff wellbeing and active, low carbon travel by highlighting cycle storage facilities, bus stops, EV chargers, walking routes, and wellbeing areas. Publicised through staff intranet and highlighted to new starters during inductions.

The benefits:

- Supports staff experience, wellbeing, and retention through easier access to facilities.
- Promotes healthier, more active commutes and breaks for staff.
- Helps **reduce car travel** and associated carbon emissions.

Virtual Wards

We expanded use of virtual wards at ESHT to provide "hospital at home" care through a mix of remote monitoring, digital tools, and in-person support.

As part of the programme, we introduced point-of-care testing and integrated multidisciplinary virtual hubs. **4,500+ patients** have been supported at home since launch, avoiding or shortening hospital stays.

The benefits

- Improved patient outcomes: maintained independence, reduced deconditioning and infection risk.
- Estimated **3.18 tCO$_2$e saved per year** from reduced travel alone.
- Lower hospital pressures and costs through fewer admissions and greater clinical efficiency.

Decarbonising EDGH

During 2024, we delivered a large-scale decarbonisation project funded by PSDS and working with Veolia, Salix Finance & Carbon and Energy Fund.

Ageing gas-fired systems at Eastbourne District General Hospital were replaced with a **4.8 MWth air source heat pump** and upgraded insulation, cladding, and glazing. We also installed a **1.1 MWp solar PV** array above the car park, supplying clean on-site electricity.

Among the **UK's first renewably heated hospitals,** EDGH is now "Net Zero ready."

The benefits:

- **~4,100 tCO$_2$e cut per year and 1 million kWh renewable power** generated annually.
- Improved patient and staff comfort with stable, efficient heating.
- Reduced exposure to gas price volatility and future carbon costs

Workstream	Evolving Care	Places	Journeys	Circular Economy
Progress to 2025/26	*Developing and enabling lower carbon and more sustainable models of care.*	*Ensuring Trust places are low carbon and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors.*	*Ensuring the transport and travel that links care and communities is low cost, low carbon and conducive to good health and wellbeing.*	*Respecting health and natural resources by creating an ethical and circular supply chain*
	+	**~**	**~**	**>**

Workstream Highlights

Evolving Care
- **Desflurane eliminated** Trust-wide, reducing medical gas emissions by **23% (481 tCO₂e)** from baseline.
- **Nitrous oxide manifold removal (2024/25)** replaced piped systems with efficient bottled supply; projected savings **up to 1,500 tCO₂e/year**.
- **Audits** identified major N_2O wastage; action plans now reducing leaks and venting.
- Plans for **integrated gas-capture systems** to cut volatile anaesthetic emissions by **up to 90%**.
- **Virtual Wards expanded** 56 → 100 beds, reducing travel, admissions, and acute bed pressure.
- **Point of Care Testing** and **elastomeric pumps** cut specimen transport and daily visits.
- **Remote-first pathways** in dietetics and diabetes; face-to-face only when clinically needed.
- **Updated surgical pathways** enabling early discharge and remote monitoring.
- **Unscheduled Care Navigation Hub** (with SECAMB) helps reduce avoidable admissions.

Benefits: significant carbon savings, fewer emissions-intensive procedures, faster care, improved patient experience.

Places
- Delivered the **£28m PSDS Net Zero Carbon Programme at EDGH**, including major insulation upgrades, air-source and water-source heat pumps, and a **~1MW solar car-port array**, delivering **over 4,000 tCO₂e annual savings**.
- Early reductions already seen in energy use, with further savings expected as low-carbon systems fully embed.
- Continued targeted **energy reduction work**, including audits to address unexplained gas consumption at EDGH and Conquest.
- Progressed the **EDGH borehole project** to reduce mains water demand and improve resilience.
- Improved **infrastructure resilience**, including new standby generators for critical plant and clinical areas.
- Enhanced **biodiversity and outdoor spaces**, creating greener, more therapeutic environments with partners such as Plumpton College and Green Gym.
- Expanded nature-positive practices including **No Mow May** and improved habitat management.

Benefits: substantial carbon and cost savings, better building performance, and healthier green spaces for patients and staff.

Journeys
- Continued expansion of **agile working** and **remote consultations** to avoid unnecessary journeys.
- **Sustainable Travel Strategy** developed, prioritising EV infrastructure and active travel.
- **EV chargers installed** at EDGH for staff use, with expansion planned for fleet and visitors.
- **Hybrid pool car fleet expanded**; record uptake by community teams.
- **Improved commuting data** via enhanced parking permit system.
- **Google MyMaps travel guides** created for all main sites.
- **Travel roadshows** delivered and **Active Travel Champions** network established.
- Partnership engagement with **bus operators and car-share initiatives**.
- Travel emissions reduced **45–54%** since baseline year.

Benefits: improved fleet efficiency, reduced mileage costs, improved staff experience, better data for planning.

Circular Economy
- **802 items reused in 2024/25** saving £95,500
- Non-clinical recycling increased **26% → 33%**; pushing towards **40%** target.
- **Clinical waste segregation targets met** (60/20/20).
- **Conquest compactor** reduced collections from 6/week → 1/week, saving **~£30k/year**.
- **65.4 t scrap metal**, **79 t cardboard**, **989 pallets** recycled.
- **Reusable sharps project** saved **103,815 kg CO₂e** and **40 t plastic**.
- **Food waste to AD** expanded to plated waste; 100% food waste at key sites now converted to renewable energy.
- **80% grounds waste retained onsite** through mulching.
- **Vape recycling** introduced; **surgical instrument refurbishment** pilot underway.
- **10% Net Zero weighting** applied to all procurements; CRPs obtained for >£5m contracts.
- **Carbon hotspot analysis** completed for targeted procurement action.

Benefits: major cost avoidance, reduced waste disposal needs, improved recycling infrastructure.

What's needed to meet our 2025 targets?

- 🟢 Current activity or resource sufficient.
- 🟡 Additional activity or resource needed.
- 🔴 Significant activity or resource needed.
- ⚪ Target in review or not yet measured

Key Green Plan 2022 targets

Evolving Care	Places	Journeys	Circular Economy
🟡 Clinical sustainability specialist in place and delivering change programmes across 3 services by 2024	🟢 Reduce building emissions by 57% by 2025/26	🔴 Reduce measurable travel emissions by 57% by 2025/26	⚪ Reduce total annual waste production (by weight) by 10% by 2025/26
🟡 SHCP ICS & NHS providers integrate sustainable healthcare principles at strategic level with delivery programme in place.			🟡 Achieve 40% nonclinical waste recycling.
			🟢 Achieve 60% low temperature incineration, 20% alternative treatment, 20% high temperature incineration

Progress Key — On track for 2025 **+**   Making progress **>**   Requires focus **~**

Workstream	**Culture**	**Wellbeing**	**Climate Adaptation**	**Partnerships & Collaboration**
	Empowering and engaging people to create change to progress towards Net Zero	*Supporting people to make sustainable choices that enhance their wellbeing*	*Building resilience to our changing climate in Sussex*	*Enhancing impact by working with others*
Progress to 2025/26	>	>	~	+

Workstream Highlights

Culture
- Regular sustainability communications across internal channels.
- Participation in national campaigns: **Travel Smarter September**, **Clean Air Day**, **Recycle Week**.
- Sustainability embedded into **business cases**, **inductions**, **interviews**, and new **e-learning**.
- **Values & Behaviour Charter (2025)** launched, reinforcing resource stewardship and waste reduction.
- Accompanying **Toolkit** developed for teams.
- Revised **Envoy Programme** ready to launch, starting with waste-focused action.
- New **"Living the Trust Values" Award** includes sustainability as a key criterion.

Benefits: stronger staff engagement, consistent culture, increased sustainability literacy.

Wellbeing
- **Three-year Wellbeing Strategy** developed, aligned with People Promise.
- Routine review of **NHS Staff Survey** results to target action.
- Achieved **Silver 'Wellbeing at Work' Accreditation** with sustainability integrated.
- **Wellbeing Boards** rolled out Trust-wide.
- **Green travel & wellbeing maps** created to highlight walking routes, cycle points and rest spaces.
- Campaigns promoting reusable bottles, hydration points, smoke-free sites and reduced plastics.
- Programmes including **Couch to 5K**, walking groups, and physical activity challenges.
- Work progressing on **flexible working improvements** and self-rostering pilots.
- Continued enhancement of outdoor/indoor staff spaces (courtyards, staff areas).

Benefits: improved morale, healthier behaviours, better staff retention.

Climate Adaptation
- Partnership with **ICS and CWC** to develop a **risk-based adaptation approach**.
- Reviewed **ICS Climate Change Impact Assessment** to identify estate, service and supply-chain vulnerabilities.
- **Climate Change Risk** added to **Corporate Risk Register** with Board oversight.
- **CWC-led working group** developing the Trust's **Climate Resilience Strategy**.
- Work underway to map **patient/service vulnerabilities** to site risk assessments for prioritised CCRAs.
- **Viability assessments** completed at four sites for passive and adaptive measures.
- **Ventilation modelling** carried out to prepare for higher summer temperatures.
- Findings feeding into **Business Continuity** and **EPRR** updates.

Benefits: improved service continuity, informed capital investment, reduced operational risk.

Partnerships & Collaboration
- Strong collaboration with **NHS Sussex** through the **Together to Zero** system plan.
- ESHT Green Plan aligned to the **Care Without Carbon model**.
- Participation in regional sustainability webinars and ICS campaigns.
- Collaboration with local authorities, transport partners and community groups on air quality and travel initiatives.
- **Green Plan Steering Committee** provides structured oversight and reporting to Executive Committee and Board.
- New **QI programme** integrating sustainability into improvement work.
- Procurement aligned with **Net Zero Supplier Roadmap** and **Procurement Act 2023**.
- Sustainability being embedded into **clinical, estates, digital, and procurement strategies** by 2025.

Benefits: shared expertise, coherent system delivery, stronger influence and improved resource use.

What's needed to meet our 2025 targets?

Culture	Wellbeing	Climate Adaptation	Partnerships & Collaboration
🔴 100% of Trust staff engaged with sustainability	🟡 Reduce sickness absence rate to 3% and improve staff survey results relating to Wellbeing	🟡 Undertake a climate impact assessment and integrate findings into our business continuity procedures and longer-term strategic health planning	🟡 Deliver >3 projects up to 2025 in partnership with other organisations.
		🟡 Climate Adaptation is considered throughout business processes and service planning	⚪ Speak at >3 events up to 2023 in support of collective action by healthcare organisations

Key:
- 🟢 Current activity or resource sufficient.
- 🟡 Additional activity or resource needed.
- 🔴 Significant activity or resource needed.
- ⚪ Target in review or not yet measured

Progress Key — On track for 2025 **+**   Making progress **>**   Requires focus **~**

The next five years...

The next five years...

How the context for delivery has changed

Following a successful first phase delivering on our Green Plan, we're now moving into our second phase in a new context within the NHS.

Despite significant coordinated action and support at trust, system and national level, recent funding cuts and changes have brought new uncertainty to the deliverability of Green Plan programmes across the country.

At ESHT, we have been particularly impacted by the review of the New Hospital Programme, and the cessation of the government-backed Low Carbon Skills Fund and Public Sector Decarbonisation Fund in favour of the Clean Power 2030 programme, which will focus funding on decarbonisation of the national grid.

With no access to external grant funding for large scale carbon decarbonisation projects, plus critical infrastructure needs of £300m across our estate, we must find a new approach to capital funding for projects supporting emissions reduction and climate adaptation to ensure we can continue to meet the needs of our patients in the short, medium and long term.

Where we'll focus our efforts in this next phase of Green Plan delivery

In light of this, it becomes ever more important to integrate sustainability into our day-to-day at ESHT. We know that around 80% of our carbon footprint is determined by clinical decision making, and in fact our estate makes up only around 10% of our total carbon footprint.

The next phase of our work will see an increased focus on integrating sustainability into our clinical practice through a newly identified clinical lead for sustainability, development of our Evolving Care workstream and supported governance.

In addition, the development of our new QI programme provides a great opportunity to support the integration of sustainable healthcare principles into projects and decision making across the trust.

With tools and sustainability expertise provided through our Care Without Carbon team, we'll continue to work in partnership with others locally to find collaborative solutions, economies of scale and share best practice. In this way we can ensure we can deliver best value for our patients and drive change as efficiently as possible.

Better Care Together for East Sussex.

Our Green Plan: our approach through Care Without Carbon

This Green Plan aims to support delivery of our Trust vision – in the context of climate change.

care WITHOUT CARBON

We spark change in healthcare; collaborating to protect health, our environment and create lasting value for our NHS.

NHS East Sussex Healthcare NHS Trust

High quality care and experience for our patients, colleagues and communities.

Our strategic approach

Quality:
Delivering safe care; always improving outcomes and experience for patients

People:
Fostering a positive culture; living our values; helping our teams feel equipped to deliver

Sustainability:
Always searching for the best way to use our resources for clinical, workforce and financial outcomes

Our Green Plan aims

1. **Reduce our emissions** to Net Zero Carbon by 2040/45

2. **Adapt our services and buildings** to the impacts of climate change

3. **Address the targets** within the Environment Act 2021

Sustainable Healthcare Principles

Healthier lives
Making use of every opportunity to help people to be well, to minimise preventable ill-health, health inequalities and unnecessary treatment, and to support independence and wellbeing.

Streamlined processes and pathways
Minimising waste and duplication within the Trust and wider health system to ensure delivery of safe and effective care.

Respected resources
Where resources are required, prioritising use of treatments, products, technologies, processes and pathways with lower carbon, environmental and health impacts.

We deliver this using our 7 elements

- Sustainable Clinical Practice
- Partnerships & Collaboration
- Places
- Culture
- Journeys
- Circular Economy
- Climate Resilience

Our Green Plan: key objectives, priorities and targets

Deliver clinical services that are more sustainable

We will establish clinical sustainability leadership, working groups and supporting governance/reporting and target reductions in **medical gases** (Nitrous Oxide and Entonox).

We will prioritise **clinical teams with highest carbon impact** to support sustainability integration including pharmacy, surgical/critical care pathways and community/virtual ward programmes in the first instance.

Reduce the pollution from **nitrous oxide** use or wastage by **47%** by 2030/31 (potential to stretch further here)

By 2027 develop SMART targets for our three next **priority areas**: **medicines**, **clinical consumables** and **prevention.**

Enhance the efficient and responsible use of our NHS estate

We will deliver our Net Zero Roadmap estates projects, while preparing *shovel-ready* **capital projects** to move quickly on external funding.

We will prioritise **installing EV charging infrastructure** to enable **fleet transition** and develop a **Sustainable Travel Plan** by Dec 2026

Reduce energy emissions by at least **47%** by 2030/31.

Sustainable Travel Plan in place by **Dec 2026 & 100%** Zero-emission fleet by 2030/31.

Implement practices that minimise waste, optimise reuse, and reduce our indirect emissions

We will target a **reduction in single-use medical equipment and consumables** over the next 3-5 years.

We will build capacity, tools and resources within **procurement** to enable integration of sustainability into high impact contracts.

We will enhance **food and catering** to cut emissions and improve health.

Reduce waste emissions by at least **47%** by 2030/31.

Set a target to reduce NHS **Carbon Footprint +** emissions by **2027**

Adapt to the impacts of climate change, enhancing resilience and well-being

We will develop a Trust level **Climate Risk & Vulnerability Assessment** to identify risks and help us build infrastructure and service climate resilience.

Climate Adaptation Plan developed by **2027/28**

Embed sustainability principles into our day-to-day practices culture

We will **engage with staff** (Board to frontline) and develop workforce capability with a focus on staff supporting high priority Green Plan activity.

Increase **staff understanding of sustainable healthcare** by **10%** by 2030/31

Specialist training delivered to top **five priority teams** by 2027.

Maintain focus on partnership working to support integration and maximise trust benefit

We will **integrate sustainability into trust decisions including through cQI programme and capital planning processes.**

We will continue to **work in partnership with others locally through Care Without Carbon** to maximise impact and efficiency, and share best practice.

Each year, all key **strategic improvement projects** to integrate sustainable healthcare principles and an identified sustainability metric.

Getting to Net Zero:
our Roadmap to 2030-31

In line with the Health and Social Care Act 2022, our Green Plan target is to achieve net zero for our direct emissions by 2040 against a baseline year of 19/20.

The first interim target set by NHSE is a 47% reduction by 2028-32.

Set out here is as follows:
- Actual emissions included from our baseline year of 19/20
- In 2024-25, the Trust produced 18,951 tCO_2e from direct emissions. This represents a 0.6% reduction (116 tCO2e) since the 2019-20 baseline, and a 1.9% (353 tCO2e) increase compared to the previous year.
- Proposed target line in red based on achieving the interim target by end 2030/31.
- Green shaded areas lines show the possible carbon reductions through confirmed and potential mitigation projects, categorised by deliverability risk (see next slide for project details).

This target date is set to be ambitious but deliverable based on the projects identified through our heat decarbonisation plans. Given capital constraints across the system, however, many of the projects identified would require external funding through mechanisms such as the now terminated PSDS.

Legend:
- Confirmed Mitigations
- Low risk potential mitigations
- Medium risk potential mitigatios
- High risk potential mitigations
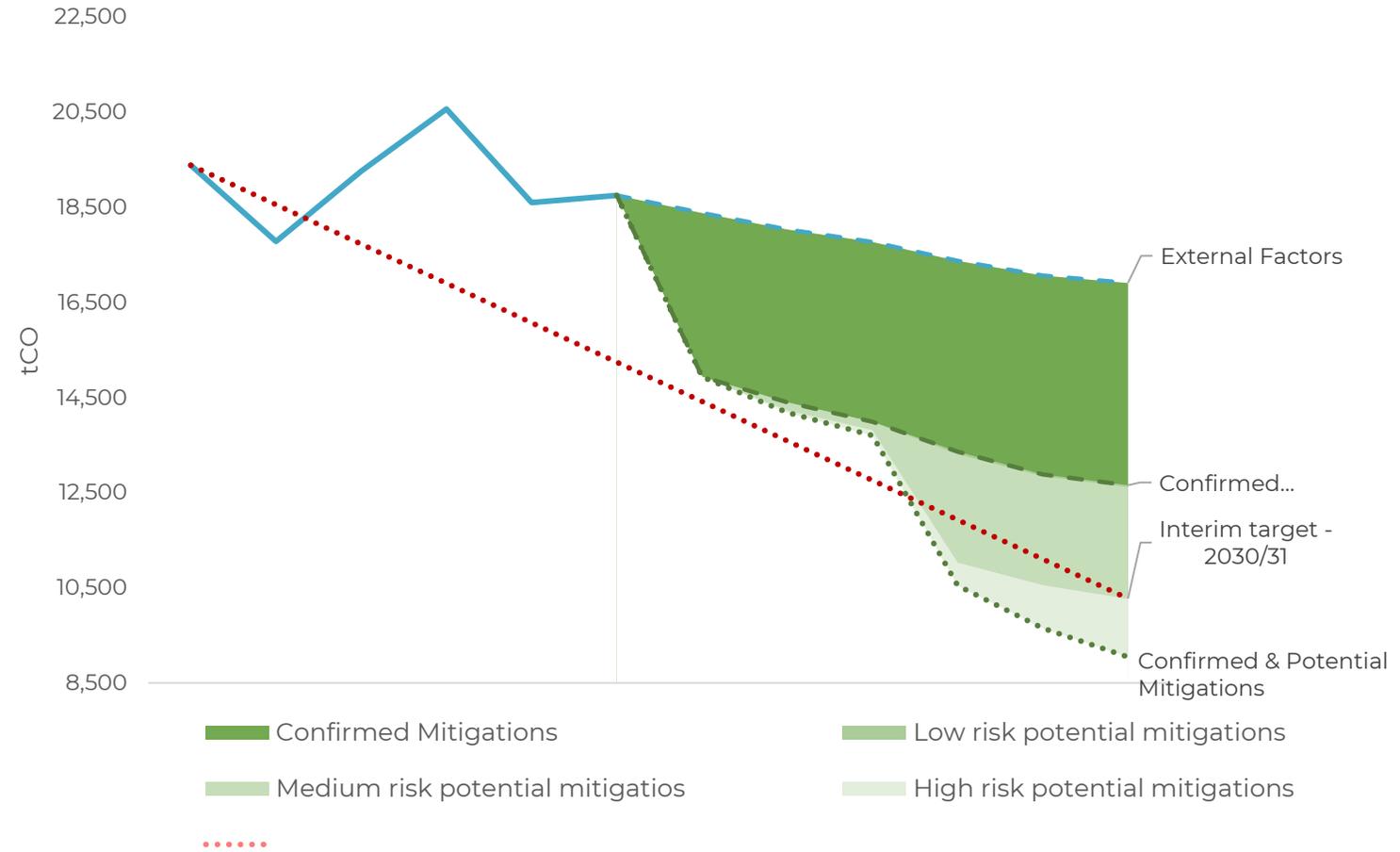
Achieving the target would require the delivery of all confirmed, low-risk and medium-risk potential mitigation projects. Savings projected from the EDGH Net Zero Hospital project would have to be maintained – reverting to boilers/CHP for heating would ensure the 2030/31 is not met.

Confirmed mitigations are those projects which have recently been completed but not yet captured as part of the Trust's annual carbon footprint reporting, or projects which are in progress.
Potential mitigations relate to those projects that have been identified but have yet to be worked up into detailed designs or funded.
Currently, the modelling only includes mitigations up to, and including, 2030/31.
*Savings from external factors include expected grid decarbonisation and transition to EVs

Getting to Net Zero: Delivery Plan

Between 2024/25 and 2028-2032, the Trust must reduce emissions by 8,478 tCO2e.

An estimated 1,840 tCO2e is expected to be saved through external factors*.

The table opposite shows an outline list of project opportunities for delivery over the next 5 years.

Delivering all of the confirmed and potential mitigation projects listed is estimated to reduce the Trust's footprint by 7,866 tCO2e, on top of the savings through external factors.

Legend

External factors	
Confirmed Projects	
Potential Projects – Low Risk	
Potential Projects – Medium Risk	
Potential Projects – High Risk	

TOTAL SAVINGS TO MEET 2030/31 TARGET: 8,478 tCO2e

	Carbon reduction project	Workstream	Carbon Savings (tCO2e)
	Expected savings from external factors: including grid decarbonisation and national EV transition		**1,840**
Confirmed Projects	EDGH - Air Source Heat Pump	Places	3,550
	Nitrous Oxide Reduction Project (Manifold Decomissioning)	Sustainable Clinical Practice	704
	TOTAL confirmed carbon reduction projects		**4,255**
Potential Projects	EDGH - Endoscopy Net Zero Works	Places	38
	EDGH - Decomission Steam Network	Places	2,100
	Entonox Reduction Project (Maternity)	Sustainable Clinical Practice	166
	Conquest - Solar PV - Car Park	Places	65
	EDGH - Solar PV - Roof Mount	Places	12
	Sal Sac Lease Scheme electrification	Journeys	7
	Conquest - Fabric improvements	Places	749
	Fleet transition to EVs	Journeys	165
	Conquest - VT zone controls	Places	132
	Other sites (All works)	Places	128
	Decarbonisation of NHSPS sites (assuming 47% of baseline by 2032/33 trajectory)	Places	49
	TOTAL potential carbon reduction projects		**3,611**

Getting to Net Zero: Funding challenges

Currently, carbon reduction works are delivered through a mix of internal and external capital funding. Recent changes to external grant funding have altered the landscape for delivery against our NZ Roadmap. The main routes for funding are:

- **Public Sector Decarbonisation Scheme (PSDS):** This external funding – which was used to support the EDGH decarbonisation project - has now come to a close with no alternative sources currently available to aid fabric improvements and low carbon heating installations.

- **National Energy Efficiency Fund (NEEF) and GB Energy:** This funding is used to support some types of energy efficiency and renewable power projects such as LEF lighting and solar PV.

- **Public Private Partnership (PPP) models:** There are plans to reintroduce private finance models to support Trust's with their decarbonisation goals.

- **System funding for larger scale projects such as District Heat Networks:** similar to the Worthing Heat Network project. Access to projects like this is likely to be reduced as a result of funding cuts to sustainability at system/ICB level.

This shift in the funding landscape makes it more important than ever to integrate sustainability into day-to-day business across the trust. Our estate makes up less than 20% of our full carbon footprint – other areas of work will need more focus to support delivery of our Green Plan targets for the benefit of our patient community.

From an estates perspective, we will need to focus on:
- Integrating sustainability into capital business cases to measure impact of other projects coming forward.
- Identifying projects which have co-benefits and dovetail with our critical infrastructure needs.
- Be prepared with projects ready to go should funding opportunities such as NEEF come up in the year.
- Work with our partner trusts in Sussex and further afield to explore alternative funding mechanisms e.g. PPP and other models.

Net Zero Roadmap: NHS Carbon Footprint Plus

Our NHS Carbon Footprint Plus includes both our direct and our indirect emissions.

Indirect emissions include those from medicines, medical equipment, patient and visitor travel, supply chain etc. In 24/25 our total NHS Carbon Footprint Plus was estimated as 80,000 tCO2e. Of this total, our indirect emissions accounted for around 62,000 tCO2e - 77% of our total footprint. As such, this will be a key area of focus over the next five years.

The chart shows our estimated NHS Carbon Footprint Plus (indirect emissions only) over the last five years, along with the trajectory required to meet our Net Zero target in 2045/46 and a breakdown of emissions sources. This is based on data for the NHS as a whole from the recently published "Five years of a greener NHS: progress and forward look" (see Appendices 1 and 2 for more detail on methodology). The graph shows a considerable fluctuation over the last five years, with a significant increase during the pandemic.

Reducing our NHS Carbon Footprint Plus indirect emissions will be a key focus for this Green Plan. We are currently supporting development of an NHSCF+ Strategy at system level. This will be followed by a detailed Trust level Delivery Plan which will more accurately measure our impact, set detailed interim targets and identify the key projects required to deliver over the next five years to 2030.

Legend: Estimated Emissions — Target .... Interim target o Trajectory to NZ ....
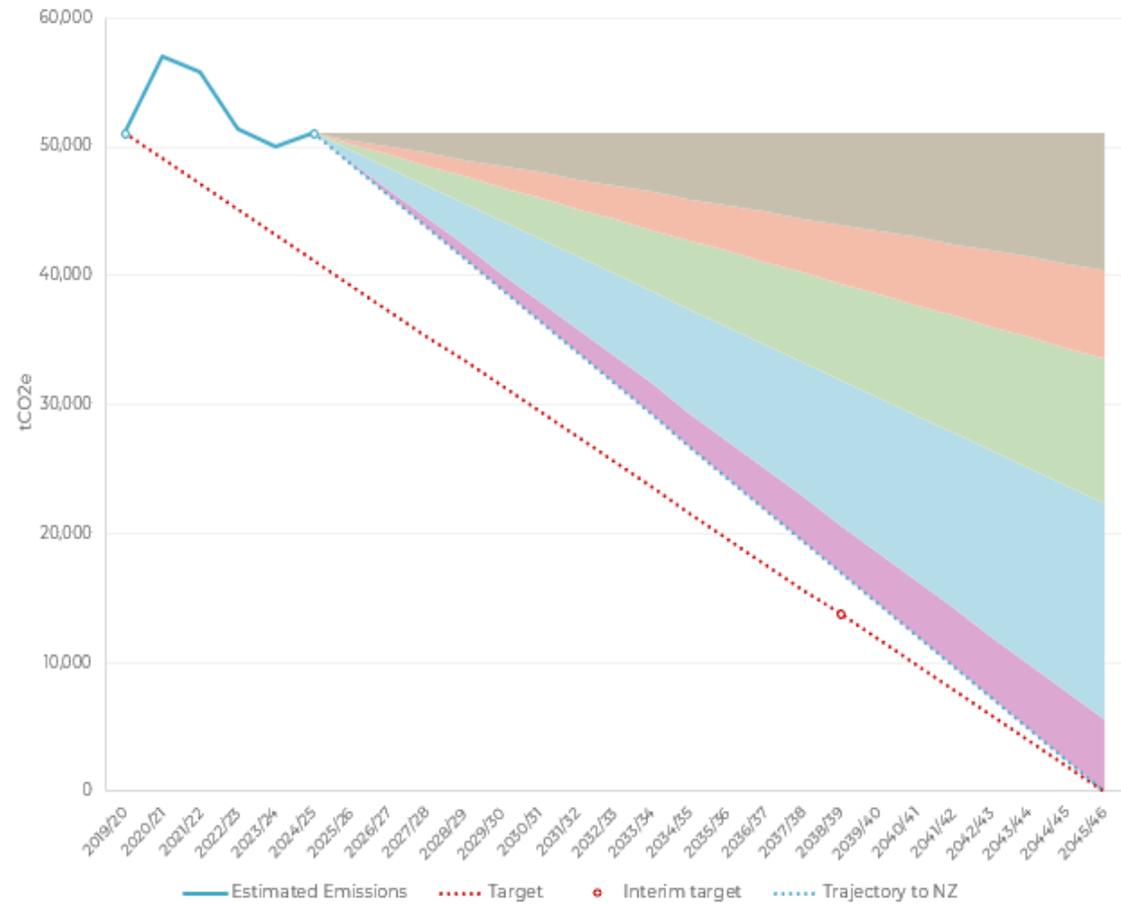
Medicines and prescribing	21%	Other supply chain	33%
		Physical and digital infrastructure	12%
Personal travel	13%	Other supplies and services	9%
Staff commute	6%	Equipment	6%
Patient travel	6%	Food and catering	4%
Visitor travel	1%	Corporate and administrative services	2%
Medical supply chain	22%	Non-NHS commissioned services	11%
Clinical consumables	12%	Voluntary and independent organisations	6%
Clinical equipment	10%	Personal and continuing care	5%

Delivering against our 'have regard to' duty:
Integrating sustainability into our evolving QI programme

Why this matters now

Given current funding and frontline challenges, key to the next phase of this Green Plan will be integrating sustainability into our day-to-day decision making at ESHT.

This aligns with our legal duties to consider sustainability in decision making across the trust.

In line with this, the Green Plan is currently a Trust-wide strategic objective.

Our evolving CQI programme at ESHT is also a great opportunity to deliver on this, with trust-wide reach. The timing for this means we can integrate sustainable healthcare principles into the programme at early stages, including consideration wrt our strategic domains and QMS.

With few internal or external capital funding routes currently available, embedding sustainability into existing programmes like CQI is one of the most practical and impactful ways to drive change.

Opportunities for Integration

Based on discussion with Simon Dowse and Chris Hodgson, opportunities include:

Embedding in tools and training:
- Add sustainability prompts into CQI staff training and project workshop toolkits.
- Pilot use of the Sustainable Healthcare Impact Assessment Tool in project workshops.

Project selection:
- Encourage project leads to reflect on sustainability co-benefits when identifying and prioritising CQI projects.

Governance & reporting:
- Map where the Green Plan fits within the evolving CQI structures and reporting processes.
- Use CQI meetings and early deployment phase to refine approach.

Healthier lives — 45%
Staff, Patients, Community

Streamlined processes & pathways — 31%
Streamlined pathways, Climate change disruption, Travel, Lean processes

Respecting resources — 28%
Resource use, Supply chain resilience, Travel
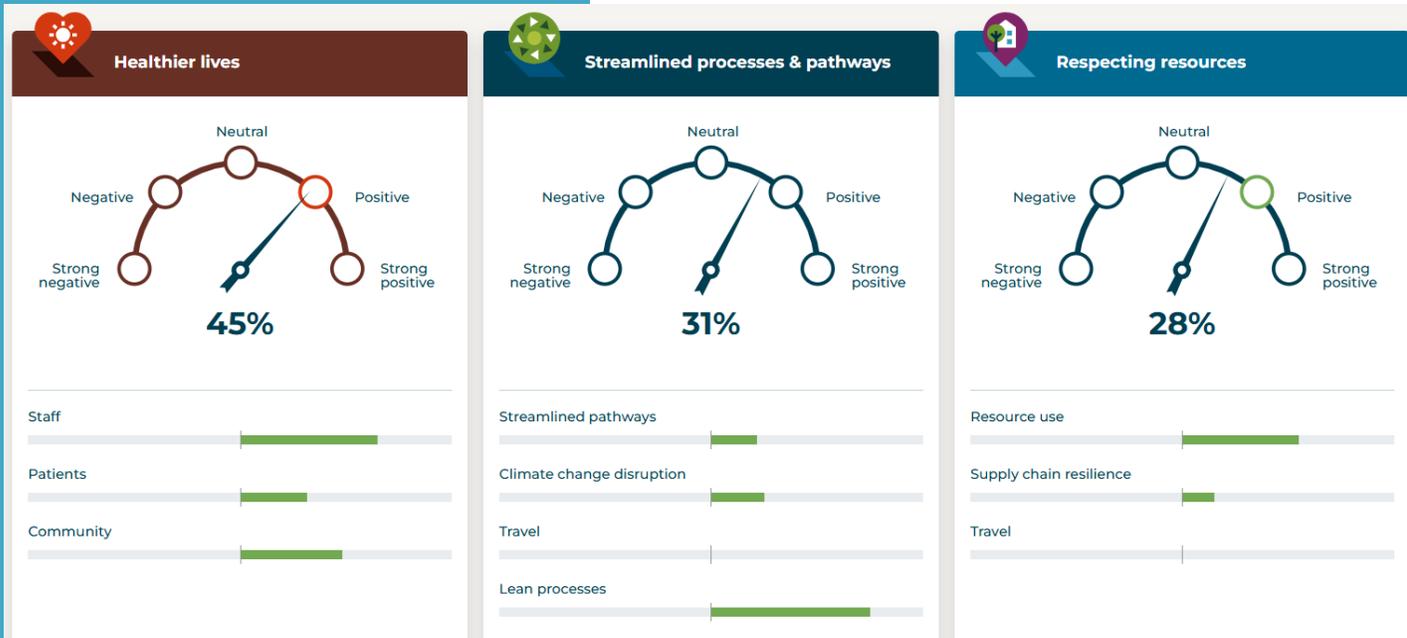
How we'll deliver

How we'll deliver:
our seven workstreams

Our core Green Plan objectives are delivered through seven workstreams. A high level summary of each workstream is provided in the following pages.

Our seven elements are:

Sustainable Clinical Practice: Transforming our community care to support health, reduce inequalities, and protect our shared environment

Circular Economy: Respecting our health and natural resources by creating an ethical, resilient and circular supply chain

Places: Ensuring our places are low carbon and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors.

Journeys: Connecting care and communities through travel that is low carbon, cost-effective inclusive and conducive to good health and wellbeing

Culture: Empowering staff to deliver more sustainable healthcare and improve health outcomes

Partnership & Collaboration: Optimising delivery and enhancing our impact through collaboration

Climate Resilience: Strengthening resilience to our changing climate in Sussex

Sustainable Clinical Practice

Transforming clinical care to support health, reduce inequalities, and protect our shared environment.

Trust Lead: Justin Harris

Key success measures:

- **Each year**, all key strategic improvement projects to integrate sustainable healthcare principles and an identified sustainability metric.

- Reduce the pollution from nitrous oxide use or wastage by **47%** by 2030/31 (compared to 2019/20 baseline)

- Reduce the travel pollution associated with delivery of clinical care by **47%** by 2030/31 (against a 2019/20 baseline).

- **By 2027** develop SMART targets for our three next priority areas: medicines, clinical consumables and prevention in line with NHS 10 Year Plan and Net Zero Carbon Footprint Plus trajectory.

Approach

With around 80% of our carbon footprint determined by clinical decisions, it's critical we're delivering our clinical care in the most sustainable way possible. This element responds explicitly to this, aiming to integrate sustainability into the fabric of the organisation through our clinical services. In this way we can support health, target inequalities, and reduce our impact on the environment.

As a provider of hospital and community care, our priority areas are eliminating medicines wastage (including anaesthetic gases), reducing unnecessary travel and the harmful impacts from air pollution on vulnerable communities, switching to reusables from single-use items, and shifting from treatment to prevention.

Our approach to tackling these areas is:

- **Integration** - Integrating our core sustainable healthcare principles into clinical projects, governance and change processes and ensuring ongoing clinical leadership.

- **High impact projects** – Maximise our impact by delivering projects supporting pollution-reduction and more sustainable healthcare in priority areas.

- **Engagement, support and training for clinical staff** – Providing dedicated clinical sustainability support for teams.

- **Progressively strengthening our approach** - ensuring our interventions are as effective as possible by maintaining our understanding of key impact areas and continuously evolving our approach in line with new and emerging evidence.

Commitments

We will **reduce the pollution** and environmental impact associated with the care we provide, **integrating sustainability** into the way our services are designed and delivered.

We will **support our clinicians** to apply our sustainable healthcare principles, **enabling sustainable choices** that are good for patients and our shared environment.

Sustainable Clinical Practice

Transforming clinical care to support health, reduce inequalities, and protect our shared environment.

Trust Lead: Justin Harris

Key success measures:

- **Each year**, all key strategic improvement projects to integrate sustainable healthcare principles and an identified sustainability metric.

- Reduce the pollution from nitrous oxide use or wastage by **47%** by 2030/31 (compared to 2019/20 baseline)

- Reduce the travel pollution associated with delivery of clinical care by **47%** by 2030/31 (against a 2019/20 baseline).

- **By 2027** develop SMART targets for our three next priority areas: medicines, clinical consumables and prevention in line with NHS 10 Year Plan and Net Zero Carbon Footprint Plus trajectory.

Priority areas	Project delivery to commence in Y1-Y2:	Y2-5 Project delivery to include:
Integration into clinical processes	**Sustainable Healthcare Impact Assessment (SHIA):** Working with transformation and digital teams, integrate SHIA and sustainability metrics into key organisational projects (e.g. Virtual Wards, Enhanced Recovery Pathway) and our health inequalities work.	
High impact projects	**Anaesthetic gases:** Continue our work to measure and reduce nitrous oxide waste and pollution by implementing solutions with our Maternity teams. Following our success in eliminating the use of highly-polluting gases desflurane and isoflurane, we will continue to review the use of medical gases in our operating theatres and maternity department, harnessing opportunities to reduce wastage and switch to alternatives (e.g. total intravenous anaesthesia, gas capture systems). **Inhalers:** Building on the success from our respiratory teams, we will utilise our Greener Inhaler resources, Sussex formulary, and NICE guidelines to adopt more sustainable inhaler prescribing practices elsewhere in the organisation. **Clinical Travel:** Building on the success of our virtual wards and virtual clinics projects, we continue to work with our top travel teams to reduce their environmental impact whilst improving patient outcomes, access and staff wellbeing. **Medicines:** Develop and implement a programme of work to tackle wastage of medicines, eliminating unnecessary environmental and financial costs. This will include encouraging more sustainable prescribing in high-impact areas through specific projects (e.g. EPMA, oral nutritional supplements, anti-microbials), development of a target in line with NZCF+ trajectory, and application of the Greener Pharmacy Toolkit. **Priority pathways:** Building on our work with anaesthetics colleagues, support completion of focussed projects in our high carbon pathways (e.g. surgery and critical care) to provide more sustainable care.	**Sustainable food:** Continue to improve access to healthy food (e.g. more plant-based options) for patients to support their nutrition and recovery. **Reusable clinical consumables and equipment:** Support the reduction of single-use waste by working with clinical and corporate teams including IPCC to develop and deliver an approach for switching to re-usable items (e.g. reusable tourniquets). **Green spaces:** Consider how we can support the shift from treatment to prevention and reduction in inequalities and restoration of natural assets by reviewing opportunities for implementation of green spaces projects in support of nature-based care.
Engagement, support and training	**Support for clinical staff projects:** Provide practical support and guidance for clinical staff through our toolkits, specialist guidance (e.g. GreenED) and hosting staff drop-in sessions.	**Clinical sustainability networks:** Encourage peer-to-peer support across clinical networks. **Clinical capacity:** Identify key roles and responsibilities within clinical departments that support delivery in priority areas with protected capacity e.g. champion for re-use.
Progressively strengthening our approach	**Governance:** Identify a Clinical Lead for Sustainability and commence our Sustainable Clinical Practice Working Group to continue to prioritise clinical teams for project delivery. **Developing our in-house knowledge:** Continue to use and learn from specialist sustainability guidance on treating the conditions of the patients we care for (e.g. Green Surgery checklist) **Carbon Footprint Plus Delivery Plan:** Engage with key clinical stakeholders to finalise and agree approach to and targets for medicines, switching to reusables and other aspects of our indirect emissions reductions.	**Health Inequalities:** Explore opportunities that target key sustainability and health inequalities issues (e.g. air pollution, benefits of social prescribing and green spaces, fuel and food poverty, overheating homes, access to active and sustainable travel) and develop a target and actions to respond to these.

Circular Economy

Respecting our health and natural resources by creating an ethical, resilient and circular supply chain.

Trust Lead: Kevin Hodge

Key success measures:

- 47% reduction in CO2 emissions related to our waste by 2030/31 from a 2019/20 baseline.

- Full compliance with the requirements of the Net Zero Supplier Roadmap, including the Net Zero and Social Value Model.

- Identify our three priority supply chain categories (e.g. IT Hardware) and develop SMART targets for each before 2027 in line with the Health & Social Care Act and Net Zero Carbon Footprint Plus trajectory.

Approach

Our use of products and services to provide healthcare contributes to the largest part of our carbon emissions and impacts the health of workers, their communities and nature. To avoid pollution, protect nature and improve health, we will keep products and materials useful for longer by creating circular systems of reuse, repair and recycling. We will work with our suppliers and collaborate with other healthcare providers to create a net zero carbon, resilient and reliable supply chain that reduces costs and adds value to our patients and communities.

Commitments

- We will work closely with our suppliers to significantly reduce the environmental impact of our supply chain, ensure resilience and improve the health and wellbeing of the people and communities supporting it.

- We will keep products and materials useful for longer by creating circular systems of reuse, repair and recycling; whilst reducing waste

Purchasing & Supply Chains: We will reduce pollution from our **supply chains** and assess the risk of climate, health and nature impacts from the products and services we use.

End of use: We will **redistribute** and **recycle** more; reducing cost and generating income; and **dispose** of the remaining items in a way that reduces harm to health and the environment.

Products & Services: We will **reduce** unnecessary products and packaging, remove single use items where practical and increase the **reuse** of products.

Circular Economy

Respecting our health and natural resources by creating an ethical, resilient and circular supply chain.

Trust Lead: Kevin Hodge
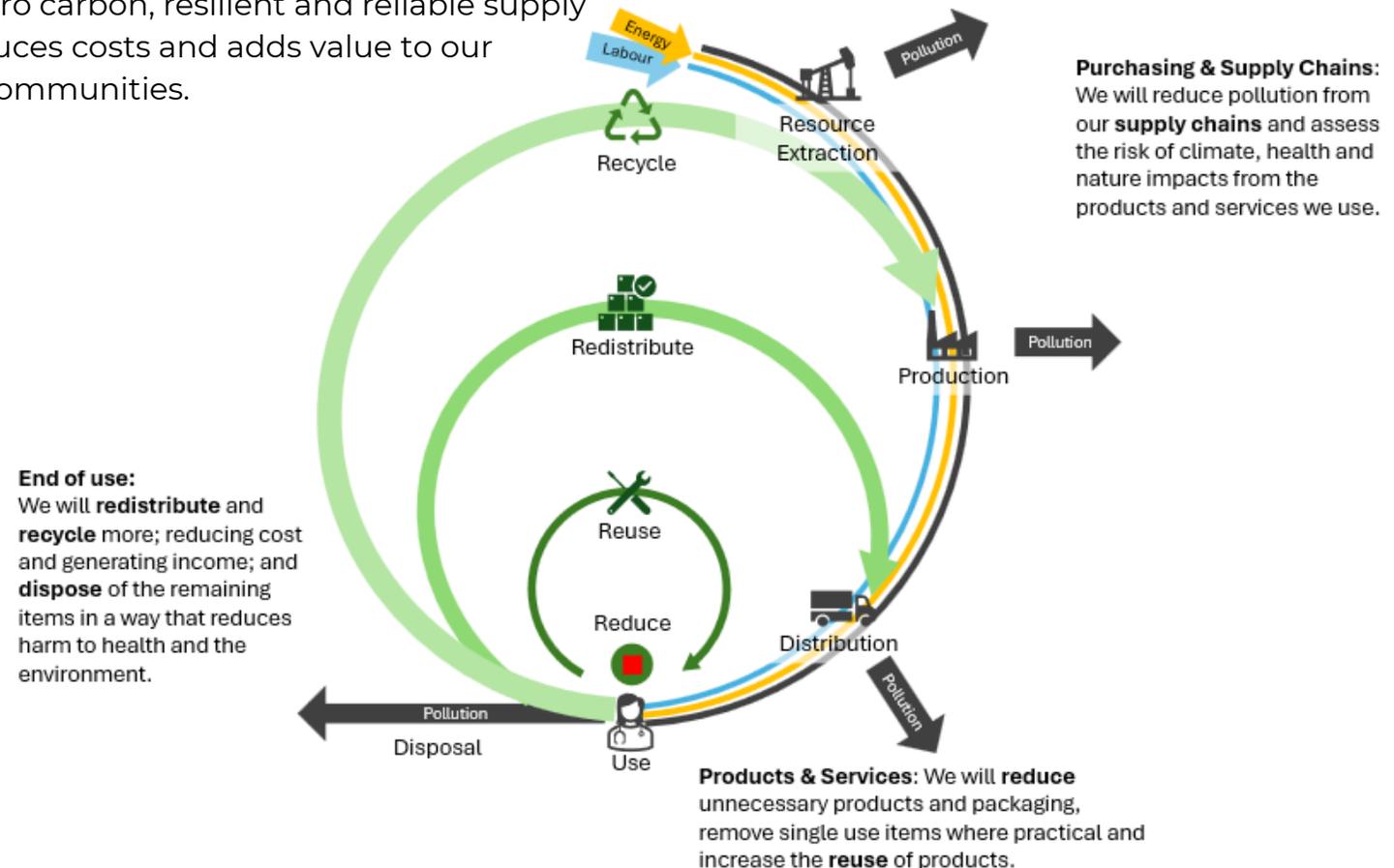
Key success measures:

- 47% reduction in CO_2 emissions related to our waste by 2030/31 from a 2019/20 baseline.

- Full compliance with the requirements of the Net Zero Supplier Roadmap, including the Net Zero and Social Value Model.

- Identify our three priority supply chain categories (e.g. IT Hardware) and develop SMART targets for each before 2027 in line with the Health & Social Care Act and Net Zero Carbon Footprint Plus trajectory.

Priority areas	Y1-2 Project delivery to include:	Y2-5 Project delivery to include:
Purchasing and supply chains	**Procurement policy and key contracts:** Continue to improve procurement processes and policies to align with the NHS Net Zero Supplier Roadmap and Net Zero & Social Value requirements. Focus delivery support on priority contracts and procurements that support our NZCF+ Delivery Plan projects (see below).	**Training:** Upskill procurement teams, suppliers and staff with local toolkits, regional and national resources, webinars and procurement forums to: ensure adherence to the Net Zero supplier roadmap; effectively manage sustainability KPIs through contracts; and include consideration of climate and nature-related risks and opportunities (years 2-5). **Supply chain risk:** Through the Climate Resilience workstream we will assess and develop a plan to mitigate the most significant risks to our supply chains from climate change and the degradation of natural systems (years 2-5).
Products and Services	**Net Zero Carbon Footprint Plus (NZCF+) Delivery Plan:** Based on the NHS Sussex NZCF+ strategy, produce a Delivery Plan to achieve our NZCF+ targets, identify three priority product areas for pollution reduction (e.g. food) and set targets for each area. **Consumables – reduce and reuse:** Work with other healthcare providers to develop and deliver an approach for switching to re-usable items and reduce paper usage, to cut whole life costs and pollution.	**Sustainable food:** Measure our sources of food waste in line with NHS standards, set targets and implement interventions to reduce waste, costs and pollution. Introduce more healthy food options (e.g. by providing more plant-based options), developing plans to adopt a "greener by default" approach to catering whilst contributing to improved patient health and recovery (years 2-5). **Digital hardware:** Reduce the pollution associated with our digital hardware by extending the product lifespan of our assets, considering refurbished kit and improving our digital maturity assessment score (years 2-5).
End of use	**Healthcare waste segregation:** Continue to work with clinical staff to monitor and improve our healthcare waste segregation through a programme of training, signage and staff engagement. Maintain the 60%:20%:20% ratio for healthcare wastes in line with the NHS clinical waste strategy. **Waste disposal:** Develop our approach to ensure we meet or maintain our key waste targets: total waste reduction of 20% by 2030/31, zero waste to landfill for all waste streams, and 65% recycling rate before 2030/31. **Collaboration**: Continue to work collaboratively with healthcare providers on delivering a circular economy for healthcare across Sussex and Surrey; to innovate, achieve targets and maximise the benefits of the collaborative waste contracts procured in 2026/27.	**Re-use platforms and approaches:** Building on our existing work in this area, work with local partners to share our learning and improve the reuse of unwanted furniture, equipment or supplies both internally and within Sussex and Surrey (years 2-5). **New recycling streams:** Continue to identify and implement opportunities for reuse or recycling of high-volume items such as textiles and mattresses through innovation and external partnerships (years 2-5).

Places

Ensuring our places are low carbon, resilient and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors

Trust Lead: Adrian Knight

Key success measures:

- Reduce emissions from our estate by 47% by 2030/31, in line with NZC targets, from a 2019/20 baseline.

- Increase the proportion of our electricity generated on site from renewable sources across our estate, by 2030/31.

- Increase biodiversity and improve staff/patient access to green spaces at each of our freehold sites, sites by implementing at least 2 interventions annually until 2030/31.

Approach

Our estate plays a key role in delivery of our core Green Plan aims, with emissions from the electricity, gas and water used in our buildings making up almost 85% of our direct emissions. It's also an area we have already made good progress towards our decarbonisation targets. Our estate also provides a key opportunity to support patient and staff wellbeing through improving green spaces and biodiversity.

As such, our approach is as follows:

- **Efficient use of our estate:** ensure we're using our estate as efficiently as possible, minimising the amount of energy we consume in our buildings and making use of more energy-efficient equipment.

- **Heat decarbonisation:** transitioning away from fossil-fuel based heating systems to low carbon alternatives and reducing heat demand.

- **Renewables:** installing on-site renewables generate energy for use within the buildings we occupy.

- **Biodiversity and green spaces:** Consider how we can support the shift from treatment to prevention and reduction in inequalities through smarter use of our green spaces.

A key enabler for this workstream will be heat decarbonisation; reducing our reliance on fossil fuels for heating and hot water and transitioning to low carbon solutions.

The workstream promotes smarter use of space and green infrastructure across sites, ensuring environmental goals are integrated into estate planning and management

Commitments

- We will minimise energy and water consumption across our estate.

- We will cut our carbon emissions in line with the national NHS Net Zero Carbon (NZC) targets.

- We will improve our green spaces to better support wellbeing through resilience, nature connection and biodiversity.

Places

Ensuring our places are low carbon, resilient and protect local biodiversity whilst supporting wellbeing for staff, patients and visitors

Trust Lead: Adrian Knight

Key success measures:

- Reduce emissions from our estate by 47% by 2030/31, in line with NZC targets, from a 2019/20 baseline.

- Increase the proportion of our electricity generated on site from renewable sources across our estate, by 2030/31.

- Increase biodiversity and improve staff/patient access to green spaces at each of our freehold sites, sites by implementing at least 2 interventions annually until 2030/31.

Priority areas	Y1-2 Project delivery to include:	Y2-5 Project delivery to include:
Planning and delivery	**Estates Processes:** Embed sustainability and climate resilience principles into Estates planning, governance and decision-making. **Net Zero Building Standard:** Ensure all new builds and major refurbishments meet the NHS Net Zero Carbon Building Standard and achieve BREEAM Excellent. **Net Zero Delivery Plan:** Review our NZ Delivery Plan each year and ensure all opportunities for energy efficiency, low carbon heating and renewables are integrated into our capital programme, identifying external funding to support delivery and measuring the impact of carbon reduction projects. **Project Pipeline:** Maintain a pipeline of sustainability-focused, shovel-ready projects to maximise funding and delivery opportunities. **Business Cases:** Apply sustainability and resilience assessments to all capital projects and E&F business cases to maximise carbon, nature and adaptation benefits.	
Efficient use of our estate	**Data Monitoring:** Continue to strengthen monitoring and reporting of energy and water consumption across the estate.	**Estates Rationalisation:** Review opportunity to integrate sustainability into and deliver estates rationalisation projects to optimise space and reduce energy and cost demands. **Water-efficient technologies:** Identify and implement technologies and improve metering to cut consumption and leakage.
Heat decarbonisation and renewables	**Low-Carbon Heating:** Continue to transition from fossil-fuel heating systems to low-carbon alternatives across the estate. **Renewables:** Expand on-site renewable energy generation (including emerging technologies), exploring battery storage and smart controls.	**Collaborative Heating:** Collaborate with partners on Local Area Energy Plans and opportunities for district or communal low-carbon heat networks.
Biodiversity and green spaces	**Green Spaces:** Enhance green spaces and tree coverage to support wellbeing, biodiversity and climate resilience, with measured impact. **Sustainable Grounds Management:** Adopt practices that improve biodiversity and reduce environmental impact	

Co-benefits:
- **Cost savings:** Efficiency, rationalisation and renewables reduce long-term operational costs.
- **Healthier environments:** Improved air, thermal comfort and access to nature benefit patient and staff wellbeing.
- **Greater resilience:** Low-carbon heating, smart controls and renewables strengthen service continuity during disruptions.
- **Enhanced biodiversity:** Greener sites support nature recovery and local ecosystem health.
- **Future-proof estate:** Modern, efficient buildings meet national standards and reduce future retrofit burden.
- **Stronger reputation:** Visible environmental improvements reinforce trust and leadership in sustainable healthcare.

Journeys

Ensuring the transport and travel that connects our care and our communities is low carbon, cost-effective, inclusive, and conducive to good health and wellbeing.

Trust Lead: Kieron Pelling

Approach

East Sussex Healthcare NHS Trust provides a wide range of acute and specialist services across a large catchment area, meaning travel is an essential part of how we deliver care. Although business and fleet travel account for only around 5.3% of our direct carbon footprint, the emissions and pollution associated with staff commuting and patient and visitor journeys are far greater. Our practical, people-centred approach will make travel cleaner, fairer and more accessible for staff, patients and visitors. We will ensure sustainable travel options remain inclusive and affordable, avoiding financial or practical barriers to care or employment. As such, our three priority areas are:

- **Optimise essential travel:** Embed digital care and redesign pathways

- **Minimise non-essential travel:** Support smarter working through hybrid and remote collaboration

- **Make every mile cleaner, healthier and lower carbon:** Enable low-carbon commuting and business travel, prioritising active, shared and zero-emission modes
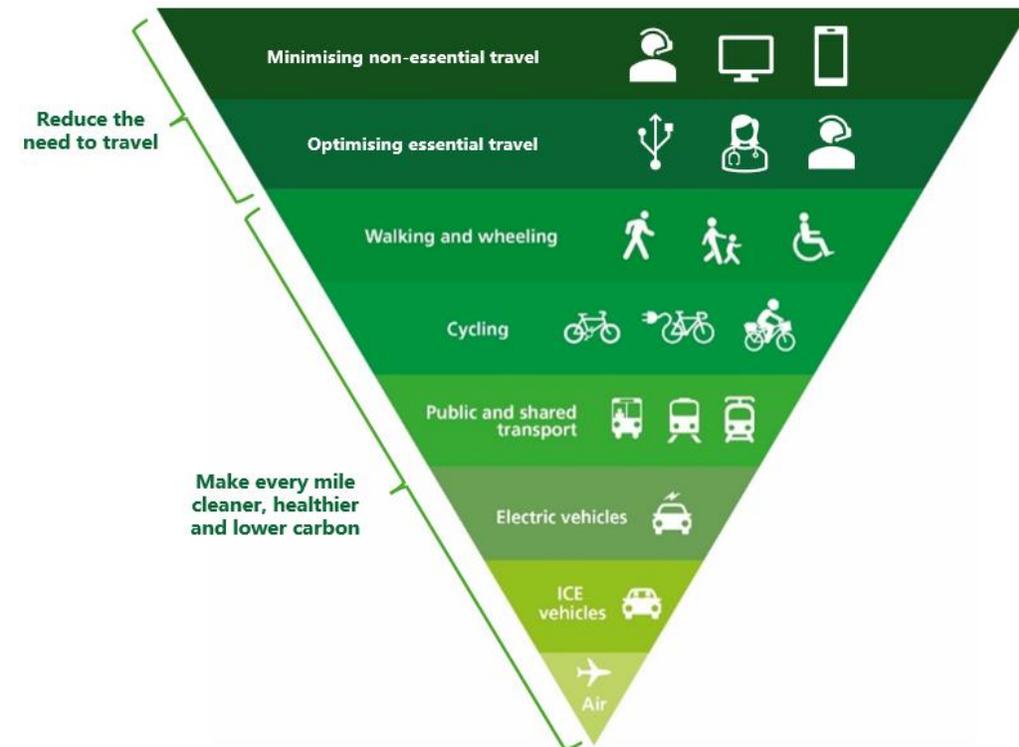
Through this integrated approach we can reduce travel demand while improving access and experience for patients, staff and visitors.

Commitments

We will design our services to **optimise essential travel** and **minimise unnecessary travel** for staff, patients and visitors, making access to care simpler, fairer and more sustainable.

We will transition to a **Zero-emission fleet** and **enable low-carbon travel choices**, cutting pollution, improving health and reducing costs.

We will work with our partners, staff and communities to **embrace digital, active and shared travel solutions** that deliver wider health and sustainability benefits.

Reduce the need to travel
- Minimising non-essential travel
- Optimising essential travel
- Walking and wheeling
- Cycling
- Public and shared transport

Make every mile cleaner, healthier and lower carbon
- Electric vehicles
- ICE vehicles
- Air

Journeys

Ensuring the transport and travel that connects our care and our communities is low carbon, cost-effective, inclusive, and conducive to good health and wellbeing.

Trust Lead: Kieron Pelling

Key success measures:

- **47%** reduction in business travel emissions by 2030/31 (against 19/20 baseline)

- **39%** reduction in staff commute emissions by 2030/31 (against 19/20 baseline)

- The Trust will have a **100%** Zero-emission operational fleet by 2030/31

Priority areas	Y1-2 Project delivery to include:	Y2-5 Project delivery to include:
Make every mile cleaner (enable low-carbon commuting and business travel)	**Sustainable Travel Plan:** Develop a Sustainable Travel Plan by December 2026 that increases active, public and zero-emission travel, aligned with the Clean Air Hospital Framework. **Vehicle electrification:** Maximise electric vehicle use for staff travel by completing the transition to a 100% zero-emission operational fleet and expanding EV pool cars and e-bikes. **EV Charging Infrastructure:** Install sufficient EV charging infrastructure across the estate to support fleet electrification and staff, patient, and visitor EV use. **EV only Lease Scheme:** From December 2026, offer only zero-emission vehicles through salary-sacrifice schemes in line with NHSE requirements. **Staff Travel Survey:** Conduct annual staff travel surveys to understand behaviours, measure impact, and inform ongoing improvements.	**Patient & Visitor Travel:** Develop and implement a methodology for measuring patient and visitor travel and integrate this into Green Plan targets. **Shared transport solutions:** Explore collaborations with ICS partners and neighbouring public-sector organisations to share facilities and maximise cost efficiency and community value.
Optimise essential travel (digital care and service design)	**Digital Innovations:** Work with clinical and digital teams to identify and develop opportunities for digital care and smart technologies, such as virtual consultations, remote monitoring and route-planning tools, and measure their sustainability impact across clinical services.	
Minimise non-essential travel (smarter working)	**Smarter Working:** Support hybrid and remote working by providing staff with the tools, training and guidance needed for effective remote collaboration, improving estate use, reducing travel, and enhancing flexibility and wellbeing.	**Operational Fleet Optimisation:** Work with courier and estates teams to ensure the right vehicles are used, consolidate deliveries, and optimise route planning to reduce unnecessary travel and improve operational efficiency.

Co-benefits:
- **Air quality:** Reduced travel emissions improve local air quality and health.
- **Cost efficiency:** Smarter travel and zero-emission vehicles lower fuel and operational costs.
- **Patient outcomes:** Digital and efficient travel options improve access and timely care.
- **Staff wellbeing:** Active travel and hybrid working support healthier, more flexible work.
- **Service access:** Reduced travel barriers make it easier for patients to reach services.
- **Reputation:** Visible sustainability action strengthens our organisational credibility.
- **Recruitment and retention:** A modern, flexible and sustainable workplace helps attract and keep staff.

Culture

Empowering and engaging people to create change to progress us towards net zero.

Lead: Rachel Robinson

Key success measures:

- Increase in staff understanding of sustainable healthcare by 10% by 2030.

- Establish a network of CWC Envoys or similar by 2027.

- Specialist training delivered to top five priority teams by 2027.

Approach

Culture is one of our enabling workstreams, linking in closely with Partnerships and Collaboration and Sustainable Clinical Practice, and supporting delivery across the programme. Through this workstream we are aiming to embed sustainability into everyday practice through empowering our staff.

We do this by:

- **Increasing awareness:** Building awareness and understanding with staff to give them the confidence to act.

- **In-depth engagement**: Engaging with staff and patients in a focussed way to ensure most effective delivery of Green Plan programme activity.

- **Capability and capacity**: Enabling staff to acquire the necessary skills and support to deliver improvements in sustainable healthcare.

- **Integration into people processes:** Embedding sustainability into trust comms and engagement and our people processes and projects.

By working in this way, we're maximising our impact and improve health outcomes as quickly as possible within the resources available.

Commitments:

- We will engage with staff to promote a greater understanding of sustainable healthcare and support them to develop the skills to deliver improvements.

- We will support leadership with the confidence in championing the importance and relevance of sustainability in the context of current healthcare challenges.

- We will promote specialist resources, tools and best practice to inspire others, share learning and drive change.

Co-benefits: Engaged staff are happier staff, making recruitment and retention easier. Supporting innovations in care enables better patient outcomes, and more efficient use of resources**.**

Culture

Empowering and engaging people to create change to progress us towards net zero.

Lead: Rachel Robinson

Key success measures:

- Increase in staff understanding of sustainable healthcare by 10% by 2030.
- Establish a network of CWC Envoys or similar by 2027.
- Specialist training delivered to top five priority teams by 2027.

Priority areas	Y1-2 Project delivery to include:	Y2-5 Project delivery to include:
Increased awareness	**Green Plan refresh launch:** Develop comms to support updated Green Plan focussing on key messages and call to action for staff. **Communications and engagement planning:** Develop a comms plan to support delivery of this workstream. **Ongoing comms:** Sharing of relevant information via internal comms and CWC website blog posts on link between health and climate, sustainable healthcare, and the ability to make a difference. **Case studies:** Share good practice carbon reduction projects that also demonstrate co-benefits such as patient outcomes, staff wellbeing and cost.	**Bespoke campaigns:** Develop targeted campaigns focussing on enabling delivery of Green Plan activity.
In depth engagement	**Board and senior leaders awareness:** Develop an engagement programme to support leadership with the confidence to champion sustainability in the context of current healthcare challenges.	**Patient engagement:** Link into existing patient engagement mechanisms such as Sussex NZ Patient Engagement Group, to understand what matters to patients and accelerate project delivery. **Targeted engagement:** Liaise with priority teams to support action required for Green Plan delivery and develop bespoke campaigns as required.
Capability and capacity	**Envoy network:** Develop Envoy Programme, expanding from waste focus to build a Trust-wide network of clinical and non-clinical envoys to promote and integrate sustainability in support of the Green Plan, and contribute to the wider Sussex envoy network. **Engagement programme:** Roll out an in-depth staff engagement programme focussing on showing staff how to integrate changes into their day-to-day.	**Training:** Champion national Net Zero NHS e-learning. Review opportunity to integrate sustainability principles into existing training e.g. IPC and deliver specialised sustainability training to staff in priority areas. **Capacity:** Assess workforce capacity and skill requirements for delivering this Green Plan and develop approach to ensure deliverability.
Integration into people processes	**PDR and recruitment:** Review our PDR and recruitment processes and identify further opportunities to integrate sustainability). **Internal comms:** Integrate sustainability messaging into trust comms pieces e.g. highlighting sustainability as a co-benefit etc. **Conferences and events:** Develop a Sustainable Events Checklist, and consider how to integrate sustainability into agendas e.g. through presentations, stalls etc .	**Staff wellbeing:** Measure staff wellbeing impacts of Green Plan projects through the SHIA tool and integrate sustainability principles into staff wellbeing projects and processes. Staff awards: Ensure sustainability is reflected in categories for organisational staff awards.

Partnerships & Collaboration

Optimising delivery and enhancing our impact through collaboration

Trust Lead: Simon Dowse

Key success measures:

- Report annually on delivery of Green Plan requirements.

- Share learning from our Green Plan projects outside of East Sussex Healthcare Trust, covering each of our workstreams.

- Each year, all key strategic improvement projects to integrate sustainable healthcare principles and an identified sustainability metric.

Approach

We cannot achieve Net Zero Carbon working in isolation. Working collaboratively – both within East Sussex Healthcare Trust, across our system and more broadly – enables us to integrate into day-to-day business more effectively, maximising our impact and patient benefit.

In working together as NHS organisations we can share learning and reduce duplication, deliver joint projects that bring efficiencies of scale and communicate as one voice on sustainability to our patient community.

This workstream delivers on this through:

- **Optimisation and assurance of delivery:** focussing on effective governance reporting, risk management and prioritisation.

- **Integration:** making sustainability part of our every day at East Sussex Healthcare Trust by embedding sustainability principles into core processes and decision making.

- **Collaboration with external partners:** working in partnership with Sussex Integrated Care System partners through collaborative projects and approaches; and collaboration outside of Sussex including to learn from others and share our learning.

Commitments

- We will ensure **effective Green Plan delivery** through our governance processes, reporting, risk management and robust measurement.

- We will integrate and **embed sustainability principles** into core Trust processes and decision making.

- We will **collaborate with partners** outside of the trust to reduce duplication, share expertise and increase impact.

Partnerships & Collaboration

Optimising delivery and enhancing our impact through collaboration

Trust Lead: Simon Dowse

Key success measures:

- Report annually on delivery of Green Plan requirements.

- Share learning from our Green Plan projects outside of East Sussex Healthcare Trust, covering each of our workstreams.

- Each year, all key strategic improvement projects to integrate sustainable healthcare principles and an identified sustainability metric.

Priority areas	Project delivery commencing in Y1 (2026) to include:	Y2 (2027) onwards
Optimisation and assurance of delivery	**Prioritised action plan and reporting:** Develop, deliver and report against a prioritised Green Plan action plan and KPIs each year, with a focus on continuous improvement of our approach. **Team level carbon footprint reporting:** Support teams to know and understand their carbon footprint, encourage this to be incorporated into service business planning, QI projects. **NHS Carbon Footprint Plus Delivery Plan:** Based on the ICS Strategy in this area, develop Delivery Plan to tackle our indirect emissions, incorporate into Green Plan action plan and implement new targets to ensure delivery. **Risk**: Review requirements for climate risk reporting and integrate into organisational risk reporting structure as appropriate.	**NZ Roadmap to 2040:** develop NZ Roadmap to 2040 for direct emissions, working at a strategic level to ensure decisions made during the timeframe of this Green Plan do not preclude delivery **Sustainability reporting:** review opportunity for further integration of sustainability reporting into Trust-wide processes and governance
Integrating into core business / decision making	**Organisational strategy:** Integrate sustainability principles into Trust organisational strategy. **Integrating sustainability into Trust decision-making:** Develop and deliver an agreed programme to integrate sustainability into decision-making processes trust wide, using our SHIA tool. This should cover Trust strategic projects, strategy, QIA process, business cases, charity funding, policies etc. **Working with enablers**: Embed sustainability principles into estates, QI, Transformation and Digital team processes and training. **Task-related Financial Disclosures:** Improved completion of our climate related financial disclosures, and consideration of nature related financial disclosures submission as requirements develop.	
Collaboration with external partners	**System working**: Continue to collaborate with NHS Sussex and local partners on system-wide projects (e.g. e.g. virtual wards, re-use network) **Care without Carbon:** Continue to work through our specialist sustainability partners, Care Without Carbon, to maximise efficiency and ensure a joined-up approach. **Sharing our learning:** Share learning from our projects with other NHS organisations (e.g. through case studies on the CWC website, conferences etc) as well as relevant professional bodies and decision makers.	

Climate Resilience

Strengthening resilience to our changing climate in Sussex

Trust Lead: TBC

Key success measures:

- Climate risks and vulnerabilities across patients, services, estates and supply chains assessed by end 2026/27.

- Climate Resilience Plan developed by 2027/28.

Approach

Climate change is already impacting our patients and services at East Sussex. More frequent heatwaves, increasing air pollution and new health risks will continue to test the continuity of our services and change health needs over the coming years.

We're also becoming more aware of the dependence of our healthcare delivery on healthy natural systems and the impact of nature degradation. In particular, our supply chains are becoming increasingly impacted by ecosystem degradation and biodiversity loss, and closer to home our clean air, water and food.

Through our climate resilience workstream, we are proactively working to tackle these risks, aiming to maintain safe, effective, and equitable care, protect patient and staff health, and minimise disruption to services. Our approach is to:

Deliver quick wins: working with emergency planning and wider teams, implement immediate changes where we can e.g. EPRR, estates and governance.

Understand environmental risks and respond to them: assess climate and nature-related risks across our services, workforce and estate to identify vulnerabilities; develop a prioritised action plan which activates change and embeds within trust processes.

Collaborate with our system partners: to ensure a joined-up approach, work with others to improve preparedness and protect those most at risk.

In strengthening our resilience to climate and environmental change, we not only reduce risk but also realise wider benefits – from improved health outcomes to operational efficiencies – that enable us to continue caring for our patients now and in the years ahead.

Commitments

- We will protect and improve patient care and outcomes by understanding climate and nature-related risks to our services and communities.

- We will increase the resilience of our services, estates, and supply chains to ensure safe, equitable, and high-quality care in a changing environment.

Climate Resilience

Strengthening resilience to our changing climate in Sussex

Trust Lead: TBC

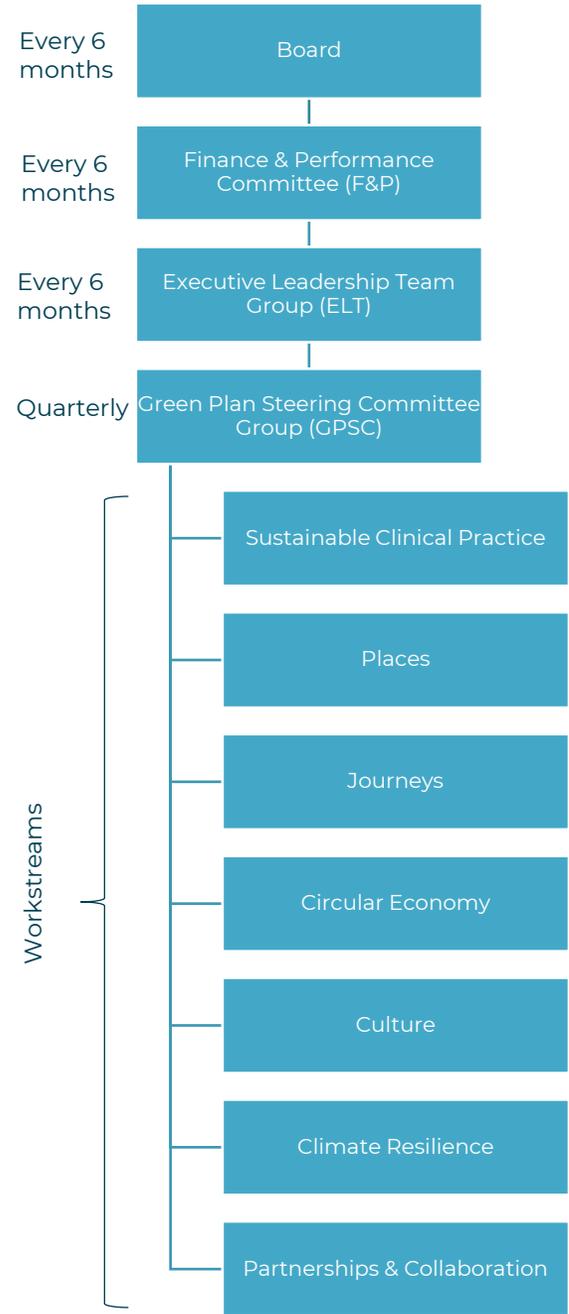| Priority areas	Y1-2 Project delivery to include:	Y2-5 Project delivery to include:
Deliver quick wins	**Monitoring & Surveillance:** Establish and enhance monitoring and surveillance of key estate and clinical/operational indicators (e.g. heat, PSIs etc). **Emergency Planning:** Ensure compliance with EPRR Core Standards for climate adaptation. **Governance**: Formalise our governance around climate resilience to support mitigation of Trust level climate risk. This should include a named Trust adaptation lead, working group and link into wider Trust level governance as appropriate.	
Understand environmental risks and respond to them	**Emerging evidence:** Continuously review emerging evidence on climate and nature-related risks, including socio-economic and demographic factors. **Climate Risk & Vulnerability Assessment:** Complete a high-level assessment of climate risks and vulnerabilities across sites, services, patients and operations, and embed findings into Trust strategic and risk frameworks.	**Climate Change Risk Assessment (CCRA):** Carry out detailed CCRAs for priority sites and services to quantify risks and identify mitigation measures. **Climate Resilience Plan:** Develop a Trust-wide Climate Resilience Plan covering estates, clinical services, supply chain and digital, and create a programme to deliver it. **Nature-related risks:** Review and agree approach to risk from wider environmental considerations following the principles of or use the Taskforce for Nature related Financial Disclosure (TNFD). **Planning in Resilience:** Embed climate resilience requirements into estates and capital planning, ensuring resilience measures are included at design stage. **Climate Resilience Training:** Deliver climate resilience awareness training for senior decision-makers and high-risk service leads.
System-wide collaboration	**Service Planning:** Work with system partners, including public health, to align risk management and service planning approaches.	**Local Collaboration:** Collaborate with local councils and partners to ensure climate-related strategies are aligned and mutually supportive.

Key success measures:

- Climate risks and vulnerabilities across patients, services, estates and supply chains assessed by end 2026/27.

- Climate Resilience Plan developed by 2027/28.

Co-benefits:
- **Improved patient safety:** Reduced climate-related disruptions help maintain safe, continuous care.
- **Better health outcomes:** Early action on heat, air quality and environmental risks protects vulnerable patients.
- **Operational resilience:** Fewer service disruptions and better preparedness improve day-to-day reliability.
- **Cost avoidance:** Proactive mitigation reduces expensive emergency responses and unplanned downtime.
- **Stronger estate performance:** Climate-ready buildings improve comfort, safety and efficiency for patients and staff.
- **Supply chain stability:** Anticipating climate and nature risks helps secure reliable access to essential goods.
- **Staff wellbeing:** Safer working environments during extreme weather protect staff health and reduce stress.
- **Equity and access:** Targeted resilience planning supports those most at risk from climate impacts.
- **Enhanced reputation:** Being a proactive, climate-resilient organisation builds trust with patients, staff and partners

Holding ourselves to account: governance and reporting

Every 6 months — Board

Every 6 months — Finance & Performance Committee (F&P)

Every 6 months — Executive Leadership Team Group (ELT)

Quarterly — Green Plan Steering Committee Group (GPSC)

Workstreams:
- Sustainable Clinical Practice
- Places
- Journeys
- Circular Economy
- Culture
- Climate Resilience
- Partnerships & Collaboration

Senior Responsible Officer for the ESHT Green Plan is **Simon Dowse, Director of Transformation, Strategy & Improvement.**

Delivery of the Green Plan is overseen through the **Green Plan Steering Committee (GPSC)**, chaired by Simon Dowse, Director of Transformation, Strategy & Improvement, as **Board Lead for Sustainability and Net Zero**.
The **Clinical Lead for Sustainability** is Justin Harris, Deputy Chief Medical Officer.

Meeting quarterly, GPSC brings together clinical, non-clinical and system partners, with trust staff and the CWC team supporting delivery across the seven Green Plan workstreams.

Specialist sustainability support is provided by the Care without Carbon Team, including providing support to other specialist and enabling departments across the organisation.

Board Oversight & Reporting

- Board-approved Green Plan sets out ESHT's commitment to the Net Zero NHS trajectory.
- Progress is reported through quarterly GPSC → Finance & Performance Committee - Board.
- Board-approved **Trust Annual Report** includes sustainability report each year.
- External reporting through **Greener NHS returns, fleet returns, and regional MOU** processes.

Metrics and targets are tracked **across all seven Green Plan workstreams**, aligned with Green Plan aims and national requirements.

Risk Management
To strengthen climate-related governance, ESHT has adopted TCFD-aligned reporting within the Trust Annual Report, following HM Treasury guidance. This enhances transparency on how climate risks and opportunities are identified, assessed and integrated into strategic and financial planning.

Measurement & Reporting
A core set of Green Plan targets has been developed in line with the Health and Social Care Act 2022, NHSE requirements and Trust priorities. Annual action plans and KPIs for each workstream are monitored through the GPSC Highlight Report and reported publicly through the Trust Annual Report. ESHT also meets all national and regional reporting requirements, including Greener NHS, ERIC and PAM.

Appendices

# Appendix 1: Carbon Footprint Method Explained

Our carbon footprint reporting boundary

The NHSE climate change strategy, "*Delivering a Net Zero National Health Service*", defines NHS emissions in two groups.
- **NHS Carbon Footprint:** emissions we control directly.
- **NHS Carbon Footprint Plus:** emissions we can influence.

The Greenhouse Gas (GHG) Protocol Corporate Accounting and Reporting Standard **Control Approach** sets out defined scopes for emissions.

- **Scope 1:** direct emissions. These occur from sources owned or controlled by the reporting organisation.
- **Scope 2**: (indirect) purchased energy emissions occurring as a result of purchased energy consumed by the reporting organisation, but where the emissions occur from another organisation (mostly electricity).
- **Scope 3**: other indirect emissions. All other emissions that occur as a consequence of organisational activity, but which are not reportable in Scope 1 or 2.
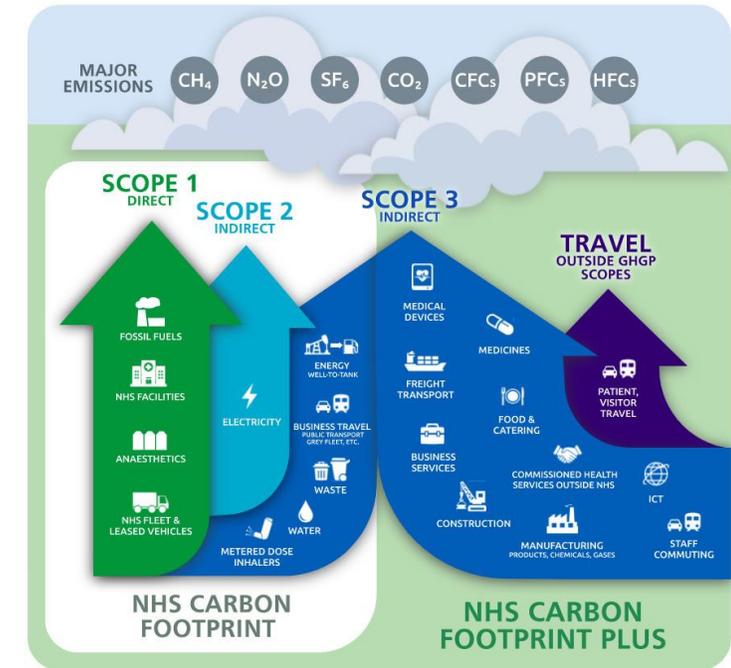
The NHSE climate change strategy also commits to net zero for emissions relating to patient and visitor travel which falls outside of these scopes.

The approach adopted by East Sussex Healthcare NHS Trust is to report on emissions from the activities over which it exerts operational control. In other words, the accounting boundary is drawn around the clinical services that the Trust is commissioned to deliver, and which are therefore delivered in accordance with Trust policies and procedures.

Appendix 1: Carbon Footprint Method Explained

Measuring our NHS Carbon Footprint

When measuring our carbon footprint, we use a baseline year of 2019/20, in line with national NHS guidance. We use the following methodology for calculating emissions relating to each source:

Energy and Water
Energy and water consumption figures are generally calculated from invoicing data as follows:
- Where we pay the energy and water costs directly, invoices provide consumption data. Consumption is apportioned based on the percentage of floor area occupied by the Trust.
- Where we do not pay these costs directly, we source the activity data from the party who is responsible for paying them and then apply the same methodology set out above. Where activity data is not available, we estimate consumption using Charted Institute of Building Services Engineers (CIBSE) benchmark figures.

Consumption figures are then converted into emissions using UK Government Greenhouse Gas Conversion Factors.

Inhalers
The quantity of each type of inhaler prescribed is provided by pharmaceutical teams. This is then mapped to emissions factors published by PrescQipp to give an overall carbon impact.

Medical Gases
The volume of Nitrous Oxide and Nitrous purchased by the trust is provided by the supplier. This is then converted to carbon using UK Government Greenhouse Gas Conversion Factors.
Emissions from fluranes are calculated using the volume and Dr Tom Pierce's RCoA tool.

Waste
The weight of waste for each category is calculated from supplier reports. In order to convert waste consumption to carbon impact, we use UK Government factors for general, and recycled waste. Government factors are not available for clinical waste; in place of these we use factors from the National Atmospheric Emissions Inventory.

Travel
- Trust fleet emissions are calculated from the litres of fuel purchased using fuel cards relating to each trust vehicle. These are converted to carbon impact using UK Government Greenhouse Gas Conversion Factors based on the type of fuel used.
- Business mileage vehicle claims have been converted to carbon impact using UK Government Greenhouse Gas Conversion Factors based on the fuel type and engine size of the vehicle.
- Public Transport business mileage claims have been converted to carbon impact using UK Government Greenhouse Gas Conversion Factors based on mode of transport used.

Appendix 1:
Carbon
Footprint
Method
Explained

Measuring our NHS Carbon Footprint Plus

At East Sussex Healthcare NHS Trust, our focus to date has been implementing data collection to support regular measurement of our NHS Carbon Footprint. We are currently undertaking work to allow us to be able to confidently expand this to include emissions sources within our NHS Carbon Footprint Plus.

Greener NHS provide estimated figures for the NHS Carbon Footprint Plus for all NHS trusts through their Green Plan Support Tool data, covering the baseline year of 19/20. This includes data covering the following emission sources

- Medicines and prescribing
- Personal travel (staff commute, patient travel, visitor travel)
- Medical supply chain (clinical consumables, clinical equipment)
- Other supply chain (physical and digital infrastructure, equipment, food and catering, corporate and administrative services and other supplies and services)
- Non-NHS commissioned services (voluntary and independent organisations, personal and continuing care)

NHS England's recently published "Five years of a greener NHS: progress and forward" estimates that 24/25 indirect emissions have seen a small increase since 19/20. As such, we have then used 19/20 figures as an estimate for our 24/25 impact for indirect emissions for both our carbon footprint figures, and our Net Zero NHS Carbon Footprint Plus Roadmap.
More information about the approach to carbon footprinting developed by the Greener NHS team can be found in https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(20)30271-0/fulltext

Appendix 1:
Carbon Footprint Method Explained

NHS Carbon Footprint emissions by source and per FTE

Using the above methodology, our calculated NHS Carbon Footprint by emission source is set our below. We have set this against the number of Full Time Equivalent (FTE) staff in each year to give an indication of level of service delivery.

Annual carbon emissions (tCO2e)	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
Fossil Fuels	10,285	10,598	11,823	13,127	11,276	11,610
Medical Gases	2,482	1,625	1,695	2,150	1,719	1,725
NHS Fleet and Leased vehicles	147	152	143	149	162	142
Purchased Electricity (location-based)	2,981	2,232	1,687	1,155	1,828	1,648
Energy WTT	2,043	1,910	2,657	2,681	2,463	2,462
Business Travel	781	588	642	695	592	663
Waste	221	284	278	263	215	165
Water	165	172	71	72	67	49
NHS FLeet and Leased Vehicles WTT	35	35	35	36	39	35
Business Travel WTT	166	127	137	143	140	155
Metered Dose Inhalers	82	63	97	99	101	99
Total Emissions (NHS Carbon Footprint)	**19,388**	**17,785**	**19,265**	**20,571**	**18,602**	**18,754**
% change against baseline year (tCO2e)	0%	-8%	-1%	6%	-4%	-3%
FTE staff	6,072	6,402	6,633	6,912	7,240	7,539
Emissions per FTE	3.2	2.8	2.9	3.0	2.6	2.5
% change against baseline year (tCO2e/FTE)	0%	-13%	-9%	-7%	-20%	-22%

Appendix 2:
Net Zero Carbon Roadmap: our approach

Target Emissions

The recent "*Delivering a Net Zero National Health Service*" report, sets out two clear targets for the NHS, as follows:
- Net zero carbon by 2040 for the emissions we control directly (NHS Carbon Footprint),
- Net zero carbon by 2045 for the emissions we can influence (NHS Carbon Footprint Plus),

The strategy also sets out interim ambitions to:
- reach an 80% reduction in NHS Carbon Footprint by 2028 to 2032 (based on 1990 emission levels). This equates to reducing emissions by at least 47% by 2028-2032 based on our 2019/20 baseline.
- reach an 80% reduction in NHS Carbon Footprint Plus by 2036 to 2039 (based on 1990 emission levels). This equates to reducing emissions by at least 73% by 2036-2038. based on our 2019/20 baseline.

Our Net Zero Carbon Roadmap for direct emissions uses an interim target of 47% reduction by 2030/31.

Reductions due to external factors

Some carbon savings are expected from external factors outside of organisational control, for example expected grid decarbonisation and transition to EVs. To account for these within the Net Zero Roadmap, we have calculated the impact of these factors from 2024 to our interim target. This is based on the following assumptions:

- **Grid decarbonisation:** Expected electricity grid decarbonisation calculated from expected emissions factors set out in the HM Treasury 2022 Green Book guidance. These are aligned to published emission factors to give the estimated impact of grid decarbonisation to 2030.
- **Natural gas:** Assumed 5% reduction in natural gas emissions by 2040 based on assumptions around new tech/Hydrogen.
- **Water:** Assumed 5% reduction in water emissions by 2040 based on assumptions around new tech and grid decarbonisation.
- **EV transition:** From 2030, new petrol and diesel cars will no longer be available for sale in the UK. For this Roadmap, we have assumed 1% reduction per year for business travel emissions based on current trends of the uptake of Electric Vehicles.

Appendix 2:
Net Zero Carbon Roadmap: our approach

Delivery Plan projects

The estimated additional carbon savings as a result of confirmed and potential projects are calculated to 2030. In most cases these are a direct carbon reduction per year (often phased in its implementation in line with the project timeline). Note the following caveats:

- For projects that involve transition from gas to electricity there may be an expected increase in electricity but overall, these will have a net reduction in emissions.
- For any project with electricity savings, the expected impact is calculated in line with expected grid decarbonisation savings using the same methodology as detailed in the External Factors section.
- The impact of grid decarbonisation is applied for projects centred around shifting business milage to electric vehicles.
- For projects that have already begun but the full carbon saving is yet to be realised, only the additional expected saving post 2024/25 is included in the scenarios with mitigations.

NHS Carbon Footprint Plus Roadmap

Our NHS Carbon Footprint Plus Roadmap sets out our trajectory to 2045 from the 19/20 baseline year using NHS England data as set out in Appendix 1.

The roadmap uses an interim target of 73% reduction by 2038/39 which gives an almost straight line reduction trajectory to 2045/46.

The 'estimated emissions' shown are estimates based on 19/20, and on NHS England's recently published "Five years of a greener NHS: progress and forward" report. The chart indicates the estimated proportion reductions required in each of the key areas calculated.

More information about the approach to carbon footprinting developed by the Greener NHS team can be found in https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(20)30271-0/fulltext

Appendix 3: NHSE Green Plan Targets

	2025	2026	2027	2028	2029	2030
Journeys		**Sustainable Travel Strategies** Sustainable travel strategies will be developed and incorporated into NHS organisations' Green Plans. **Salary Sacrifice Schemes** All vehicles offered through NHS vehicles salary sacrifice schemes will be electric.	**Electric Vehicles** All new vehicles owned or leased by the NHS will be zero emission (excluding ambulances).			**Staff Commute** Reduce emissions by 39% by 2030/31 in line with NZ Travel & Transport Strategy target to reduce by 50% by 2033.
Circular Economy		**Waste** NHS trusts and NHS foundation trusts to eliminate waste sent to landfill.	**Net Zero Supplier Roadmap** All suppliers required to publicly report targets, emissions and publish a Carbon Reduction Plan for global emissions.	**Net Zero Supplier Roadmap** New requirements will be introduced overseeing the provision of carbon footprinting for individual products supplied to the NHS.		**Net Zero Supplier Roadmap** Suppliers should only qualify for NHS contracts if they can demonstrate progress through published progress reports and continued carbon reporting.
Places		**Water Efficiency** NHS trusts to review options to install leak detection systems.		**Fossil Fuel Heating** Remove coal and oil-led primary heating systems. **Energy Efficiency** NHS trusts and primary care to review options to install energy metering at all sites (floor level). **Drainage** NHS trusts to carry out sustainable urban drainage system assessments		
Climate Adaptation	**Emergency Planning** NHS trusts must have specific plans for flooding and overheating.					

Reach net zero carbon footprint by 2040, reducing emissions by at least 47% against 2019/20 emissions by 2030-31

Reach net zero carbon footprint plus by 2045, reducing emissions by at least 73% against 2019/20 emissions by 2036-38

Appendix 4: How we will prioritise our efforts

With resources more constrained than ever, it's critical we deliver on our sustainability aims as efficiently as possible. Our Green Plan has been prioritised through:

- **Taking a data driven approach**, using environmental data to identify carbon hotspot areas.
- **Guided by our stakeholders**, ensuring this plan is aligned with our staff and patient voice.
- **Legislation**, ensuring we meet the core legal requirements of the Health and Social Care Act and other NHS requirements.
- **Best practice** examples and our own learning from working through CWC
- **Understanding risk**, with a particular focus on this in the next phase of work.

In order to achieve our Green Plan aims

Reduce our emissions to Net Zero by 2040/45

Address the **targets within the Environment Act 2021**

Adapt our services and buildings to the impacts of climate change

'Have regard to' legal duty (our enablers)

We need to ensure

Reduce direct emissions to net zero by 2040 (interim target of 47% by 2028-32)

Reduce indirect emissions to net zero by 2045 (interim target of **73% by 2036-38**)

Improve biodiversity, air quality, reduce waste, conserve clean water

Identify key impacts, assess risk to patients and service delivery and develop mitigations.

Staff awareness of climate change and capacity/skills to integrate into day-to-day work

Integration of sustainability into decision making

Assurance of Green Plan delivery and maximising impact of the programme through partnerships

Which requires work in these areas

- Sustainable Clinical Practice
- Circular Economy
- Places
- Journeys
- Climate resilience
- Culture
- Partnerships and Collaboration