Green Plan
2025/26- 2028/29

Annex A Green Plan Action Plan

Annex A: Green Plan Action Plan

1. Workforce and System Leadership

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Workforce and System Leadership Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
1	Assurance and governance: When will your Green Plan next be updated?	(Single select) • The end of the 2022/23 FY • The end of the 2023/24 FY • The end of the 2024/25 FY or later • We do not have a planned date to update our Green Plan	This is the first update of the SHSC Green Plan since the first version approved January 2022.	The Green Plan will be reviewed every 3 years or sooner if significant changes to SHSC or wider drivers for change occur. We will make recommendation in annual plan performance updates to Board if an update is required.	No equality impact considerations are applicable for this goal.
2	Assurance and governance: How often do you provide updates to your board on progress against your Green Plan?	(Single select) • Twice a year or more frequently • Annually • Every 18 months to two years • We do not regularly provide updates to our board	We will maintain annual progress reporting to Board, in conjunction with quarterly performance reporting against plan into the Finance and Performance Committee This committee provide assurance reporting to board every meeting in the form of Alert, Assure and Advise reporting.	Maintain existing reporting schedule and continuously seek additional opportunities for Board level discussions on SHSC Green Plan delivery and alignment to wider strategic priorities.	No equality impact considerations are applicable for this goal.
3	Does your organisation have a board-level representative with Net Zero work within their portfolio?	(Single-select) • Yes • No	Phillip Easthope, Director of Finance, IMST and Performance is SHSC Board-Level Net Zero Lead. We will seek to improve on Board-level representation with net zero work in their portfolio.	Monitor number of SHSC Board-level representatives with net zero work in their portfolios.	No equality impact considerations are applicable for this goal.

Workforce and System Leadership Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
4	We communicate our Green Plan and how to support its delivery to staff, patients, visitors and the local community.	(Single-select) • •Yes, the trust has tailored training, induction and communications related to their green plan • •No, the trust does not have tailored training, induction and communications for related to their green plan	Use communications as a tool to reap reputational benefits of this work, to promote lower carbon practices and the associated health benefits, to ease climate anxiety and to increase compliance and support for this agenda. In partnership with peer support workers and service user groups and experience and engagement team to seek opportunities to improve how we communicate our Green Plan to service users, visitors and the local community. Educate and raise awareness amongst our audiences on the reasons behind this work and the many benefits that this agenda is aiming to reach.	Monitor results of annual SHSC staff sustainability Survey. Monitor internal communication traffic and clicks on extranet sustainability pages, articles and blogs linked to Green Plan. Monitor external SHSC website and social media traffic on sustainability and green plan pages and related articles. Monitor social media statistics and sentiment.	Continue using best practice accessibility techniques and tools at all times.
5	Does your organisation encourage all staff to complete the introductory 'Building a Net Zero NHS' e-learning module?	(Single-select) • Yes, over 90% of staff have completed 'Building a net zero NHS' • Yes, over 45% of staff have completed 'Building a net zero NHS' • Yes, over 20% of staff have completed 'Building a net zero NHS' • No, less than 20% of staff have completed 'Building a net zero NHS'	We aim to have over 80% of staff to have completed 'building a net zero NHS' by the end of this Green Plan (2028/29)	We will monitor this via ESR staff training records.	No equality impact considerations are applicable for this goal.

Workforce and System Leadership Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
6	Does your organisation support those with additional responsibility for delivering net zero such as; Trust leaders, sustainability leads, and green champions to complete more advanced training?	(Single select) • Yes, more advanced training is available to staff with increased net zero responsibility • Yes, more advanced training is available to most staff with increased net zero responsibility • Yes, more advanced training is available to some staff with increased net zero responsibility • No, more advanced training is not available to staff with increased net zero responsibility	By 2028/29 we want more advanced training to available to any staff with a increased net zero responsibility. Our priority areas to provide advanced training are: • Board Level Training • Sustainable Development Group Focus Area Leads • Further integration of sustainability into wider Trust training e.g. QI training, Developing as Leaders Programme, SHSC Manager etc.	Does your organisation support those with additional responsibility for delivering net zero such as; Trust leaders, sustainability leads, and green champions to complete more advanced training?	(Single select) Yes, more advanced training is available to staff with increased net zero responsibility (1.0) Yes, more advanced training is available to most staff with increased net zero responsibility (0.5) Yes, more advanced training is available to some staff with increased net zero responsibility (0.2) No, more advanced training is not available to staff with increased net zero responsibility (0)
7	Does your organisation support those with additional responsibility for delivering net zero such as; Trust leaders, sustainability leads, and green champions to complete more advanced training?	(Multi-select) • Yes, net zero is reflected in the trust values and/or mission statement • Yes, net zero is reflected in job descriptions • Yes, net zero is reflected in staff appraisals • No, none of these	By the end of 2026/27 net zero will be reflected through out all stages of employment lifecycle (e.g. from recruitment, induction, appraisal etc.)		No equality impact considerations are applicable for this goal.

Workforce and System Leadership SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
8	We will measure our carbon footprint quarterly and we will analyse trends over time to help validate performance against our net zero emissions targets and ensure lessons are learnt.	Transparent and accessible reporting of our performance against our net zero emissions targets, alongside with establish governance processes to highlight what is going well and where risks arise for meeting our targets.	Quarterly carbon emissions performance report to Finance and Performance Committee for emissions in our 'NHS footprint' (Electricity, gas and water consumption, water, fleet and business travel emissions)	No equality impact considerations are applicable for this goal.
9	SusQI and consideration of 'Sustainable value' as part of transformation plans, integrated into QI approach and an increased number of QI projects with sustainability measures documented.	We will have a standardised approach to demonstrating the sustainability benefits of QI projects. Where negative impacts are anticipated, steps will be integrated with QI approach to mitigate and reduce where practicable.	>25% QI projects include sustainability measures. Monitor via the number of QI referrals which indicate on QI referral form a Sustainability domain the QI project impacts (Prevention, Service User Centred, Lean/Efficient/ Low Carbon Alternative)	No equality impact considerations are applicable for this goal.
10	We will increase the number of QI projects with a focus on Sustainability.	We will have a library of sustainability case studies which can be used to share best practice, roll out interventions at scale and demonstrate sustainability leadership. We actively encourage net zero/ sustainability projects in staff inductions, during annual business planning and include options to include undertaking net zero projects/behaviours in staff appraisals.	>10 applicants for Sustainability Award at annual SHSC Shine Awards >3 applications each year for external sustainability awards	No equality impact considerations are applicable for this goal.

Workforce and System Leadership SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
11	Create climate and sustainability networks within SHSC (or encourage staff to join existing networks e.g. at Place/ regional level or via Centre for Sustainable Healthcare) that support staff to champion greener and net zero mental health care delivery, challenge unsustainable practices within teams and promote the health benefits of sustainable practice.	Build on existing sustainable staff networks (e.g. Active travel group) and/ or integrate promotion of sustainable behaviours and environmental advocacy into existing staff network groups. E.g. Implementation of SHSC Sustainability network. We provide protected time to staff to engage in internal or external sustainability staff networks to learn and collaborate within areas of interest and expertise. We support our sustainability networks with regular updates and training to make their engagement effective and more impactful. In addition, we are building partnerships and opportunities to collaborate with our peers at place level and across the ICS driving forward delivery of cross-system interventions, nurturing innovation and sharing best practice.	Merits of establishing SHSC Staff Sustainability Network(s) and place and ICS network increased applied shared best practice, oversight of our interventions to provide guidance on how to ensure transformation is equitable and inclusive, increased opportunities to connect and collaborate on common goals and broader opportunities to engage with staff and partners across the city.	No equality impact considerations are applicable for this goal.
12	We have made carbon emissions 'visible' in key identified high carbon activities.	After mapping where the carbon impacts are of the SHSC mental health care pathway (using guidance and resources from Delivering Greener more sustainable and net zero mental health care guidance and recommendations) we are continually improving the information available on our carbon emissions via the SHSC sustainability dashboard.	An SHSC sustainability data dashboard available on Jarvis and an external version available on the SHSC website, updated quarterly with metrics to highlight green plan and sustainability performance.	No equality impact considerations are applicable for this goal.
13	We implement engagement campaigns that encourage staff and our service users to be more sustainable at home and promote healthy sustainable lifestyles, including promoting the health benefits of nature and green spaces (e.g. home energy and waste efficiency advice, active travel support, signposting green spaces etc.)	Educate and build knowledge of staff and service users of lifestyle changes that can support reduction of personal carbon footprints as well as support improved wealth, health and wellbeing. This will include targeted support, aligning to our population health and health inequalities workstream.	We will run at least 2 engagement campaigns	No equality impact considerations are applicable for this goal.

Workforce and System Leadership SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
14	Increase access to initiatives and discount schemes to purchase sustainable products and services. (E.g. review and enhance our offer of sustainable products, services and initiatives within our staff benefits offer.) for SHSC staff.	Alongside promoting existing staff benefit such as the cycle to work scheme and promoting the environmental benefits of purchasing ZEV/ULEV on salary sacrifice scheme, work within organisation development team and in collaboration with local city partners to development further opportunities for SHSC to access discount schemes and incentives to support sustainable lifestyle choices.	Increased numbers of staff accessing sustainable staff benefits or engaging with local incentive schemes and offers each year.	No equality impact considerations are applicable for this goal.

Low Carbon Care Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
15	Has your trust established clinical leadership, teams or working groups responsible for designing and delivering low carbon models of care at a clinical specialty or clinical department level?	(Single-select) • Yes – we have leadership within the clinical MDT (multidisciplinary team) for the delivery of low carbon care established within every clinical specialty and/or clinical department. • Partially – we have leadership within the clinical MDT for the delivery of low carbon care established within some clinical specialties and/or clinical departments. • Partially – we have clinical leadership for the delivery of low carbon care established across clinical care in general but have not yet established specialty- or department-specific leadership. • No, we do not have clinical leadership focused on the design and delivery of low carbon care pathways in any specialty or department.	Alongside our clinical teams being represented within our Sustainable Development Group, we will have established clinical leadership within clinical MDT for low carbon care and within every clinical speciality and/or clinical department. Increasing number of clinical staff engaged with and joining existing staff networks or establishing their own bringing together knowledge and sharing best practice on sustainable mental healthcare (e.g. Green Minds, Greener AHP, Mental Health Sustainability Network)	Sustainability principles and sustainable value are considered within design and improvement of our clinical pathways. Increasing number of clinical staff engaged with sustainability staff networks	No equality impact considerations are applicable for this goal.

Low Carbon Care Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
16	Within your trust, has the carbon impact of care delivery been considered through a clinical lens?* *focused on a specific clinical specialty, care pathway and/or clinical department (excluding inhalers and anaesthetic gases)	(Single-select) • Yes – we have identified specific practices, products and or procedures with high carbon intensity through a clinical lens. • Yes – we have identified and are implementing changes to decarbonise specific high carbon intensity practices, products and or procedures through a clinical lens. • Yes - we have identified and are implementing changes with demonstrable / measurable carbon reduction of specific high carbon intensity practices, products and or procedures through a clinical lens. • Yes - we have achieved all the above and are sharing this learning with other trusts within the ICB or region • No – we have not considered the carbon impact of any clinical specialty or care pathway	After mapping our clinical services to identify where high carbon intensity practices are apparent, We have identified and are implementing changes with demonstrable / measurable carbon reduction of specific high carbon intensity practices, products and or procedures through a clinical lens.	An extending library of case studies of examples low carbon care in practice at SHSC working towards sharing our knowledge and best practice with other Trusts and our partners.	We need to consider carbon impacts alongside inequalities and population health.

Low Carbon Care Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
17	What specific changes have been made to tackle areas of high carbon intensity within clinical specialties or care pathways (excluding inhalers and anaesthetic gases)?	(Multi-select) • No change implemented yet • Switched to lower carbon medicine alternatives • Reduced carbon through changes in choice, use, maintenance or disposal of medical equipment • Reduced use of single-use devices or consumables • Decreased staff, patient and visitor travel by optimising care location or increasing use of digital technologies to create clinical efficiencies – e.g. through remote monitoring, virtual appointments • Redesigned care pathways or treatment plans to lower carbon options • Other	Work in in progress to improve areas of high carbon intensity within our clinical specialities and care pathways, including recognition of where wins-wins can be achieved managing wider Trust priorities such as reducing out of area beds, reducing waiting lists, management of co-occurring physical health problems etc. Example High carbon intensity areas are: Service user, carer and staff business travel, reduction in carbon intensive interventions and the use of technology, equipment ad medical devices.	Evidence of embedded SUSQI approaches and using mechanisms to measure the carbon impact of service practices where available. Work is progressing to support the improvement and further development of supplementary tools to address existing gaps in capability to measure ad monitor high carbon intensity areas.	No equality impact considerations are applicable for this goal.

Low Carbon Care Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
18	Medicines: Are you taking action to identify and reduce wasted medicines?	(Multi-select) • Yes, by optimising pharmacy stock management • Yes, by tackling overprescribing • Yes, by reducing inappropriate polypharmacy • Yes, by addressing the safe and appropriate return or reuse of medicines • No	Engage in sustainable prescribing, adhering to principles such as lowest dose or increasing the time between administering doses to the maximum interval, best practice on how and when to stop medications and reducing polypharmacy.	Development and implementation of a mechanism to embed measurement of carbon impacts of prescribed medications. Identify a metric or measure we can use to monitor and report on interventions and processes implemented to reduce medicines waste. Development an education campaign for service users and/or carers on about not stockpiling medicines, only ordering the repeat medicines they need, appropriate medication and inhaler use and appropriate disposal of medicines.	No equality impact considerations are applicable for this goal.
19	Does your organisation considerably adapt its menus for patient meals to use more seasonal produce?	(Single-select) • Yes, at least 4 times a year • Yes, at least twice a year • Yes, once a year • No • We do not provide patient or staff catering (N/A)	Our nutritionist, catering manager, dieticians and procurement teams are working in partnership with our catering contracts and suppliers to include a requirements to maximise the use of fresh and seasonal food to minimise the need for transportation which exceeds government guidelines.	As a minimum menus for patients meals are adapted to use more fresh and seasonal produce at least twice a year.	Cultural and individual dietary needs should be met for patients and staff

Low Carbon Care Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
20	In your food service, have you identified opportunities to make menu options healthier and lower carbon by increasing the proportion of fruit, vegetables, beans, pulses or other low carbon ingredients/proteins?	(Single-select) • Yes, we have regular reviews and make continuous improvements • Yes, we have reviewed menus once and implemented the changes • No, but we plan to take action in the next 12 months • No and we do not plan to • N/A, we do not offer any food services (N/A)	We are using the NHS recipes and menu bank, net zero products savings calculator and working with our food suppliers to estimate the carbon impact of our menu options and have identified opportunities to introduce healthier and lower carbon options. Aligning to the recommendations in the Independent review of NHS Hospital Food our dieticians are working to build the nutritional knowledge of our service users ensuring they understand the benefits of well-balanced low carbon nutrition and how to make healthy sustainable food choices.	Established a baseline carbon estimate for our menu options and working towards lowering carbon impact as well as improved healthier options. Using "Greener by Default" approach to menu options providing patients to choice to opt in/out of meat and diary options.	Cultural and individual dietary needs should be met for patients and staff

Low Carbon Care SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
21	We will promote and work with nature, utilising green spaces and social prescribing to enhance and support more resilient clinical pathways.	Supporting service users to engage safely in activities outdoors as part of their care and treatment (for example, walking or gardening groups delivered as part of inpatient or community mental health treatment) Working closely with community services to embed social prescribing into practice and encourage the incorporation of social, community and outdoors activities (such as use of green spaces), into the delivery of routine care. Identified and mapped availability of green spaces and nature based interventions across our estate and by local catchment area to ensure clinicians have easy access to details of nature-based interventions available to patients locally Training is available to all clinical staff on how to integrate and embed nature-based approaches to mental health care into practice.	We have developed a map of SHSC "green estate" accessible for supporting service users to engage with nature safely outdoors. We have developed a map, in conjunction with local partners to provide a directory of green spaces and green social prescribing provision local to our acute inpatient sites and community bases across Sheffield. We have identified appropriate clinical roles which should incorporate training on nature based interventions and green social prescribing into their CPD and are monitoring an increased uptake of training in this field.	Consider the accessibility needs of patients with physical disabilities so that engagement in outdoor activities is made possible for all. Consider the availability of socially prescribed activities, which are likely to vary between geographical locations, so staff's ability to embed these approaches will depend on what is available locally for patients.
22	We will increase the amount of research projects with a sustainability focus at SHSC.	Together with our research department we will examine opportunities to participate in research projects that are linked to climate change healthcare interventions, climate resilience or sustainability. We actively seek opportunities to partner and collaborate on development of research projects linked to: • Low carbon mental healthcare • Impacts of air quality and climate change on mental healthcare delivery and the mental health of our service users/ population health • The health co-benefits of climate change mitigation and adaptation.	>2 research projects per year linked to climate change healthcare interventions, climate resilience or sustainability.	No equality impact considerations are applicable for this goal.

Low Carbon Care SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
23	We are focused on keeping people healthy, addressing the social determinants of health, with a focus on illness prevention; determinants include housing, poverty, isolation and employment	Prevention is embedded in the development of all our models of care, both internally and with external partners, to address the wider determinants of health and causes of illness.	We will identify an appropriate metric or measure to identify where preventative approaches have improved service user care and experience. E.g. .Potential to align to Health Inequalities data warehouse and flagging or number of services focused on early access, preventative approach such as At Risk Mental State Team in Early Intervention Service, work programmes within Waiting Well, Waiting Less Collaborative etc.	No equality impact considerations are applicable for this goal.
24	Making every contact count, to reduce the risk of mental health problems worsening, or preventable problems occurring, as a way to reduce the need for additional healthcare appointments and empowering service users to make positive changes to physical and mental wellbeing	We have a principle and process of using every contact (e.g. Make every contact count) to keep patients healthy, informed, in control, and independent (e.g. supporting patients to live more healthy and sustainable lives). All clinical staff knowledgeable and using the YHPHN MECC link website and SHSC Wellbeing resource, to aid a conversation when service users interact with our services to give people information to inspire positive change, and/or directing them where to go for further help.	Established methodology to report and monitor on the number of MECC approach to service user interactions. E.g. recording mechanism on EPR	No equality impact considerations are applicable for this goal.
25	Our Board is knowledgeable and able to make informed decisions linking the impacts of climate change and health, recognising the holistic health co-benefits of climate change mitigation and climate resilient health systems.	Our board has received training to build knowledge on the link between planetary health and population health, what low carbon and sustainable care models are, what our legal duties are and what they can do to inspire, lead and measure change to support Green Plan Delivery.	80% Board members received training.	No equality impact considerations are applicable for this goal.

Supply Chain and Procurement Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
26	Our organisation is engaging with its suppliers on the current and upcoming requirements in the Net Zero Supplier Roadmap	(Single-select) • Yes, we are engaging with our suppliers on current and upcoming requirements • We are engaging on current requirements, but not the upcoming ones • Not yet, but we will begin to within the next three months • No, we have not started to look at this	We are using tools and guidance available to us engage with all our suppliers on the up and coming requirements of the NHS net zero supplier roadmap as well as how they can support our green plan targets. Mechanisms for engagement could include: Sustainability as an agenda item at Contract Review Meetings Support and guidance, including signposting tot NHS Evergreen Assessment via SHSC Procurement webpage on SHSC Website Support and guidance to SHSC workforce on how to engage suppliers on sustainable supply chain requirements and net zero supplier roadmap.	>50% of SHSC strategic suppliers completed NHS Evergreen Assessment Establish our average Evergreen Assessment Score and monitoring for improvements in maturity.	No equality impact considerations are applicable for this goal.
27	Our organisation has identified all its suppliers that will potentially be impacted by the April 2023 Carbon Reduction Plan requirement (contracts > £5m p/a) as outlined in the Net Zero Supplier roadmap.	(Single-select) • Yes, and we shared the list with the Net Zero Procurement team • Yes, but we have not shared it with the Net Zero Procurement team yet • No, but this is in progress • No, our data does not enable this • No, we have not started to look at this	We include the CRP & NZC requirements in all relevant procurements and frameworks.	100% of all relevant procurements and frameworks include CRP and NZC requirements and supplier compliance is monitored annual during contract management reviews.	No equality impact considerations are applicable for this goal.

Supply Chain and Procurement Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
28	Our organisation ensures the inclusion of the minimum 10% weighting on Net Zero and Social Value in every tender.	(Single-select) • Included in every tender, with requirements embedded in our contract management approach and defined KPIs for each contract • Included in every tender, with requirements embedded in our contract management process, but no defined KPIs for each contract • Included in every tender but not yet embedded in our contract management approach • We have not fully developed our processes around embedding Net Zero and Social Value in every tender	We are including minimum 10% weighting on net zero and social value on every tender, with requirements embedded in our contract management approach and defined KPIs for each contract. Where appropriate the minimum 10% weighting should be considered for enhanced % weighting where product or service procured is deemed to have a high carbon intensity. We are ensuring broader workforce awareness of our obligations under the Social Value Act and the NHS net zero supplier roadmap requirements.	100% tenders and procurement frameworks include minimum 10% net zero and Social Value weighting. Wider SHSC workforce guidance and training on net zero and social value supply chain requirements available and signposted to appropriate job roles e.g. Via SHSC Manager training programme, Developing as Leaders etc.	No equality impact considerations are applicable for this goal.

Supply Chain and Procurement Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
29	Is your organisation taking action on copy paper?	(Multi-select) • Yes, we have taken action to reduce copy paper and have a plan to achieve 50% reduction • Yes, we have taken action to reduce copy paper but don't have an agreed plan to achieve 50% reduction • Yes, all purchased white copy paper is 100% recycled paper and we are taking action to introduce 100% recycled colour copy paper • Yes, all purchased white copy paper is 100% recycled paper, but we haven't changed colour copy paper • Some purchased copy paper is recycled paper but not all • No, but we plan to take action this year • No, and we do not plan to	Where clinically appropriate and practicable (i.e. where reasonable adjustments are not required) we are taking action to reduce the amount of copy paper and coloured paper we use. Initiative include: The procurement of recycled paper products by default Reducing paper usage in areas such as research, contract management & invoicing, pharmacy, virtual collaboration tools Alongside increased digitisation of paper documents via the implementation of our new EPR system we are exploring options for digital letters and text reminder systems Behaviour change campaigns and tools to educate and support staff to avoid paper consumption.	50% reduction in paper consumption compared to 2023/24 baseline by 202027/28	When considering digitisation of paper documents and records consider how digital poverty and digital literacy might affect access to documents and associated systems. Reasonable adjustments and accessibility considerations for people with Learning disabilities, visual impairment etc.

Supply Chain and Procurement Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
30	Is your organisation taking further action to move to circular models of supply that cut waste and shift local demand to lower carbon products in key intervention areas as set out in the Delivering a Net Zero NHS report?	(Multi-select) • Yes, for remanufactured medical devices, such as harmonic scalpels or EP catheters • Yes, for reusable catering plastics • Yes, to reduce single use clinical plastics • Yes, for reusable PPE, such as masks and gowns • Yes, for reusable clinical waste bins, such as reusable sharps bins • We are not currently acting on any of the above, but are exploring our options • No, and we have no plans to	After scoping works we have identified suitable QI projects, applying circular models of supply for: • Medical devices • Single use catering supplies such as coffee cups, cutlery etc. • PPE such as masks and gowns • Single use clinical plastics and efficient use of plastic waste bags. Trust wide engagement and education campaigns to seek identification and innovation to support further integration of circular models of purchasing. (Recognising the 5 R's of Sustainable Procurement)	By 2026/27 SHSC no longer procures single use drinking cups and dispensing cups unless reasonable adjustments are required. 10% reduction in single use products used each year based on 2023/24 baseline.	No equality impact considerations are applicable for this goal.

Supply Chain and Procurement SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
31	Our Procurement Team have access to training on the how we meet NHS Net zero and Social Value requirements, Procurement Policy note 06/20 and understand and how we can maximise the benefits of whole life costing and circular economy.	All of the procurement team are educated and engaged in delivering our green plan emissions targets and are competent to make sure we are compliant meeting requirements of NHS Net Zero Supplier Roadmap. Senior leadership within the procurement team (including the identified Sustainability Champion) and the procurement focus area lead have access to CPD events and local/national forums for sharing of best practice/innovation.	100% of procurement team have completed the Building a net zero NHS e-learning module and the net zero and social value e- learning module developed by NHS England and hosted by the Crown Commercial Function. Procurement focus area lead, procurement sustainability champion and other procurement senior leaders have completed intermediate or advance sustainability, carbon literacy or sustainable procurement training and accessing CPD events.	No equality impact considerations are applicable for this goal.
32	Using the Government buying standards and wider guidance to develop and deliver environmental product specifications (to encourage "greener by default" procurement and accounting for whole life costs of products and services) Products included in Government buying standards include: • Cleaning Products • Construction • Electrical Goods • Furniture • Gardening Services • Office ICT equipment • Paper • Textiles • Transport	All procurement activities, including tenders and frameworks meet the specified minimum government buying standards.	Implement robust governance processes to record and report on meeting standards to provide suitable data and transparency using specified metrics outlined in each buying standard. For instance minimum specifications recorded in contract specifications and due diligence checks carried out (where practicable) in contract reviews.	No equality impact considerations are applicable for this goal.

Supply Chain and Procurement SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
33	Embedding robust processes to identify, manage and mitigate ethical and labour standard risks and working with our suppliers to reduce the risk of exploitation poor ethical practice within our supply chains	DHSC Modern slavery risk management guidance on how to manage risks of modern slavery in supply chains is being applied meeting the modern slavery act (2015) and Procurement Policy Note 02/23. Our supply chains have been risk assessed to embed considerations of modern slavery into the procurement process (pre-procurement, selection stage, award stage, contract management and supply chain mapping) working with our suppliers using the Modern Slavery Assessment Tool.	Procurement team maintain a risk register of identified modern slavery and ethical labour standard risks within our supply chain. The risks are monitored for developments and mitigations against materialisation of risks. Modern slavery and ethical and labour standard risks are added as agenda items at contract review and when engaging with suppliers within high risk supply chain.	No equality impact considerations are applicable for this goal.

Adaptation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target (current position highlighted green)	Where do we want to be	How we will monitor progress	Equality Impact Considerations
34	Does your organisation have a plan for long-term adaptation to climate change?	(Single-select) • Yes – long term adaptation plan within our green plan • Yes – stand-alone long term adaptation plan • Yes – adaptation planning is included in the business continuity plan • No	We have a board approved plan for long-term adaption to climate- change. Supporting this we have a robust climate change risk assessment (CCRA) in place and risks and opportunities are integrated into SHSC risk management governance structure. Scope of risk identified includes climate-related operational risks and climate-related finance risks. We are proactively working to understand how project-level risk assessment on climate change- related risks can be used to support future resilience e.g. within estates capital project or major refurbishment planning. We are pro-actively working to identify opportunities to include adaptation and resilience in our policies.	CCRA is reviewed annually as a minimum and periodically as required to account for changes in the risk and vulnerability of SHSC e.g. after a climate change related event, enhanced knowledge received from UK climate change committee on future levels of risk, global impacts on climate-related risk (e.g. supply chains) etc. Risks and opportunities are assigned into urgency categories and risk and control measures integrated into a climate resilience and adaptation action plan (informing Long-term Adaptation Plan) We will report on the percentage of identified SHSC policies suitable to include adaptation and resilience have been reviewed and adaptation and resilience have been included.	Consideration of the inequalities associated with risks and opportunities is required- environmental health inequalities, as well as socioeconomic and demographic inequalities can impact on hazard, exposure, vulnerability and capacity to adapt.

Adaptation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
35	We have a monitoring process for overheating events and are taking action to mitigate ongoing risk especially in clinical and ward areas.	(Single-select) • Yes – we have a monitoring process and are taking action to mitigate risk • Yes – we have a monitoring process only • No	We have a monitoring process and are taking actions to mitigate the risks. We are seeking to continuously improve the monitoring process by encouraging our services and estates teams to record "near miss" overheating events so we have data availability to support and inform future overheating scenarios for our estate based on the latest UK climate modelling and increasing likelihood a of more extreme and pro-longed heat wave events in Sheffield. We have a transparent and coherent process for reporting over heating incidents at SHSC and a process to review impacts and lessons learned post event.	Over-heating related risks exposure and vulnerability across SHSC have been identified and risks are managed through Trust risk register.	Consideration of the inequalities associated with risks related to overheating events- consideration required for exposure, vulnerability and capacity to adapt based on growing evidence of the physical and mental health and wellbeing impacts of heat related exposure and stress.
36	Training on dealing with extreme weather events (e.g. heatwaves, flooding) is available to our work force.	(Single-select) • Yes • Under development • No	Key staff such as Heads of service, Directorate directors have access to and have completed training to increase their understanding of the climate change impacts and risks to NHS, SHSC and our community's climate risk and vulnerability including training on how to deal with extreme weather events.	By 2028/29 100% SHSC Senior Leadership Team have access to and have completed training/ attended awareness events related to climate adaptation and resilience.	No equality impact considerations are applicable for this goal.

Adaptation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
37	We have a monitoring process for overheating events and are taking action to mitigate ongoing risk especially in clinical and ward areas.	(Single-select) • Yes – we have a monitoring process and are taking action to mitigate risk • Yes – we have a monitoring process only • No	We have a monitoring process and are taking actions to mitigate the risks. We are seeking to continuously improve the monitoring process by encouraging our services and estates teams to record "near miss" overheating events so we have data availability to support and inform future overheating scenarios for our estate based on the latest UK climate modelling and increasing likelihood a of more extreme and pro-longed heat wave events in Sheffield. We have a transparent and coherent process for reporting over heating incidents at SHSC and a process to review impacts and lessons learned post event.	Over-heating related risks exposure and vulnerability across SHSC have been identified and risks are managed through Trust risk register.	Consideration of the inequalities associated with risks related to overheating events- consideration required for exposure, vulnerability and capacity to adapt based on growing evidence of the physical and mental health and wellbeing impacts of heat related exposure and stress.
38	We work with local stakeholders to identify key climate change risks (e.g. a local river flood risk) to ensure our contingency strategies and plans are collaborative, support sharing of resource and infrastructure where appropriate, and reduce the burden on a single agency.	(Single-select) • Yes • In progress • No	We have identified key internal and local stakeholders that should be considered within our adaptation work. We are working together to form partnerships that recognise shared best practice, shared priorities, where our individual adaption plans may impact on each other and are seeking opportunities to coordinate joint-action on adaptation in the short and long term.	We are actively engaged in Local Authority or Local Health Resilience Forums and events working on specific local climate change events- e.g. local flooding to ensure adaptation planning and business continuity planning is aligned.	Consideration of the inequalities associated with risks and opportunities is required- environmental health inequalities, as well as socioeconomic and demographic inequalities can impact on hazard, exposure, vulnerability and capacity to adapt .

Adaptation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
39	The effects of climate change (e.g. extreme weather events) are embedded in our Organisation's risk register, considering both clinical needs and estate and supporting infrastructure.	(Single-select) • Yes • In progress • No	The effects of climate change (e.g. extreme weather events) are embedded in our Organisation's risk register, considering both clinical needs and estate and supporting infrastructure and we are working towards developing team /service based risk assessments, feeding into team /service based adaptation action plans.	CCRA risks reviewed as a minimum annually CCRA is reviewed annually as a minimum and periodically as required to account for changes in the risk and vulnerability of SHSC e.g. after a climate change related event, enhanced knowledge received from UK climate change committee on future levels of risk, global impacts on climate-related risk (e.g. supply chains) etc.	Consideration of the inequalities associated with risks and opportunities is required- environmental health inequalities, as well as socioeconomic and demographic inequalities can impact on hazard, exposure, vulnerability and capacity to adapt .

Adaptation SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
40	Assigning clear role(s) for responsible person(s) within SHSC responsible for the coordination of adaptation planning.	We have engaged with colleagues to identify adaptation risk and opportunities across SHSC functions and have appointed named leads within service areas for specific adaptation actions and responsibilities. We have established appropriate governance e arrangements for adaptation planning and reporting against adaptation actions across service areas.	We have integrated a robust governance and risk management structures for adaptation and resilience communication and reporting across service functions.	No equality impact considerations are applicable for this goal.
41	Identifying whom in our communities are most vulnerable to the impacts of climate change and using this insight to inform future planning to reduce risk of compounding existing health inequalities	We are continuously improving our knowledge on the elements of climate-related risk and specifically where hazards are within our communities and who is exposure, vulnerable or has limited capacity to adapt/ react to climate-change events. We are working internally and externally with our partners in place to work collaboratively on equitable responses to climate change at a local level. We have mapped areas of vulnerability and are working on joint-plans to respond to and offer relief/ support to our communities before, during and after climate-change events. E.g. localised flooding, heat-wave events, air quality impacts etc.	Working at place level with our stakeholders we have mapped climate event risk across Sheffield.	Consideration of the inequalities associated with risks and opportunities is required- environmental health inequalities, as well as socioeconomic and demographic inequalities can impact on hazard, exposure, vulnerability and capacity to adapt .
42	We communicate our adaptation plans to staff and how they tie into our Green Plan and our major incident plans, ensuring our workforce are prepared to work effectively and safely within extreme climate/ environmental events.	We are regularly engaging and building the knowledge of our workforce on the impacts of climate change on resilience and our adaptation plans. Our workforce is prepared and trained to deal with different extreme weather scenarios (e.g. as staff know how to keep clinical and ward areas cool in the event of hot weather, and how to report high indoor temperatures.) and teams/services business continuity plans are reviewed annual or as required to include continuity planning during a climate change event such as heatwaves, flooding, adverse weather etc.	Our sustainability and green plan communications and engagement plan includes activities to promote and educate our work force on climate resilience and our adaptation plans. Climate resilience and adaptation is included in Emergency Preparedness Resilience and Response events for seasonal preparedness e.g. Winter Preparedness, Summer preparedness.	No equality impact considerations are applicable for this goal.

Estates and Facilities Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
43	Does your organisation purchase 100% renewable 'green tariff'/ REGO certified electricity?	(Single-select) • Yes • No	We shall continue, as far as reasonably feasible, maintain all electricity SHSC directly purchases are from Renewable Sources. We are continuing to assess if the benefits are additional and review alternatives capacity/ feasibility for alternatives e.g. on site renewables generation, power purchase agreements at scale or with local partners.	100% of SHSC Electricity purchases are REGO certified. (Action under review)	No equality impact considerations are applicable for this goal.
44	Do your sites have building level energy metering (sub meter or fiscal metering)	(Single-select) • Yes, we have building level metering across more than three quarters of our buildings • Yes, we have building level metering across more than half of our buildings • Yes, we have building level metering across more than a quarter of our buildings • Yes, we have building level metering across less than a quarter of our buildings • No, we do not have building level energy metering	We have added improvements to building level energy metering to our capital investment plan and seek external capital/ funding to progress delivery when available. We aim to have building level energy sub-metering across more then 3 quarters of our sites and we have costed delivery plans and are on track to meet the NHS Estate Net Carbon Delivery plan action to install department level energy metering by 2028-2030. We are working with our landlords at our rented/leased sites to obtain more accurate and transparent building energy consumption data for our occupied areas. .	We have an itinerary list of where all our building meter/ sub-meters are and have identified areas where enhanced sub-metering at floor/department level could be installed. >75% of our sites have building level energy metering (sub meter or fiscal metering) by 2026/27	No equality impact considerations are applicable for this goal.

Estates and Facilities Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
45	When lighting needs replacing, is it replaced with LED lighting?	(Single-select) • Yes, replacement across all sites is with LED lighting • Yes, some replacement is with LED lighting • No, we do not replace any lighting with LED lighting	We are continuing to roll out replacement LED lighting across our estate working towards the NHS Estate net zero carbon delivery plan target of 100% of lighting on NHS premises LED by 2030.	Reporting on total % of SHSC Estate with LED lighting.	No equality impact considerations are applicable for this goal. Considerations under the Culture of care work and links to becoming an autism informed organisation. This may have implications on the type and location of lighting across the Trust. LED may also offer opportunities to improve environment as well as reduce carbon impact.
46	Are you using your Building Management System (BMS) to monitor and manage your energy use?	(Single-select) • Yes, BMS is used to monitor and manage energy use across all sites • Yes, BMS is used to monitor and manage energy use across some sites • No, BMS is working but is not used to monitor and manage energy use across any site • No, there is no BMS in place or it needs upgrading and is not used to monitor and manage energy use across any site	We are continuously seeking opportunities to improve building energy management systems (BEMS) and building management systems (BMS) software and hardware to increase site coverage and make them compatible with existing installations to enable the systems to operate as intended, allowing Estates and Facilities function to use the information to make improvements to energy efficiency and thermal comfort of our sites.		No equality impact considerations are applicable for this goal.

Estates and Facilities Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
47	Do you have plans to increase electricity generated directly from renewable sources (off-site or on-site, excluding green tariff electricity)?	(Single-select) • No, site(s) assessed and there is no potential for solar off-site/on-site installation • We have recently completed a project to increase electricity generated from renewable sources • Yes and it is fully funded • Yes but it is not fully funded • No we do not have plans to	We have costed plans to increase electricity generated directly from renewable sources (off-site or on-site, excluding green tariff electricity) and we are beginning to apply enabling works for renewable energy generation projects across some of our sites. We are on track to meet the NHS Estates Net Zero Carbon Delivery Plan action for NHS foundation trusts to utilise zero carbon building energy, including renewable on-site or owned sources, to cover at least 80% of their emissions by 2028- 2032.	>80% reduction of our emissions by 2028-2032 (based on 1990 baseline)	No equality impact considerations are applicable for this goal.
48	What proportion of sites have a plan to decarbonise their heating?	(Single-select) 100% A minimum of 75% but less than 100% A minimum of 50% but less than 75% A minimum of 25% but less than 50% Less than 25%	We have developed Heat Decarbonisation Plans for 100% of our sites, utilising the Heat Decarbonisation Study findings, commissioned in July 2023.	Minimum 75% of our estate has a costed plan for decarbonising heating systems by 2026/27	No equality impact considerations are applicable for this goal.

Estates and Facilities Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
49	Have you assessed your clinical waste segregation?	(Single-select) • Yes, and we have plans in place to improve it • Yes, but we have no plans in place to improve it • No, we have not assessed our clinical waste segregation	We are maintaining compliance with the NHS Clinical Waste Strategy target for our clinical and healthcare waste mix to be 20:20:60 (20% HTI, 20% AT and 60% Offensive Waste) We have developed a waste minimisation strategy, where we have identified and started to take action to reduce our waste emissions aligning to other NHS clinical waste strategy targets.	Maintaining We will 20:20:60 waste split By 2028 80% reduction in carbon emissions produced from waste management.	No equality impact considerations are applicable for this goal.
50	Does your organisation have a digital meal ordering system for patient meals installed, as recommended by the Independent Review of NHS Hospital Food, to enable more accurate meal planning and reduce food waste?	(Single-select) • Yes, at all sites • Yes, but only at some sites • No, but we plan to in the next 12 months • No and we don't plan to in the next 12 months • N/A, we do not provide patient catering services	We recognise food as a form of medicine, and we have developed a plan and are beginning to roll out a digital meal ordering system across our sites which offer a food service leading to: a. Safe ordering and mapping to patients' care plans. b. Menu offers tailored to patients' dietary needs and personal preferences. c. Minimum time between ordering and meal service. d. Reduction in waste. We are beginning to review the benefits/ feasibility of linking digital food service application to our EPR.	>75% of our sites proving a food service have an operating digital meal ordering system	Consider digital literacy of staff and our service users with access to appropriate training/support as required

Estates and Facilities Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
51	At the site where you have the largest food service, how does your organisation measure the total amount of food waste produced?	(Multi-select) • Measured following the Guardians of Grub approach (https://guardiansofgrub.com/) • Measured manually at ward level or in the kitchen but without following the Guardians of Grub approach • Measured using on site food waste processing technology • Measured as part of a third-party waste management solution at pickup or off site • We do not measure food waste • N/A, we do not offer any food services	We have a food waste minimisation plan that not only recognises the sustainability and financial benefits of reducing food wase but also understands and is committed to addressing the associated malnutrition-related complications plates waste/under eaten meals poses to our service users. As per of the food waste minimisation plan we are continuously improving how we measure, record and use food waste data to inform meal planning etc.	We have a food waste minimisation plan and we are seeing a continued reduction in food waste.	No equality impact considerations are applicable for this goal.

Estates and Facilities SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
52	Our estates and facilities workforce and educated and engaged with our net zero emissions targets.	We have upskilled estates and facilities staff with resource and specialist knowledge of energy efficiency needed to drive transition to a net zero SHSC estate	Meeting NHS Estates Net Zero Carbon delivery plan actions to have access to energy management expertise (at least 0.5 FTE), funded from our own resources (to be achieved by 2023/24)	No equality impact considerations are applicable for this goal.
53	Continuously improving how we track, monitor and report on carbon reduction progress and trajectories for our 2030 net zero carbon emissions target.	We are continuously improving our approach to tracking, analysing and modelling our carbon emissions to maintain a continued reduction in our carbon emissions and inform future planning and decision making.	Continued total reduction of estate related carbon emissions (Taken from an aggregate of Waste, water, electricity and gas consumption emissions)	No equality impact considerations are applicable for this goal.
54	We are able to report on our progress towards achieving the targets and actions outlined in the NHS Estates Net Zero Carbon Delivery Plan.	Embedded within our estates and facilities processes we have a robust governance and reporting structure for providing assurance and alerting to failures to comply with the NHS Estates Net Zero Carbon delivery Plan. We are able to report and escalate risks to delivery both internally within SHSC and within regional governance structures e.g. SY ICS Estates Board.	NHS Estates Net Zero Carbon Delivery plan progress and performance reporting an ongoing agenda items at appropriate Facilities Directorate meetings.	No equality impact considerations are applicable for this goal.
55	We will transition away from all fossil fuels including gas by 2030.	We are prioritising plans reduce gas consumption through a whole building approach (I.e. considering the four-step process for minimising NHS building energy and water use, outlined in the NHS Estates Net Zero Carbon delivery plan) aiming to transition away from all fossil fuels including gas by 2030.	Monitored by the Estates and Facilities Sustainability Sterring Group we can report a continued reduction in gas consumption and associated emissions year on year keeping SHSC to be on track to meet 2030 net zero carbon emissions target.	No equality impact considerations are applicable for this goal.
56	We are driving forward circular economy thinking and are applying innovative approaches to eliminate waste or turn waste into a resource.	We have a waste reduction strategy aligning to the NHS clinical waste strategy targets and incorporating best practice outlined in HTM 07-01 safe and sustainable management of healthcare waste. The strategy outlines are actions to reduce our residual waste volume through; Sustainable procurement, Waste prevention and avoidance, Implementing a circular economy and Planning for sustainable disposal	Increasing financial and carbon savings realised from our reuse scheme. (Warp It)	No equality impact considerations are applicable for this goal.

Travel and Transport Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target (current position highlighted green)	Where do we want to be	How we will monitor progress	Equality Impact Considerations
57	Does your organisation purchase or lease solely vehicles (under 3.5 tonnes) that are ultra-low emission vehicles (ULEVs) or zero emission vehicles (ZEVs)?	(Single-select) • Yes • No • We do not purchase or lease any cars	Aligned to the NHS Net Zero Travel and Transport roadmap milestone we aim to have all new or leased vehicle in our fleet to be zero emission by 2027.	We will monitor existing fleet to assess when they are due for renewal and report to Board on an annual basis the percentage of our fleet which are already electric and how many are eligible to transition, outlining our performance against 2027 target and 2035 NHS Net Zero travel and transport strategy targets for all vehicles, owned or leased by the SHSC to be zero emissions.	No equality impact considerations are applicable for this goal.
58	Does your organisation's salary sacrifice scheme for vehicles allow for the purchase of only ULEVs or ZEVs?	(Single-select) • Yes, only ULEV/ZEV are available through our salary sacrifice scheme for vehicles • ULEV/ZEV are available alongside non ULEV/ZEV options through our salary sacrifice scheme for vehicles • We employ staff but do not have a salary sacrifice scheme • We do not employ staff	By the end of this Green plan we will aim to only offer ULEV/ZEV available through our salary sacrifice scheme for vehicles- with due consideration of the implications of an equality impact assessment.	We will monitor uptake of our vehicle salary sacrifice offer and better understand the types of vehicles purchased working with suppliers to find equitable ways to transition to allowing only access to ULEV or ZEV vehicles.	We will need to consider, as far as reasonably practical that we are equitable and inclusive with any amendments we make to the scheme to ensure we are not causing more employees to be unable to access to the scheme due to eligibility or person circumstances. E.g. considering how many low income/ part time employees we have.

Travel and Transport Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
59	What travel-related schemes do you operate across your organisation?	(Multi-select) • Park & Ride • Shuttle buses between two or more sites • Salary sacrifice cycle-to-work scheme (0.125) • Cycle training • Discounted public transport scheme • Third-party operated car club • e-bike/e-scooter hire • Staff travel survey within the last 12 months • Sustainable travel options included within staff induction • Staff webpage focused on promoting sustainable travel options • None of the above	Aligning to the initiatives outlined in our Sustainable travel plan we will aim to, where reasonably practicable offer as many of these travel related schemes as possible.	We will continue to track all travel related initiatives via a National accreditation scheme- Modeshift, Healthcare stars.	Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently.

Travel and Transport Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
60	Which local transport partners does your organisation work closely with?	(Multi-select) • Local Transport Authority • Local Highways Authority • Local Bus Operator(s) • Local Authority / council • None of the above	We have built on the relationships we have developed between local transport partners, SHSC and other NHS providers in the region to seek opportunities to work collaboratively on local transport schemes and incentives for NHS employees.	Through partnership working we have developed and implemented a regional travel incentive schemes, focused on offering additional support to our staff, visitor and service users to use local transport links to access our sites.	Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently.
61	What facilities does your organisation offer for people who arrive by a mode of active travel?	(Multi-select) • Cycle parking for staff • Lockers for staff • Showers for staff • Cycle parking for visitors • Lockers for visitors • Showers for visitors • None of the above	Within estates and facilities, we have an implementation plan developed to ensure we have a consistent approach, where feasible to facilities we offer to staff who arrive by active travel at any of our sites.	We will continue to track all travel related initiatives via a National accreditation scheme- Modeshift, Healthcare stars. Estates and facilities will report on a dashboard to monitor and track facilities on offer but also to communicate to staff and visitors to inform them of what facilities are available across the estate.	Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently

Travel and Transport SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
62	Reducing car use for staff commuting and business miles.	We want to report an increasing uptake of active travel, public and shared transport and zero emission vehicles to reduce staff commuting emissions working towards the NHS Net Zero Travel and Transport strategy of a 50% reducing in emissions by 2033 and all business travel mileage to be zero emissions by 2040. We will have data availability on the journeys made by our staff to report trends, implement and measure actions and inform decision making to reduce business mileage.	We track business mileage via the trust expense claims systems. We will track staff commuting and modal choices via an annual staff travel survey.	Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently.
63	Travel plan delivery on track and aligned to NHS Net Zero Travel and Transport Strategy.	Increasing amounts of our sites have improving travel plan accreditation ratings. (Moving up the ratings from an approved accredited travel plan, to good, very good, excellent and outstanding travel plan.) Develop impactful communications and content designed to engage our workforce, service users and visitors about our travel plan initiatives.	>60% of our sites have a good or very good accredited travel plan by 2028. NHS Net Zero Travel and Transport milestone- all NHS organisations to develop and incorporate sustainable travel strategies into Green Plans by 2026.	Travel plans and SHSC Sustainable Travel strategy must be equitable as far as reasonable possibly. Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently.

Travel and Transport SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
64	All new builds/ refurbishments projects will consider and make commitment to travel plan delivery from the earliest stages of the design and development.	As well as leveraging wider sustainability benefits our sustainable capital projects plan/process will assess all potential opportunities in new builds and major refurbishments that impact/generate significant areas of movement will be informed by the aims, objectives, and travel issues outlined in site travel plans, aligning to the National Planning Policy Framework (NPPF)	Where applicable, 100% of new builds/ refurbishment projects support or facilitate the delivery of travel plan initiatives. E.g. installation of bike compounds, showering facilities, lockers etc.	Consider reasonable adjustment to ensure that support active travel infrastructure is inclusive and accessible. E.g. Consider future considerations for storage of e-cargo bikes, trikes in bike compounds, disabled access to showring facilities etc.
65	We have implemented and advertised electric vehicle charging points at our key sites and they can be accessed by staff, patients and visitors.	Where capacity allows we have a growing infrastructure of electric vehicle charging points and we can offer access to vehicle charging points to staff and visitors, where they are not required for charging of SHSC electric fleet.	Ensure we are on track to meet, NHS Estates Net Zero Carbon Delivery Plan Action- By 2025 all Trusts to have installed EV charging infrastructure to support transition of their owned and leased fleet to zero emission vehicles (excluding ambulances) We have developed a plan, of deployment of EV infrastructure by identifying local/regional grid capacity and work with ICS, local network operators and/or local authority to plan for increased capacity where necessary to increase staff and visitor access to vehicle charg8ing points	Consideration for how social equity can be evaluated within future EV charging infrastructure provision, addressing the complexity of barriers to equity such as placement distribution, affordability electric vehicle purchases and monetary incentives.

Travel and Transport SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
66	We monitor the travel choices for our visitors, and service users and promote active travel and the use of public transport.	We have explored and are adopting an approach to monitor the travel choices of our service users and our visitors and are using data to inform opportunities to promote accessing our services via active travel or public transport and advocate and support the development of local improvements to transport networks for patient and visitor travel, especially around active travel. In addition, we are reviewing approaches, working with our partners across the City for patients to combine appointments or follow ups with other services (e.g. for service users with multiple complex-conditions)) to reduce the need for multiple appointments and journeys. This includes promoting the use of virtual appointment, where clinically appropriate to avoid journeys to a site.	Information on travel options provided to visitors on our external webpage. We provide the option of remote care delivery for patients using digital methods, where safe and appropriate.	Consider availability and accessibility of public transport, which varies between geographical locations especially urban and rural areas. Using active travel or public transport may not be possible or practical for some staff to work safely and efficiently. Consider how digital poverty affects access to the resources to engage in remote care for some patients. Digital literacy should also be considered for both staff and patients to ensure that access and engagement is not hindered by the provision of remote care in place of face-face-treatment. Face-to-face treatment should be provided as an option and it's benefits should not be disregarded in favour of remote care.

Travel and Transport SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
67	Procure and implement improved SHSC fleet management system to continue to deliver reduction in fleet emissions during the transition to a zero emission fleet.	Opportunities to have improved data transparency for monitoring and reporting of feet emissions will be adopted via the Procurement of a new fleet management system. Data is used to inform optimisation of fleet route planning and future fleet procurement activities.	Accurate reporting of fleet mileage and fuel consumption, demonstrating a continued reduction fleet emissions.	No equality impact considerations are applicable for this goal.

Green Digital Transformation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
68	Does your organisation have a commitment to meet the net zero carbon, sustainability and resilience ambitions set out in the Sustainable ICT and Digital Services Strategy (2020- 2025)	(Single-select) • No: There is no organisation wide commitment or plan in place • Yes: There is some commitment and/or plan in place • Yes: There is full commitment and a clear plan in place	There is full commitment and a clear green digital strategy in place incorporating the outcomes outlined in the Greening Government: ICT and Digital Services Strategy 2020-2025 _outcomes and objectives. This provides commitment to ensure our ICT infrastructure, services and supply chain are: • Reducing carbon and cost impacts • Increasing Resilience • Operated responsibly • Increasing transparency and collaborative working. • Increasing accountability for social and environmental sustainability impacts	Reporting an increased annual percentage improvement in the procurement of remanufactured/refurbished ICT promoting multiple usage lifecycles. We can evidence that ICT and digital services are designed with sustainability in mind via Digital PMO processes and Governance (DAAG)	No equality impact considerations are applicable for this goal.
69	Does your organisation host data in either low CO2 data centres or in hyperscale cloud (e.g. Amazon Web Services, Azure, GCP)?	(Single-select) • Yes • No	Discussions have commenced with Digital Directorate on approach to meet this Greener NHS Goal.	Establish a baseline for how much data is hosted in cloud/ low carbon data centres now to measure carbon impact and monitor for emissions reduction.	No equality impact considerations are applicable for this goal.

Green Digital Transformation Greener NHS Goals

Action Number	Greener NHS Goal	Greener NHS Target *(current position highlighted green)*	Where do we want to be	How we will monitor progress	Equality Impact Considerations
70	What circular economy principles does your organisation adopt, where practical, for digital hardware procurement?	Multi-select) • None • Internal reuse • External reuse • Leasing • Buying refurbished/remanufactured hardware • Buying sustainable devices (e.g. TCO certified) • Implementation of single-user device policy • Implementation of Bring Your Own Device (BYOD) policy	Integrated into our Digital Asset Management Strategy we are increasing opportunities to: • Reuse equipment internally and externally • Revieing new models of procurement including leasing of devices or buying refurbished/ remanufactured devices • Where feasible we procure products that are TCO certified sustainable products • After review of job roles and functions we are starting to understand and apply a single-user device policy.	Work with Digital Team to establish metrics and targets for this goal- Potential to utilise data from End User Device Asset Register and hardware review. As part of Digital Strategy Refresh, target development of a digital hardware policy and supporting Standard Operations Procedures (SOPs) for new, broken, decommissioned devices and confirm approach to refresh cycle for new devices.	No equality impact considerations are applicable for this goal.

Green Digital Transportation SHSC Goals

Action Number	SHSC Goal	Where do we want to be	How we will monitor progress	Equality Impact Considerations
71	Aligning to the SHSC Digital Strategy we provide education and support to our workforce on how to access and work efficiently on our IT systems to reduce resource use, save carbon and improve digital literacy of our workforce.	We have developed and are implementing a plan to improve the digital literacy of our workforce ensuring all SHSC staff know how to use various digital devices, tools, software and services successfully to support reduced security risks, increased productivity, improved employee satisfaction and the lowering of associated digital carbon emissions. • Within the plan an education and engagement programme has been developed including: • Guidance documents offered at onboarding and induction on how to use the Trusts digital systems. • Offer course and online resources of how to use software such as Microsoft word, excel, MS Teams etc. • Email charter and etiquette policy developed and promoted to reduce email traffic. • Assess the digital literacy of workforce via surveys. • Collaboration and sharing of best practice is encourage amongst SHSC workforce with Digital Forums and workshops	Improving rates of employee satisfaction with our digital systems and software. Improved Net Promoter Score	Consider digital literacy of staff, with access to appropriate training as required. Consider availability of alternative formats of the training documents and supporting training approaches e.g. online, in person, by job role etc.