NHS
The Rotherham
NHS Foundation Trust

The Rotherham NHS Foundation Trust

Green Plan 2025 - 2028

Executive Summary

The Rotherham NHS Foundation Trust's Green Plan sets out how the Trust will address Sir Simon Stevens Net Zero challenge, for the NHS to reduce the environmental impact arising from carbon emissions with a view to achieving 80% net zero by 2032 and totally emissions free on site by 2040.

Our Green Plan is in response to the climate change emergency. If the matter is not addressed, the consequences of poorer air quality and environmental stress may significantly impact on our wellbeing and result in an increase in diseases such as cardiac issues, respiratory disease and cancer, which may affect us all and our future generations.

In 2021 we made significant progress in reducing our carbon footprint through the successful completion of an £11m investment through a range of energy savings projects, including the replacement of our Combined Heat and Power Plant and primary heating boilers at The Rotherham Hospital and wide scale replacement of lighting with LED fittings across our sites.

Our Estates Strategy 2022 – 2027 is wholly aligned to the Green Plan, ensuring that over the next few years we will continue to invest in further carbon reduction targets in the areas of Built Environment and Infrastructure; Estates and Facilities Management; Medicines Management; Supply Chain & Procurement; Food & Nutrition and Climate Change Adaptation. However, due to the constant change and requirements for adaptability our Estates Strategy will be reviewed in 2025 in line with this green plan.

Our Green Plan intends to exceed the current NHS commitments towards environmental sustainability, by:

- Achieving at least an 80% reduction in emissions from on-site sources by 2032.
- Achieving a further 2% reduction in general waste, based on 2025's levels.
- Reducing patient service mileage by 25% based on 2020 by 2032, by delivering care closer to home and in the community settings.
- Continue to work towards the ceasing of all single use plastics
- The Trust has seen over the last two years an increase in water consumption which is currently being investigated, as a result the 10% reduction in water usage has not been achieved. This target will be reset for the period 2025 – 2028.

We pledge to adhere to the NHS CO_2 reduction targets to eliminate our CO_2 footprint through this plan, as approved by our Board of Directors.

By working collaboratively with our peer organisations within the Integrated Care System in South Yorkshire and as an Anchor organisation within our community, we will uphold our corporate and social responsibilities. We will minimise our environmental impact and work to provide sustainable healthcare services, in contribution to the global effort to mitigate climate change impact.

The Trust is committed to driving the Green Plan forward and is fully supported by the Executive Team to do so. All senior leaders within the Trust will be involved in the strategy to ensure the Green Plan targets are worked towards and achieved. To ensure the targets are met, the Trust will set up strategic sessions to work through elements of the plan. To further embed this, strategic/operational leads will be appointed to ensure implementation of the plan's targets and monitor its progress.

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1.0 INTRODUCTION

1.1 THE ROTHERHAM NHS FOUNDATION TRUST

The Rotherham NHS Foundation Trust (TRFT) is a combined acute and community Trust providing services at Rotherham Hospital and across the borough to a population of 264,700 people.

The 430+ bed Rotherham Hospital first opened in March 1978 with Rotherham community services integrating with the TRFT in 2011.

Today, TRFT provides a full range of district hospital and community services to Rotherham and the surrounding area alongside partner organisations.

The Urgent and Emergency Care Centre (UECC) opened in 2017 and currently sees approximately 100,000 attendees per year, and there are approximately 45,000 inpatient. This figure increases to 66,000 when day cases are included and 260,000 outpatient attendances each year.

TRFT is an Associate Teaching Hospital of the University of Sheffield and has an active research programme delivered through local, regional, national and international research networks and consortia.

1.2 DEMOGRAPHIC & SOCIOECONOMIC DETAILS

Rotherham and borough's 266,183 inhabitants are spread over an area of 287 km². Certain factors may impact on the populace to a greater degree than found nationally in terms of age; economic background and environment.

Child poverty in some areas of the borough is considered to be in the 10% of the most deprived areas in England in comparison to the national average.

In 2024 Rotherham's particulate matter levels are generally considered "fair" to good based on ACCuWeather's data. Specifically PM10 and PM2.5 fluctuate, with values around 21 an 31, respectively indicating relatively low levels of these pollutants.(1) It is noted that two of the heaviest influences in pollution relate to steep hills (with heavy fuel use required to climb) in the vicinity of Rotherham and the M1 motorway, which lie largely beyond much of the borough's control. In recent year a speed reduction scheme has been put in place on the section of the M1 close to Meadowhall and Rotherham. The effect of the scheme to reduce the carbon emissions and pollutants in this area.

Clearly, pollution at low atmospheric level has a significant effect on health and any impact that TRFT can make in reducing this through reduced road travel and fuel combustion is to be welcomed.

2.0 ORGANISATIONAL VISION

TRFT aims to build a healthier future for patients, their carers and families, staff, and for anyone else that TRFT cares for. TRFT is committed to implementing a vision that integrates hospital and community services and empowers clinicians and managers to deliver real benefits to patients and their carers. This is actioned by providing healthcare services where they are most convenient and best suit patients' needs.

With respect to carbon reduction, TRFT is committed to playing its full part in achieving the NHS aims to reduce its own emissions to net zero by 2040.

2.1 SUSTAINABILITY IN HEALTHCARE

The NHS has been identified as a generator of 5% of all the UK total emissions. This is despite a successful campaign to reduce overall emissions by an impressive 18% over the past decade. However, along with the rest of the UK, greater effort than ever is being called upon to now reduce the NHS emissions to net zero by 2040[1].

2.1.1 Climate Change Act 2008

The Climate Change Act 2008 sets legally binding targets for the UK to cut greenhouse gas emissions by 80% by 2050 (based on a 1990 baseline). This is split into interim reductions of 34% by 2020 and 50% by 2025. Emissions include those from building energy use, travel, waste and the procurement of goods and services. This is the principal driving legislative act in place.

2.1.2 Net Zero

Since the Climate Change Act, the term “Net Zero” has come into common parlance. This essentially signifies that, on balance, no CO_2 emissions must be attributable to any activity. This is generally to be achieved by a reduction in energy use by improved technology and efficiency gains.

Net zero is reached when the amount we add is no more than the amount taken away.

Net zero means achieving a balance between the greenhouse gasses put into the atmosphere and those taken out.

Another factor is the restoration of the environment in areas such as forestry; peat bogs and oceanic protection, which increases CO_2 absorption capacity of the planet. Unfortunately, industrialisation and environmental degradation has already created enough emissions to the atmosphere that have set in train a global temperature rise.

[1] “Delivering a ‘Net Zero’ National Health Service”; NHS England & NHS Improvement; October 2020

It has been realised by the world's governance that a drastic cut in emissions, globally, is required to avoid the worst of catastrophic climate change, by limiting this temperature rise. To this end, in the Paris COP 25, a limit was set of 2°C increase in global temperatures by 2050. However, science has shown that this is an insufficient limit. Therefore, the recent COP 26 talks in Glasgow have endeavoured to reduce this to 1.5°C. This essentially requires CO_2 emissions to cease by 2050. COP 28 further recognised health as central to climate action.

Without action to limit temperature rises, the current severities of extreme weather events seen in the UK and elsewhere over the last ten years, will become more prevalent. . We have seen in the last three years the heatwave of 2022 with temperatures exceeding 40 degrees and much more prevalence of floods. Extremes of cold and heat will be more likely, and this will inevitably impact on the health of citizens Action must be taken to prevent this from all elements of society. The NHS is no exception and may even be considered as a leading influence in societal behavioural change to reduce emissions and limit global temperature increase.

The NHS has issued its own target as part of its contribution to climate action. The "Delivery of a 'Net Zero' National Health Service", sets forward the requirements that the NHS be net zero by 2040. It is divided into two areas. The "NHS Carbon Footprint" concerns emissions over which the NHS has direct ownership (e.g. gas and electricity use; road transport). There is an ambition to have 80% of the reduction achieved over the period 2028 to 2032. The second area is known as "NHS Carbon Footprint Plus". This pertains to emissions over which the NHS has influence (for example: embedded emissions in suppliers' services and products). These must be at zero by 2045, with the ambition of 80% of the reduction to take place over 2036 – 39.

The emitters of carbon dioxide are wide and various, and the two above areas are summarised in Figure 1 below:

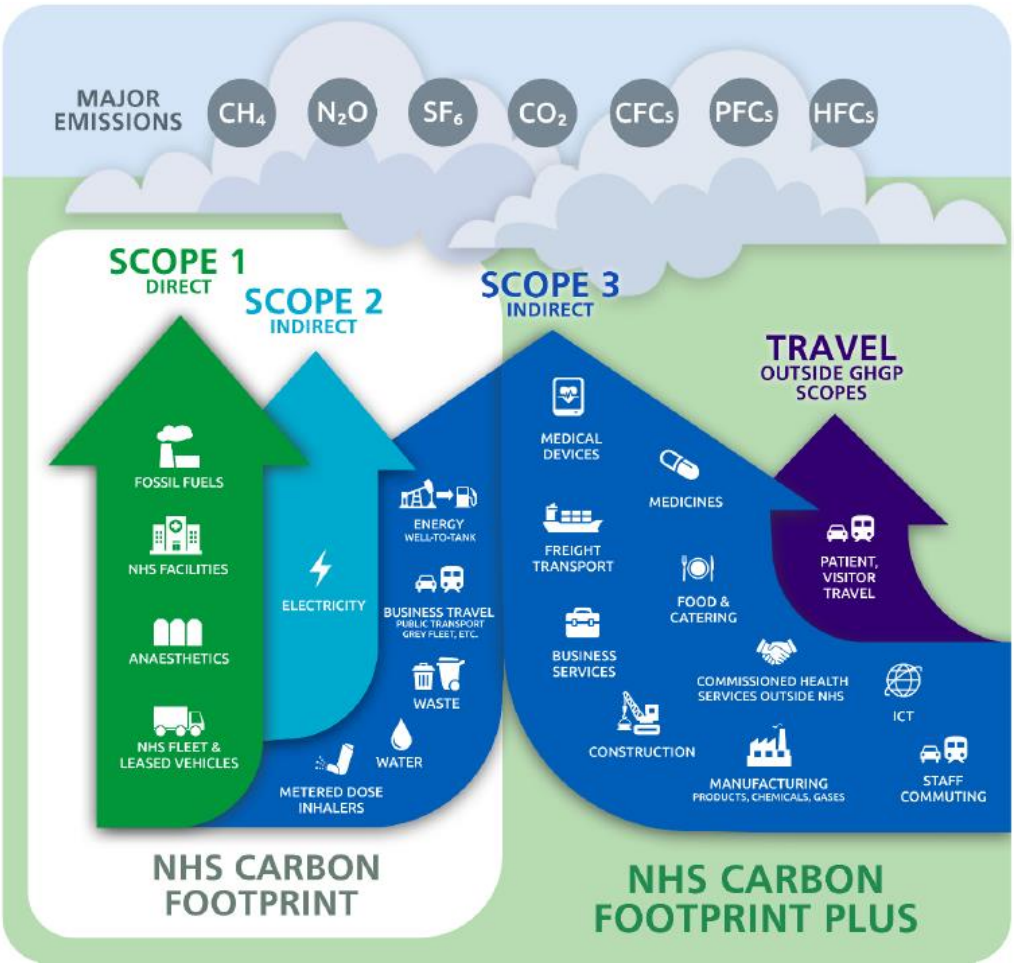


Figure 1 - NHS Carbon Footprint Sources

To explain the various “Scopes”:

- Scope 1 – Emissions arising from direct combustion (natural gas; hospital owned vehicle use); fugitive emissions from refrigerants
- Scope 2 – Grid Electricity
- Scope 3 – Indirect emissions such as those arising from water supply and treatment; general and specialist waste treatment, transportation and procurement of goods and medicines

3.0 PREVIOUS GREEN PLAN PRIOTITIES

The trust's Sustainable Development Management Plan (SDMP) detailed TRFT's 2016-2021 five-year plan to address climate and sustainable matters over which it had control. These priorities formed the basis for the Green plan 2022 – 2025.

It's strategy to combat sustainability issues was to adhere to the following high-level action plan which continues to be implemented and improved on:

Area	Priority	High Level Actions
Energy & Water	1	The Trust is currently working towards a De-Carbonisation Plan which will enable funding opportunities going forward from areas such as PSDS.
	2	Continue to promote energy and water efficient behavior amongst employees, patients and visitors
	Progress	Battery energy storage; LED lighting; Boiler improvements; new CHP (tri-generation); general insulation; BMS improvements; Chilled water control improvements. 100% electricity purchased from the grid is renewably sourced and will continue to be so. Since 2022 Heat pumps have now been installed. There has been an increase of Thermal insulation throughout the Trust, together with glazing improvements. BMS controls have also been implemented throughout the site.
Procurement	3	Produce a Sustainable Procurement Policy
	4	Adopt the Procuring for Carbon Reduction (P4CR) programme Travel Further work is required to enable a consistent identification of sustainability risks throughout the procurement process. A Rotherham Special Social framework will be implemented in Spring/Summer 2025 for the measurement and monitoring of supplier's sustainability initiatives.
	Progress	A sustainable procurement policy has been developed, providing guidance on the implementation of sustainable procurement principles, and providing a framework for supplier engagement and measurement. The procuring for Carbon reduction (P4CR) programme has been adopted.
Travel	5	Work with external organisations to raise awareness of the health benefits from utilising active travel modes
	6	Promote sustainable travel behavior amongst staff, patients and visitors.

Area	Priority	High Level Actions
	Progress	Implementation of Cycle to Work and ULEV purchase schemes via salary sacrifice methods; Dr Bike monthly visits and loan bikes provision; reduced rate bus season tickets; Car share scheme; Launch of sustainable travel group
Waste	7	Ensure high and compliant standards for waste management from the point of generation to the point of disposal
	8	Promote effective waste segregation and waste management behaviors amongst employees, patients and visitors Continue to work in line with NHS England guidance to achieve 60:20:20 split of Offensive, Alternative Treatment and Incineration Waste tonnages.
	Progress	98% of all waste is recycled or recovered
Food	9	Encourage healthy eating amongst employees, patients & visitors Work towards plant based catering. Currently 40% of meals/menus are vegan.
	10	Improve processes for the issuing and transfer of medicines
Pharmaceuticals	11	Maximise the use of Patient Own Drugs (PODs) Building healthy, sustainable and resilient services and communities Nitrous oxide still present in a number of areas via manifold and pipeline, aim to decommission nitrous manifold by 2026
	Progress	The use of Desflurane anesthetic's within theatres has ceased.
Designing the Built Environment	12	Ensure that buildings are designed to encourage sustainability and resilience to climate change
	13	Ensure that sustainability design and construction considerations are explicit in Contractor Briefing Documents Workforce development and community engagement Reduction in the use of the lifts – emphasis on use of lifts for patient transfer or visitors/patients with difficulties with walking.
	14	Ensure sustainability responsibilities are included within all job descriptions, and embed sustainability delivery into Executive and Senior Managers appraisals
	15	Review of existing MAST training Provision to ensure supports delivery of the Green Plan.

Area	Priority	High Level Actions
Workforce development and community engagement		There has been increased education with regards to recycling of waste, reduction of waste. Look to grow a network of Green champions.
	16	Work in partnership with public health professionals to support employees in improving health and wellbeing Climate change adaptation
	17	Produce a Climate Change Adaptation Plan – specific plans for 'heat dome', significant flooding & storms.
Climate change adaption	18	Work in partnership with local organisations to build resilience and adaption to climate change Embedding sustainable clinical and care models Sustainable clinical and care models
	19	Investigate mechanisms to facilitate a movement towards more sustainable models of care. The Trust has a number of ongoing projects:- • Currently reviewing the reduction of pressure ulcers per 1000 bed days which will reduce the number of dressings required, reducing carbon footprint due to reduced procurement journeys. The Trust is looking to work with local partnership with the continuation and updating of reuse walking aid scheme.
Sustainable clinical and care models	20	Assess the sustainability impacts of new service models • Recently new cleaning procedures introduced for commodes, will improve sustainability, ensuring the commodes due to this change have a longer life and require less replacement.

Table 1 – 2025 – 2028 – Actions and Targets for each area

The impact of actions in Table 1 is described in Figure 2 to Figure 4 - Rotherham Foundation Trust – Waste below:

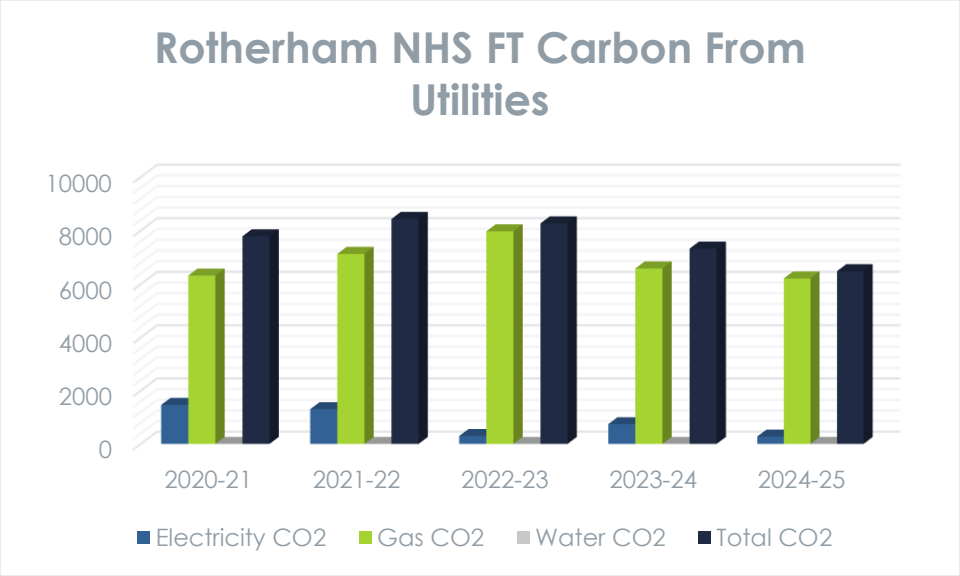


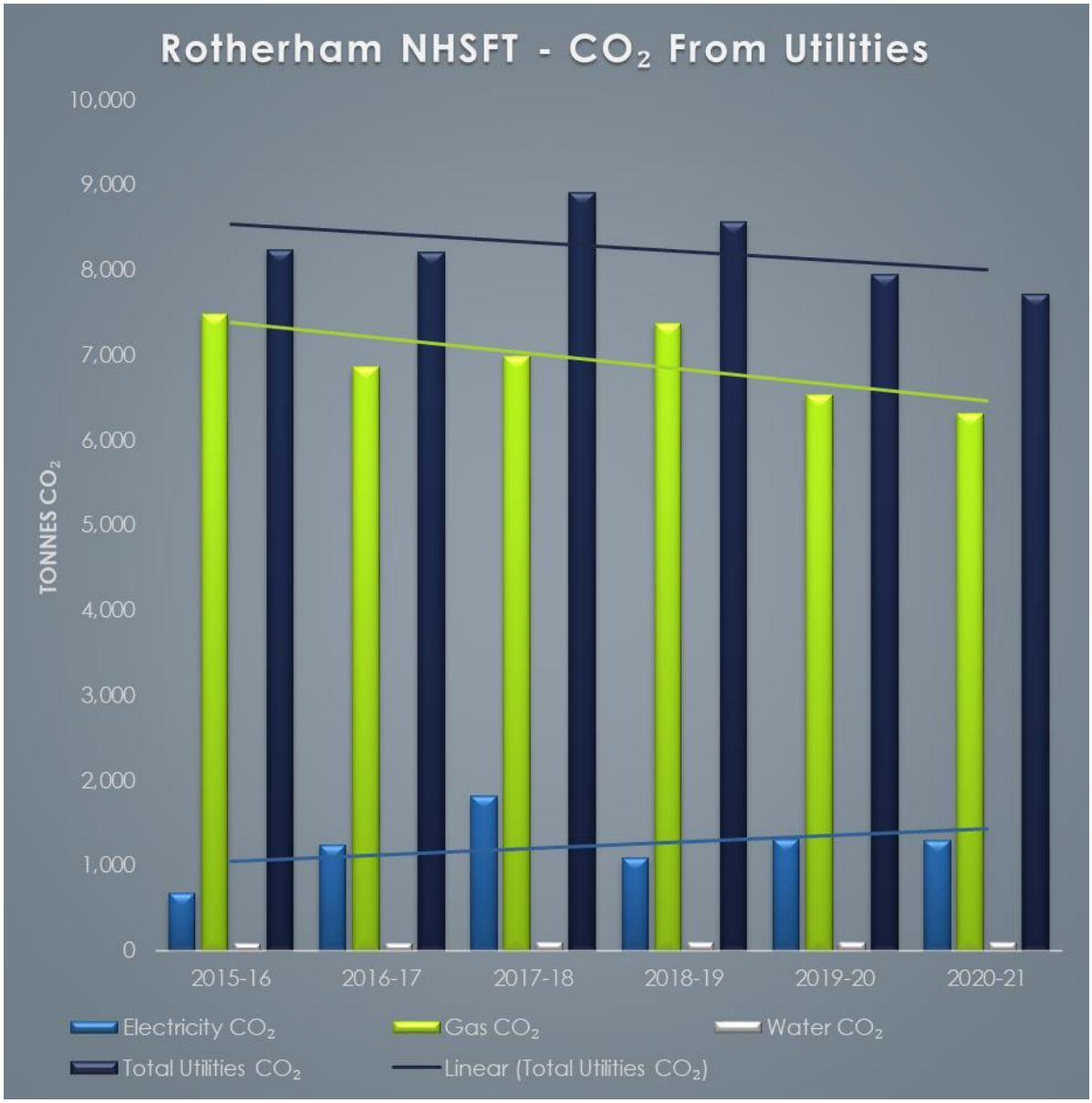
Figure 2 - Rotherham Foundation Trust - Emissions from Utilities

This bar chart illustrates the carbon emissions from utilities at Rotherham NHS Foundation Trust over a five-year period, from 2020-21 to 2024-25.

Here's a summary of the key trends:

- **Total CO^2 Emissions:** The yellow bars, representing total CO^2 emissions, show a generally increasing trend from 2020-21 to 2022-23, peaking at just under 9000 tonnes CO^2. There's a noticeable decrease in total emissions in the subsequent years, 2023-24 and 2024-25.
- **Gas CO^2 Emissions:** The orange bars, indicating CO^2 emissions from gas consumption, are the largest contributor to the total emissions throughout the period. They follow a similar trend to the total emissions, increasing initially and then decreasing.
- **Electricity CO^2 Emissions:** The blue bars represent CO^2 emissions from electricity usage. These are significantly lower than gas emissions and show a relatively stable trend with some minor fluctuations across the years.

In essence, the chart highlights that gas consumption is the primary source of carbon emissions for Rotherham NHS FT utilities. While total emissions increased initially, there appears to be a positive trend of decreasing overall carbon emissions in the later part of the observed period.


Rotherham NHSFT - CO_2 From Utilities
10,000
9,000
8,000
7,000
6,000
5,000
4,000
3,000
2,000
1,000
0
TONNES CO_2
2015-16
2016-17
2017-18
2018-19
2019-20
2020-21
Electricity CO_2
Gas CO_2
Water CO_2
Total Utilities CO_2
Linear (Total Utilities CO_2)

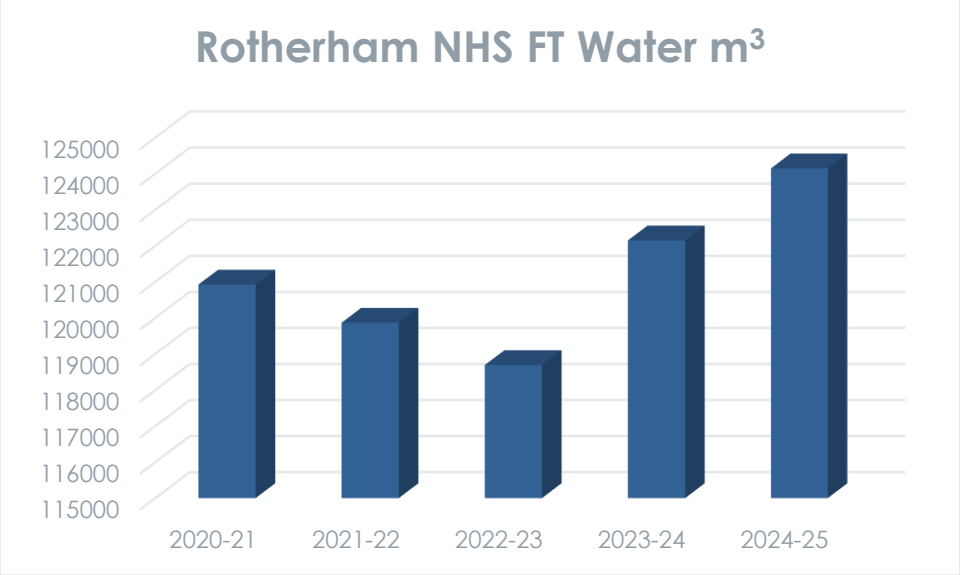


Figure 3 - Rotherham Foundation Trust Water & Treatment

The bar chart shows the water consumption in cubic metres (m^3) at Rotherham NHS Foundation Trust over a five-year period, from 2020-21 to 2024-25.

Water usage started at approximately 121,500 m^3 in 2020-21 and decreased to around 120,500 m^3 in 2021-22. There was a further slight decrease in 2022-23 to just under 120,000 m^3. However, water consumption then increased significantly in the following years, reaching approximately 122,500 m^3 in 2023-24 and peaking at around 124,500 m^3 in 2024-25.

Overall, the water consumption at Rotherham NHS FT shows a fluctuating trend over the five-year period. Following a slight decrease in the initial years, there has been a notable increase in water usage in the most recent two years, reaching the highest level in 2024-25. This increase in water consumption in the later years might warrant further investigation to understand the underlying reasons and explore potential water efficiency measures.

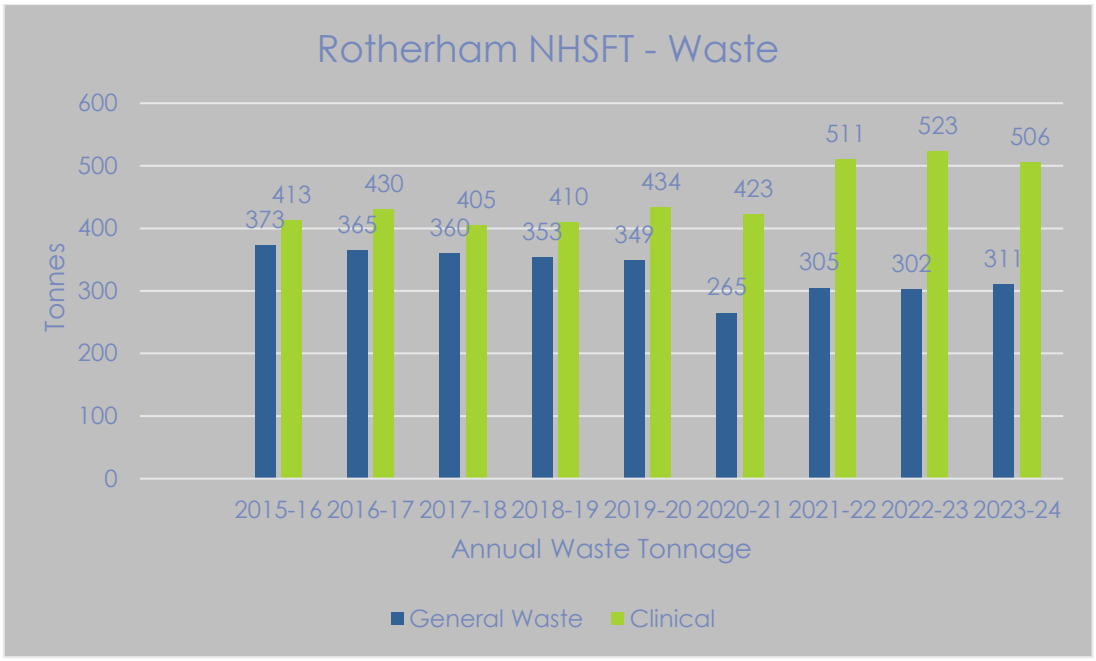


Figure 4 - Rotherham Foundation Trust – Waste

With respect to waste, clinical waste saw a rapid increase during the Covid 19 pandemic and is currently reducing. Work will continue as set by the Trusts KPI's to further reduce this waste stream, with increased segregation and recycling. However, general waste saw an increase in 2021-22, although it is now 38 tonnes less than pre-Covid tonnages, and continues to reduce with improved recycling within the Trust. Within the clinical tonnage information the Offensive waste stream forms part of this and since the reduction in cases from the pandemic this waste stream continues to increase and the orange bag waste to reduce. The Trust will continue to work towards a further reduction of 4% reduction on 2021/22 tonnages.

4.0 THE GREEN PLAN

The TRFT Green Plan will inform our vision for environmental sustainability and objectives to become a Net Zero healthcare provider, through the following staged objectives:

- Stage 1 – Carbon Footprint – review and validate the carbon footprint of TRFT's emissions (covering Scope 1 and 2 and selected Scope 3 emissions).
- Stage 2 – Action Identification – identification and assessment of opportunities for reducing emissions from energy and staff travel.
- Stage 3 – Decarbonisation Action Plan – develop a Decarbonisation Action Plan. This will bring together the analysis from Stage 1 and Stage 2 to provide a roadmap of decarbonisation activities, including detail on specific energy and carbon saving interventions and impact.

4.1 WORKFORCE AND SYSTEM LEADERSHIP

TRFT's workforce are central to enabling us to deliver the Green Plan. The decisions that our workforce makes in energy use are key to this. Therefore, we will ensure that our staff teams are provided with the knowledge and tools to make the right environmental decisions. This will focus on the best use of powered equipment such as lighting; IT; heating and cooling controls. We will also maximise the best use of energy in our support services such as food provision in canteens and patient meals.

In order to do this, a board endorsed policy will drive this with target setting and appropriate monitoring. Our leadership will actively promote the Green Plan by direction and example.

4.2 ESTATES & FACILITIES

4.2.1 Energy & Water

The Estates and Facilities team has ultimate responsibility for the procurement and use of energy and utilities across all sites occupied by TRFT, including the main hospital and all community-based sites and services. As such, we will ensure that energy and utilities are consumed in as efficient a manner as possible. A programme of savings proposals has been completed as part of an Energy Performance Contract. These are summarised in the progress details in Table 1.

We will continue to explore other opportunities for saving energy and reducing waste and carbon emissions and we will endeavour to ensure that maintenance operations are equally focused on continued reliable functionality.

We will ensure that the carbon embodied in the procurement of goods, services, equipment and facilities, adopts best practice in the most efficient use of energy and carbon and in minimising carbon emissions and waste. Examples would be to ensure that insulation is replaced after work is completed and a low carbon alternative is considered and installed where feasible (for example; LED lighting; high efficiency motors).

We will also continue to examine other areas where energy use can be minimised utilising capital or revenue funded projects, which derive a financial return on investment focusing, reduce backlog maintenance and yield carbon emission reductions on, for example:

- Heat recovery (from AHUs; chiller condensers; economisers)
- Decarbonised heat (heat pump technology; hydrogen ready combustion appliances - subject to bid under PSDV for funding and other applicable carbon reduction schemes)
- Photovoltaics
- Draft proofing
- Double glazing
- Local mechanical ventilation heat recovery
- Underfloor heating
- Ensure optimal heat utilisation

Encourage biodiversity around the site, this could include the development of hedgerows as borders, wild flower areas and transition of grassed areas to alternatives such as clover that do not need management, therefore reducing the amount of green waste produced in grass clippings and fuel needed to mow.

4.2.2 Transport

We have an active programme to address transportation issues including a reduced rate public transport season ticket and bike to work scheme. We will build on this work with recently commissioned secure bicycle storage enabling our cycling commuters to confidently store their bikes. In 2022, we have built additional staff shower/changing facilities for cyclists as added inducement to leave the car at home, in favour of environmentally sustainable modes of transport, such as cycling, running and walking.

A new park and ride scheme is planned in conjunction with local supermarkets so that motorist commuters can park part way along their journey and then continue on foot or by bike to the hospital.

We will also be shifting to electric vehicles, with a plan for a network of charging points over the coming years, increasing our electric vehicle charging capacity to at least 10% of all car parking spaces.

The estates team have just ordered their first electric van to replace the existing diesel vehicle.

In implementing our plans with regard to transport, we will ensure that we take into account the accessibility needs of disabled staff, patients and visitors.

The Rotherham NHS Foundation Trust has developed a travel plan which was published in 2023 and is valid for 5 years.

We actively encourage active travel, public transport and zero-emission vehicles via the salary sacrifice scheme.

The Rotherham NHS Foundation Trust has reduced the emissions levels of vehicles available via salary sacrifice over recent years. Due to the current high price of zero-emissions vehicles TRFT has stopped short of removing non-zero emissions vehicles completely as this will impact on the lower banded staff, who would be prevented from accessing the scheme. Currently almost 60% of salary sacrifice vehicles are now EV

TRFT actively participates in the partnerships with local authorities and local transport authorities to maximise funding and infrastructure opportunities on behalf of the ICS member organisations.

Dr Bike attends the Trust site monthly, providing availability for servicing and repairing bikes on site.

4.2.3 Waste and Recycling

At present, 98% of all waste generated by the hospital is recycled or recovered, this is a 3.3% increase on the previous Green plan update. 25.7% of this amount is fully recycled. 40% of waste is sent for energy recovery (conversion of non-recyclables into combustible material in place of fossil fuels); 26% goes to energy from waste power plants as a direct fuel.

The Rotherham NHS Foundation Trust continues to work in line with NHS England's guidance to improve segregation and classification in line with the HTM 07-01 Safe & Sustainable Management of Healthcare waste. It continues to fulfil the requirement of a 60:20:20 split of Offensive (60%) Alternative Treatment (20%) and Incineration (20%) and currently in line with this regulation has a split of 61.77% Offensive, 33.75% Alternative Treatment, and 4.48% High Temperature Incineration. The Alternative Treatment rate is higher due to the waste disposal contractor for the sharps waste developing an innovative new technology which allows the sharps to be shredded and treated moving them up the waste hierarchy and removing them from the high temperature incineration disposal, and reducing emissions.

We will build on this progress and continue to work towards yet further improvements. We are currently on target to reduce our waste tonnages by 5% as set in our previous Green plan. The final tonnages are not available at the time of compilation of the plan. Currently on 2022 tonnages the Trust has reduced its overall waste by 4% and is looking to have achieved the 5% when the end of year tonnages are available for 2024 -2025. The Trust will continue to increase recycling rates and will look to further reduce general waste by 2%.

In 2024 a further 'Bin the Bin' Initiative was carried out removing over 200 bins from offices throughout the Trusts. This has resulted in a reduction of general waste and a 50% increase in recycling since its introduction.

In line with Simpler Recycling regulations, the Trust currently segregates and recycles, plastic, cans, glass, paper, and cardboard and food waste. The recycling of food waste will continue in 2025 with the introduction of food caddies in all staff kitchens and rest rooms, which will lead to a reduction in general waste and full compliance with the new Simpler Recycling regulations to be introduced in April 2025.

We will investigate the possibility of introducing an empty blister pack recycling scheme within the Trust, to increase recycling and reduce waste.

4.3 MEDICINES

TRFT will work to reduce the carbon footprint associated with medicines and anaesthetics.

4.3.1 Anaesthetics

The anaesthetic gas desflurane, which has 20 x more Global Warming Potential than CO_2 is no longer in use within the Trust. We have worked to eliminate the use of this in favour of the lower GWP gas, sevoflurane.

Nitrous oxide is a gas that has a GWP of 265 and stays within the atmosphere for around 120 years. The trust currently has a 6 x 6 manifold of nitrous oxide, which is piped to every anaesthetic room and theatre as well as other areas of the hospital. Nitrous oxide is very rarely used now within anaesthesia and over the next 4 years will aim to decommission the manifold and provide cylinders where it is needed.

Entonox is a gas composed of 50% nitrous oxide and 50% oxygen that is used for analgesia predominantly in labour ward but also in other areas. We will explore ways to capture and scavenge the gas to prevent it being released into the atmosphere over the next 4 years.

4.3.2 Medicines Use; Procurement and Wastage

A study for the Department of Health revealed prescription drug wastage costs NHS England at least £300 million a year - and that £250 million is avoidable. In 2015/16, 9.5% of TRFT's carbon emissions were attributable to the procurement of pharmaceuticals.

TRFT is committed to tackling avoidable medicines wastage and taking necessary best practice pathways towards minimising medicine waste.

We will utilise the Procuring for Carbon Reduction (P4CR) Flexible Framework to facilitate the procurement of pharmaceuticals in a more innovative, sustainable manner.

TRFT have a number of projects ongoing with regards to the reduction of medicine waste. Monitoring of volumes of waste is carried out six monthly.

TRFT are working together with hospitals in the local area with a specific project for the recycling of inhalers. The inhalers once received by the contractor are broken down and recycled rather than sent for disposal. Although not in large quantities this will reduce and improve pharmaceutical waste tonnages and recycle rather than dispose these items.

Encourage the use of oral/enteral switches where possible – only using the IV route for medications where absolutely necessary.

In summary, TRFT will:

- Improve processes for the issuing and transfer of medicines, when patients are moved from one clinical area to another within the hospital.
- Where appropriate, maximise the use of Patient Own Drugs (PODs) that are brought into the hospital.
- Reduce pharmaceutical waste through improved prescribing, re-use of medicines, compliance and stock management.
- Explore what can be done to encourage patients to bring their own medicines into hospital for use during their stay, including an awareness campaign with the Yorkshire Ambulance Service.

This will be measured and monitored by:

- Bi - Annual progress of the pharmaceuticals section of the Green Plan will be reviewed by Pharmacy Governance and Medicines Operations Group (MOG).
- Reduction in medicine wastage and regular reporting of waste medicine tonnages will be made to Pharmacy Governance. This will be incorporated in a six monthly workplan.

4.4 SUPPLY CHAIN AND PROCUREMENT

It is likely that Procurement/Supply Chain emissions represent more than 60% of the Trust's overall emissions and this can be addressed by Sustainable Procurement of goods and services initiatives.

Sustainable Procurement is defined as a process whereby organisations meet their needs for goods, services, works and utilities in a way that achieves value for money on a whole life basis in terms of generating benefits not only to the organisation, but also to society and the economy, whilst minimising negative impact on the environment.

We will carry out a carbon foot-printing exercise to provide an emissions assessment for TRFT to have a greater insight of the opportunities for us to reach net zero. Our Procurement team will identify and engage key suppliers, aiming to improve reporting, encourage information sharing and support alignment to NHS and TRFT carbon and emissions reduction targets.

Suppliers will be required to meet key criteria such as estimated emissions contributions, TRFT's ability to influence supplier's sustainability credentials, their existing approach to decarbonisation; e.g. low emission company vehicles, product packaging, etc., and their willingness to engage with TRFT.

We will utilise the Procuring for Carbon Reduction (P4CR) Flexible Framework to facilitate the procurement of goods and services in a more innovative, sustainable manner:

- Purchase more goods from sustainable sources, with a focus on those from local, ethical and fair-trade suppliers.
- Work with suppliers to encourage them to hold an Environmental Management Standard (e.g. ISO 14001) and to disclose their carbon emissions.
- P4CR Practice (Level 3) by 2025. This has been achieved by the procurement team being provided with training and guidance on how to implement sustainable procurement principles in to contracts. This is particularly the case for implementation of social values in to tenders. A sustainable policy has been developed, providing guidance on the implementation of sustainable procurement principles, and providing a framework for supplier engagement and measurement. Work has been undertaken in collaboration with Rotherham Metropolitan Borough Council set out for a framework for the sustainability initiatives which are most relevant to the area and how to implement initiatives effectively.

  Procurement process – targets to improve sustainability outcomes are now agreed with all suppliers with an annual spend value higher than £110,000 and are held to account on these commitments.

Supply chain mapping has been undertaken for certain areas of key spend, and TRFT procurement attended supplier engagement events to support and inform suppliers on the mounting sustainability requirements for NHS Suppliers.

A Rotherham –specific social value framework will be implemented in Spring/Summer 2025 for the measurement and monitoring of supplier's sustainability initiatives. The framework focuses on initiatives which will generate the most significant value for Rotherham, and should allow for greater visibility of sustainability benefits the Trust is generating through its procurements.

Our ongoing objectives and targets for 2025- 2028

- Apply social value and Net Zero right from the specification stage and include it within contract management with KPI's. Social value and net zero is now included from the specification stage for all above-threshold value contracts, and a review of best practice for contract managing these components is ongoing. Procurement representatives from the Trust have met with Local authorities for discussions on an anchor-network wide approach to social value, targeting themes which are most relevant to Rotherham.
- Training for all finance and procurement teams in the application and development of meaningful social value criteria, as per PPN 06/20. The procurement team have utilised social value and sustainability resources and workshops provided by NHS England and other groups such as NOEPC, together with internal social value and sustainability leadership and advice.
- Adoption of Evergreen Supplier Framework as a mechanism to benchmark suppliers and a shift to those that actively support the NHS sustainability principles. A move to the use of the Atamis e-commerce portal which has suppliers with Evergreen credentials linked to their account profile, allowing for visibility of potential sustainability opportunities and challenges from the commencement of the procurement process.
- Apply carbon reduction plan or Net Zero commitment, as a requirement for suppliers to provide as part of a tender exercise, as set out in the April 2024 milestone of supply chain roadmap. All contracts above £5 million in value now require the supplier to commit to being net-zero in line with NHS roadmap objectives. It has also become common place for suppliers to make some form of net-zero commitment even for below-threshold contracts.
- Product interventions- at least 1 circular economy project to be considered for implementation per year. Examples Reusable PPE, Reusable Tourniquet, gloves off, EP catheters. Procurement have played a role in providing statistics for the ongoing "Gloves off" campaign, with ongoing work to move to modular O2/Nebularlser masks which is anticipated to generate significant plastic waste savings.

4.5 FOOD & NUTRITION

The NHS is one of the largest purchasers and providers of food in the UK. Working in partnership with our supply chain and service partnerships, TRFT will continue to promote and expand the procurement and delivery of sustainable foods and nutrition.

The annual Green Plan will detail the actions to ensure that TRFT procures sustainable, health and low carbon food and promotes healthy food choices. Working in partnership with our supply chain and service partnerships, TRFT will:

- Encourage healthy eating amongst staff, patients and visitors
- Continue to work in partnership with ReFood and reduce food waste across the food supply chain through improvements to food storage, preparation, ordering and meal service procedures.
- Support and enhance education in food, nutrition and sustainable food production through our Staff Wellbeing scheme.
- Continue to work closely with clinicians and dieticians in order to adopt well-balanced and appropriately portioned menus for both patients and staff.
- Continue to deliver a staff behavioural change programme to catering staff to encourage resource efficient behaviours.
- Food waste data will continue to be regularly monitored and reported.

Annual progress of the food & nutrition section of the Green Plan will be reviewed against achieving the TRFT's vision and priorities.

Identify local suppliers for pastry products, milk and potatoes. Reducing food miles by combining deliveries.

Steamplicity solution reduces energy usage by 30% and significantly reduces carbon footprint either by reducing food miles or replacing ingredients with ones that have a lower carbon impact.

- Our current food service provider sets the following targets within the Trust:-

Our Wellbeing Promise encompasses many initiatives and approaches designed to improve health and wellbeing, with our ethos being "happier & healthier lives, one dish at a time". Our goal is to build a culture that encourages healthy eating and supports mental wellbeing for the people we feed. So far, we've significantly reduced sugar, salt, and fat across 36,000 recipes. Now we're working to embed this culture and use this approach as the default position on the current contract within TRFT,

Our health and wellbeing strategy is based upon three key pillars: Healthier Food, Healthier Lives, and Healthier Futures. We are helping to educate people about a healthy diet and lifestyle, including the importance of sleep and exercise that supports positive mental health. We have introduced exciting menu changes and brands, and information about healthier options with 40% of our main course dishes being vegan as standard. We don't promote any high fat, sugar, salt products nor include them on any kind of price promotions. We only highlight products that are healthier. Our meal deal only features products are healthier, ensuring no HFSS products form part of any offer. We've made a conscious effort to only include healthier items as upsell by our till points, such as fruit and water and healthier snacks.

Our menu is based on a healthy balanced diet, promoting choice whilst encouraging the healthier options.

Sophisticated software is used to manage full recipe portfolio, enabling us to provide customers with a full ingredient footprint and allergen information. This includes the mandatory display of calorie information on shelf edge labelling making it easier for customers to make informed, healthier choices when purchasing. This works alongside our system where we include symbols on labels and menus to ensure that healthier options are made more prominent.

In The Wellspring Restaurant, we will commit to displaying kcal and kJ information alongside the following statement “adults need around 2000 kcal a day” at the point of choice for the customer. The “On Your Plate” Wellspring Restaurant magazine available on site highlights the products on our menu that are healthier or have some form of health benefit, as well as explaining the labelling and symbols we use to make healthier options stand out. The magazine highlights topics related to health and wellbeing, educating its audience on supporting their own health.

Our Food Safety Management System (FSMS) will be used across all sites and covers all food legislation and best practice.

Experienced in-house Registered Dietitians analyse all recipes, use nutritional analysis software system Saffron, the UK’s leading Nutritional Analysis solution, drawing on data from the McCance & Widdowson’s database (Public Health England’s nutrition information data set) to provide assurance that all menu dishes comply with Food Standards and Allergen safeguards, with Reference Intake nutrition labelling supporting customers to make informed choices. We are fully compliant with CQUIN 2017-19 Indicator 1b, Health food for NHS staff, visitors and patients.

We will look to introduce Cauli deposit return schemes on hot beverage cups and food containers, along with pre-ordering solutions to reduce food waste.

Packaging switches includes the switch to CPET food trays containing 70% recycled content in our Steamplicity patient dining food trays which are recyclable at end-of-life.

4.6 CLIMATE CHANGE ADAPTION

Extreme weather can represent a threat to the effective delivery of health and care services. In addition, a rapid increase in service users during extreme weather events can increase pressure on staff dealing with elevated workloads and potential staff shortages.

TRFT recognises that it must become resilient to the effects of climate change and adopt adaptation measures to prepare for, and reduce, the impacts of a changing climate on healthcare services. Climate change adaptation is the understanding and implementation of resilience measures to enable TRFT to prepare for the effects of climate change.

Our Emergency Preparedness, Resilience and Response Group will work to improve the resilience of services and the built environment, ensuring they are fit to meet Net Zero objectives by ensuring:

- Services and infrastructures are prepared and resilient to severe weather events and other disruptions.

- We work together with other public services and local organisations within a framework for sustainable development.
- Current and future risks to health and wellbeing from a changing climate are understood and minimised.

TRFT needs to understand the health and wellbeing implications of current and projected changes in climate and adapt services accordingly. An important component of this is ensuring TRFT's infrastructure (including buildings, vehicles and the supply chain for fuel, food and key products) is prepared for, and resilient to, severe weather events and other disruptions.

Additionally, as many health and care services are increasingly being delivered in people's own homes, there is a growing need to ensure that domestic settings, as well as healthcare settings, are adapted, resilient and accessible.

TRFT's Business Continuity and Critical Incident Plan and Local Service Business Continuity Plans describe the operational command, control, coordination and communication structures required to manage the effects of a significant disruption to services. This includes flooding and severe weather conditions (e.g. excessive rain, snow, wind, ice, extreme cold or heat). As a Category One responder under the Civil Contingencies Act 2004, TRFT is a member of the South Yorkshire Local Health Resilience Partnership, with direct links to the South Yorkshire Local Resilience Forum.

The annual Green Plan will detail the actions to ensure the resilience of TRFT's services and buildings. In summary, TRFT will:

- Employ the UK Climate Change Risk Assessment tools and guidance to assess local risks to patients and staff, infrastructure, supply chain and clinical services, and inform Emergency Planning & Business Continuity procedures.
- Conduct regular climate change impact risk assessments to ensure that high level risks are registered on TRFT's Risk Register.
- Produce a Climate Change Adaptation Plan to ensure continuation of care for the most vulnerable patients during heat waves, floods and other extreme weather events.
- Design all new buildings, and ensure all existing infrastructure, has ability to cope with rising temperatures and floods.
- Assess the risk that disruptive climate changes pose to the supply chain and develop appropriate management strategies to ensure continuity of services.
- Identify risks of disruption to transport operations and put in place contingency plans to cope with extreme or unexpected events.

We will monitor progress by:

- Reporting annual progress of the climate change adaptation section of the Green Plan, reviewed against achieving the Trust's vision and priorities.
- Development of a Climate Change Adaptation Plan.

4.7 SUSTAINABLE MODELS OF CARE

Provision of care brings with it its own environmental issues. To address this, we will examine routes to reduce environmental impact by our delivery of care. We will examine the opportunities for delivering care closer to the patient's home and in the community setting and thus avoid longer journeys to and from the main hospital and treatment centres. We will explore the low carbon alternatives to existing interventions and avoid unnecessary changes to care delivery. Virtual ward and virtual clinic appointments. Introduce a pre-operative hub where multiple things can happen in one visit to prevent patients having to go back and forth to the hospital.

4.8 DIGITAL TRANSFORMATION

The Rotherham NHS Foundation Trust continues to make significant progress in embedding sustainability within its digital strategy as part of our Green Plan commitments. For 2025 the focus remains on reducing carbon emissions, increasing operational efficiency, and leveraging digital transformation to improve patient care. Key achievements and ongoing initiatives include:

Small Form Factor PC's – we continue to move towards the transition to small form factor desktop devices across the estate. These compact, energy-efficient PC's not only consume less power but also reduce material use in manufacturing and packaging, supporting circular economy goals. All desktop PCs purchased within 24/25 financial year (approx. 700) were small form factor PCs.

Low- Power Network & Telecoms Infrastructure – TRFT has fully implemented within 2025 a low-energy network and telecoms architecture, replacing legacy systems with modern equivalents designed for high efficiency. This includes intelligent switching and routing systems with power optimisation features, helping to reduce our digital carbon footprint.

End- User Device (EUD) Recycling – We have strengthened our EUD recycling and reuse process, ensuring that all redundant IT equipment is either refurbished for reuse, securely wiped and donated where appropriate, or responsibly recycled via accredited partners. This supports both sustainability and digital inclusion goals.

Ongoing Digital Transformation – Our shift to digital-first services continues to accelerate. By expanding the use of cloud-based systems, digitising clinical workflows, and supporting virtual wards, we reduce reliance on physical infrastructure and paper-based processes. This transformation enhances care delivery while reducing emissions associated with travel, printing and estates usage. One successful example of a cloud implementation completed in 2024 by TRFT includes the financial system Aggresso.

PC Power Down Across the Estate – We have successfully rolled out automated PC power down policies across all departments working closely with estates. This initiative, aligned with the NHS's digital sustainability guidance, ensure that idle machines are powered down overnight and during periods of inactivity, significantly reducing unnecessary energy consumption.

TRFT remains committed to aligning its digital growth with national sustainability goals, supporting the NHS ambition to become the world's first net zero health system (Health and Care Act 2022). TRFT continue to complete the Digital Maturity Assessment (DMA) tool developed by NHS England to help providers and integrated care systems across England understand their level of digital maturity.

NHS England » Digital maturity assessment

5.0 GREEN PLAN FOUNDATION

The steps below will form the core of our Green Plan going forward:

- Ensure a board member is responsible for our net zero targets and Green Plan.
- Designate a Board lead to oversee our Green Plan development.
- Reduce our carbon footprint from fixed assets by continued investment in low and zero carbon solutions in building services.
- All new build and refurbishments to be completed to surpass those dictated by Part L of the building regulations.
- All new builds to achieve an EPC of A.
- All new builds to achieve a DEC of at least B on first 12-month anniversary of handover.
- Decommission the nitrous oxide manifold.
- Develop plans for clinically appropriate prescribing of lower carbon inhalers.
- Ensure that, for new purchases and lease arrangements, we solely purchase and lease cars that are ultra-low emissions vehicles (ULEV's) or zero emissions vehicles (ZEV's).
- Develop our green travel plan to support active travel and public transport for staff, patients and visitors.
- Ensure visibility is increased through significant visible leadership promoting sustainability.
- Set up strategic sessions to work through all elements and set up nominated strategic/operational leads.

6.0 TRACKING & REPORTING PROGRESS

The Good Corporate Citizenship (GCC) Tool has been developed by the NHS Sustainable Development Unit as a methodology for NHS organisations to measure and monitor their progress on sustainable development. The tool provides organisations with the means to monitor progress on the less easily quantifiable aspects of sustainable development in financial, social and environmental terms. The GCC Tool allows NHS organisations to assess their sustainable development performance across key areas and compare the result with national and regional averages.

TRFT will use the GCC Tool as a key metric to monitor the impacts from the implementation of the Green Plan. TRFT will undertake a baseline assessment for the GCC Tool in 2022, and an internal procedure will be developed to ensure the GCC Tool is completed as fully and accurately as possible and reviewed on an annual basis.

The Department of Health requires all NHS Trusts to report ERIC (Estates Return Information Collection) data. ERIC data comprises essential statistics on waste, energy and water (amongst other data sets) from Estates and Facilities. TRFT will benchmark performance with other acute Trusts, using ERIC Median Performance and relevant datasets from the Health Estates and Facilities Management Association (HEFMA), with a view to informing our performance within our peer group and in identifying further opportunities and best practice in energy and emissions reduction.

Progress on the implementation of the Green Plan will be reported annually through the Energy & Utilities Annual Report, the TRFT Emissions Baseline & Tracker, the Waste and Environmental Annual Report and TRFT's Annual Report.

7.0 SUPPORTING RESOURCES

7.1 TECHNICAL RESOURCES

TRFT will utilise one or more of the following technical resources in delivering the Green Plan:

- Delivering a net zero National Health Service report
- Greener NHS Dashboard
- Greener NHS Quarterly Data Collection documents
- Health Outcomes of Travel Tool (HOTT)
- Health Outcomes of Stationary Sources Tool (HOST)

7.2 FINANCIAL RESOURCE

Affordability is a key element of implementing the Green Plan. Many programmes will result in reduced running costs, albeit that investment may be required to implement some programmes. All programmes will follow standard procedures on cost impact and funding source, regardless of an external or internally funded investment. Where possible, external funding will be sourced, as described below.

7.2.1 Salix (Public Sector Decarbonisation Fund)

The Government backed Salix funding scheme for Public Sector Decarbonisation Fund (PSDF) will be explored to provide finance for projects to reduce carbon usage and emissions. We will put in place costed scheme submissions to enable appropriate applications for grant funding, to ensure the best opportunities materialise for TRFT.

7.2.2 Net Zero Hydrogen Fund

This funding aims to support the commercial deployment of low carbon hydrogen production projects through the 2020's https://www.gov.uk/government/publications/net-zero-hydrogen-fund-strand-1-and-strand-2

7.2.3 Internal Capital

Funding for energy and sustainability initiatives can also be considered by business case approval via internal Trust funding.

8.0 EQUALITY & DIVERSITY

In applying this plan, the Rotherham NHS Foundation Trust will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following nine protected characteristics by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation.

Alongside this, the Trust will seek to reduce health inequalities, and avoid exacerbating economic inequalities.

The application of this plan will include careful consideration of the access needs of disabled staff, patients and visitors.

9.0 MONITORING & REVIEW

This plan will be reviewed every three years as well as in accordance with any changes to relevant legislation, good practice guidelines or after a significant change in organisational structure. Where review is necessary due to legislative change, this will happen as soon as practicable after the change. Once ratified, the Green Plan will be disseminated to colleagues by way of the Hub.