

Our Green Plan

Our commitment to reduce our environmental impact, embrace new technologies, and improve access to health and wellbeing services.



Plan Review and Approval

This Green Plan has been sent for review and approval by key individuals from the following: Trust Green Group, Estates and Facilities, Infection Prevention and Control, Procurement, Information Management and Technology, Human Resources, Learning and Development, Pharmacy, Strategic Planning & Business Development, Quality Improvement, Digital Transformation, Clinical Directors, Emergency Preparedness Resilience & Response, NHS Property Services, Bellrock, and ISS.

The Plan was approved by the Trust Board on 8th July 2025

Foreword

At Berkshire Healthcare NHS Foundation Trust, we recognise that tackling climate change is not just an environmental responsibility – it is a fundamental part of delivering high-quality, sustainable healthcare. The climate crisis is a health crisis, already affecting our patients, communities, and the NHS itself. As a multi-site organisation, we have a significant environmental footprint, and we are committed to reducing our impact.

This three-year Green Plan is our roadmap for action, setting out clear, measurable steps to cut emissions and drive sustainability across our services. While we have made strong progress in recent years, we know there is much more to do. Our plan aligns with national NHS commitments and regional priorities, ensuring we play our part in achieving a net zero health service. Through innovation, leadership, and collective action, we will build a greener, healthier future for our patients, staff, and the communities we serve.

Paul Gray Chief Financial Officer Net Zero Lead and Executive Sponsor

Introduction

Berkshire Healthcare NHS Foundation Trust provides specialist community and mental health services across Berkshire, Oxfordshire, Berkshire West, Surrey and Hampshire. With a workforce of almost 5,500 staff, including 4,000 clinical staff and some 1,300 non-clinical staff, we operate from around 100 sites across the region, delivering care in people's homes, community clinics, and inpatient settings. Our services cover a wide geographical area, supporting a diverse population with varying health and socioeconomic needs.

As a community and mental health Trust, our sustainability challenges differ from those of acute hospital trusts. Most of our direct emissions come from our estate and travel and transport, as our teams travel extensively to provide care across the region. Additionally, our large, complex, and fragmented estate, which includes PFI sites, NHS Property Services-managed buildings, and leased properties, presents challenges in implementing sustainability improvements.

Reducing our emissions is not just an environmental imperative; it is essential for protecting the health and wellbeing of the communities we serve. Air pollution from transport is linked to respiratory disease, cardiovascular conditions, and mental health problems, increasing hospital admissions and placing a greater burden on our services. By cutting emissions and improving sustainability, we can help prevent illness, reduce health inequalities, and create a healthier environment for our patients, staff, and future generations.

Inaction carries significant risks – to health, to finances, and to equity – and may also result in legal and regulatory consequences. The Climate Change Act 2008 legally binds the NHS to achieve net zero, and the Environment Act 2021 introduces enforceable targets on air, water, and waste. The Health and Care Act 2022 requires organisations to integrate sustainability into decision-making. The latest NHS Standard Contract (2024/25) and the Care Quality Commission's updated assessment framework both emphasise environmental responsibility, requiring Trusts to take meaningful action to mitigate environmental harm.

In this context, our sustainability efforts also support several of the United Nations Sustainable Development Goals (SDGs), particularly:

- SDG 3: Good Health and Wellbeing by reducing pollution and building healthier environments;
- SDG 10: Reduced Inequalities by targeting action to reduce health and access disparities;
- SDG 11: Sustainable Cities and Communities through improved transport and infrastructure planning;
- SDG 12: Responsible Consumption and Production by reducing waste and promoting circular economy principles;
- SDG 13: Climate Action by embedding carbon reduction across our services;
- and SDG 17: Partnerships for the Goals by working with local and national partners.

Over the next three years, we will focus on prioritising sustainable transport solutions to reduce emissions from travel, while also investing in the energy efficiency of our estate and transitioning to more sustainable models of care. These actions will help support the NHS's ambitious net zero target for direct emissions by 2040, all emissions by 2045, and the interim target of 80% reduction (compared to 1990) by 2028-2032. We continue to deliver as much as we can though a combination of the resources made available by the Trust and sourcing external funding. We recognise that resource availability will ultimately govern the pace of change are able to make. Our plan will lay the foundations for long-term sustainability, creating lasting improvements for our local communities and staff, while reducing our environmental impact and enhancing the quality of care we provide.

Our Progress

Sustainability has been a key focus for Berkshire Healthcare for several years. We're committed to reducing our environmental impact, embracing new technologies, and improving access to health and wellbeing services. Here's a snapshot of what we've achieved so far:

| Cutting Carbon Emissions | 🚙 Greener Transport |
|--|---|
| 100% renewable electricity across all Trust sites Upgraded all lighting to energy-efficient LEDs across Trust-managed sites Completed heat decarbonisation plans and energy audits at key sites to aid net zero planning Secured over £2 million in public funding to provide clean energy to West Berkshire Community Hospital Implemented a checklist to embed sustainability in new property acquisitions | Installed 34 electric vehicle (EV) charging points at 8 sites Transitioned all Estates Fleet vehicles to electric Completed a comprehensive travel review, underpinning the development of a new Travel and Transport Strategy Installed active travel facilities – including secure bike shelters and showers – across our Estate 1 million fewer miles driven in 2023/24 compared to baseline (19/20) |
| Digital Innovation Recognised as a Global Digital | Investing in Renewable Energy Installed solar panels at 2 sites, with more |
| Exemplar (GDE) for digital transformation Introduced online consultations to improve access to care Launched a digital patient portal to reduce paper use | projects planned Carried out a feasibility study for a major solar farm at one of our hospital sites, which is now being pursued |

| ✤ Reducing Waste | 🜿 Enhancing Green Spaces |
|---|---|
| ✓ Introduced reusable tourniquets in clinical settings, saving over £1,000 a year and a | Developed nature and wellbeing gardens at Church Hill House. Wokingham Hospital. Whitley |
| tonne of waste | Health Centre, Abell Gardens, and West |
| Implemented recyclable pharmacy bags | Berkshire Community Hospital |
| and a recycled paper stationery contract | |
| Completed a comprehensive waste audit, | mammal boxes |
| underpinning the development of a new Waste Strategy | Planted a tiny forest alongside 65 trees |
| Reduced general waste by 10% since a 2017 baseline, and recycling around 140 | Commissioned a nature survey to lay the |
| tonnes a year | strategy |
| | |

Case studies

Clean Energy for West Berkshire Community Hospital

West Berkshire Community Hospital is one of our largest sites – and therefore one of our biggest carbon emitters – due to its reliance on a fossil fuel heating system. As part of our commitment to decarbonising our estate, we have secured over £2 million in public sector funding to transition the hospital to clean energy. This project will replace the existing gas heating system with heat pumps, cutting carbon emissions by around 350 tonnes annually – the equivalent of removing approximately 150 petrol cars from the road each year.

This investment builds on a series of green initiatives already in place at the hospital, including the planting of a tiny forest and 50 additional trees to improve air quality and combat extreme weather, as well as the installation of an award-winning therapy garden filled with pollinator-friendly plants and fresh produce, maintained by staff and a team of volunteers. By reducing emissions and improving local biodiversity, these projects contribute to both environmental sustainability and patient wellbeing.

The clean energy project is expected to be completed by 2026, enhancing the hospital's energy security and protecting against future price volatility. Alongside this, we are exploring a major solar farm installation to further reduce reliance on external energy sources. These improvements will ensure that West Berkshire Community Hospital continues to lead the way in delivering high-quality, sustainable healthcare for the future.

Enhancing Wellbeing Through Nature at Church Hill House

The new wellbeing and nature garden at Church Hill House is the latest example of our commitment to creating green spaces that benefit both the environment and staff wellbeing. Designed in collaboration with the Berks, Bucks & Oxon Wildlife Trust (BBOWT), the garden provides a peaceful retreat while supporting biodiversity and climate resilience.



The space has been carefully designed with nature-friendly plants, a bug hotel, wildlife pond (shown in the image above), and nesting boxes for hedgehogs, swifts, and house martins. Water butts help conserve water for irrigation, and reclaimed materials have been used where possible. A gazebo and seating area offer a dedicated space for staff to unwind, reflect, and connect with nature during their breaks. Green spaces like this play a crucial role in regulating temperature, reducing pollution, and lowering flood risks, while also improving mental and physical wellbeing.

The garden has already been embraced by staff and is used for outdoor meetings, with one colleague sharing: "I have worked across many Trust sites, and this is a wonderful space to have access to. I look forward to using it this summer." Another noted, "It's great to look out onto the garden from our office – hearing the birds and seeing the flowers bloom makes such a difference to the workday." By prioritising nature-friendly spaces across our estate, we are not only enhancing biodiversity but also creating healthier, more restorative environments for our staff and patients.

Where we need to be

Since our pre-COVID baseline year (2018/19), our Trust has reduced its carbon footprint by approximately 16.7%. In 2024/25, our direct carbon emissions were 4953 tonnes of carbon dioxide equivalent (CO_2e), down from 4981 tonnes the previous year (See Figure 1).

Our overarching ambition to be net zero by 2040, with an 80% reduction (compared to 1990) by 2028-2032, is still considered achievable but depends on the implementation of key initiatives, which have the potential to substantially reduce our emissions over the next five years and would therefore mean we reach our target. These include:

- Achieving a minimum of 10% carbon reduction from implementing recommendations from our completed decarbonisation plans and energy audits
- Implementation of key solar proposals, including a major solar farm

As demonstrated in Figure 2, our current emissions trend leaves a gap of 495 tonnes by 2030. Our Trust would need to reduce our emissions by a minimum of 7.2% a year to achieve the interim 80% reduction target by 2030. However, with the trends in emissions seen over the past two years, the required reduction rate is likely to increase.

If key proposed projects outlined above are implemented, we would meet or possibly exceed an 80% reduction by 2030. Decarbonising our largest emissions source in our estate, Prospect Park Hospital, which has 28 end-of-life (over 10 years old) gas boilers, is also critical.



Figure 1: Berkshire Healthcare's carbon emissions (CO2e) over time, broken down by Trustmanaged sites and NHS Property Services-managed sites, and all sites (Total). 2020/21 and 2021/22 are not shown due to these being COVID-19 years and therefore unrepresentative.



Figure 2: current trends in Berkshire Healthcare's carbon emissions, and projections based on two different scenarios. 'Funded projects' assumes achieving a 10% reduction in our energy emissions through implementing recommendations from our energy audits/decarbonisation plans, plus a further 330 tonnes CO₂e a year from exchanging gas boilers to heat pumps at West Berkshire Community Hospital (due for completion in 2026). 'Funded projects + solar farm' assumes a further 116 tonnes a year saving from installing a proposed solar farm at West Berkshire Community Hospital.

Continuing Challenges

Despite the progress we have made, we recognise that significant challenges remain in our journey toward net zero. As a community and mental health Trust operating across a wide geographical area, our travel-related carbon emissions make up a large proportion of our overall carbon footprint (around 20%). While we have reduced our mileage since our baseline, achieving further reductions will require a strategic shift towards sustainable transport, which is a key focus of our separate Travel and Transport Strategy (2025).

Our estate is highly fragmented, including two Private Finance Initiative (PFI) hospitals, three community hospitals and other properties managed by NHS Property Services, and multiple leased properties. This complexity makes it challenging to align all stakeholders around sustainability goals and limits our ability to invest in energy efficiency improvements for buildings we do not own. Additionally, much of our estate is aged with energy inefficient, costly-to-maintain buildings that require substantial investment to meet modern energy performance standards.

While we have successfully secured Public Sector Decarbonisation Scheme (PSDS) Phase 3c funding, many of our buildings are not eligible for current and immediate future rounds, creating funding gaps for critical sustainability projects. We will need to explore alternative funding routes and efficiency measures to continue decarbonising our estate.

Finally, staff engagement and education remain an ongoing challenge. While there is strong support for sustainability, competing priorities, high workloads, and a significant training burden

make it difficult to integrate sustainability education into mandatory training. We will work to embed sustainability into existing training pathways, ensuring staff feel empowered to contribute to our net zero ambition without additional pressures.

Focus areas

Our Green Plan aligns with NHS England's priority areas, as well as ICS planning. While we recognise the importance of medicines and food and nutrition in the NHS's sustainability agenda, these are not primary focus areas for our Trust due to the nature of our community and mental health services, as well as our limited inpatient facilities. Our strategy focuses on the areas where we can have the greatest impact, creating a greener, healthier future for our patients, staff, and communities.

Workforce and System Leadership

The transition to a net zero NHS will be driven by its people. With 9 in 10 (<u>england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2021/02/Sustainability-and-the-NHS-</u> <u>Public-opinion-survey-2015.pdf</u>) people supporting climate action in the NHS and 6 in 10 more likely to stay in organisations committed to sustainability, a greener NHS can help strengthen services and support retention. To achieve this, we need to empower our workforce with the skills, leadership, and opportunities needed to embed sustainability into everyday practice.

Berkshire Healthcare already has strong leadership in place, with our Chief Financial Officer as the Board-level Net Zero Lead and annual sustainability reporting to the Board, which is committed to ensuring strategic oversight, monitoring, and embedding of sustainability into decision-making. We are committed to further building workforce capability, supporting staff to learn, innovate, and drive change.

What we've done

- ✓ Appointed a designated board-level net zero lead to oversee green plan delivery
- ✓ Established a network of 'Net Zero Heroes' to help drive the sustainability agenda
- ✓ Run <u>Carbon Literacy</u> workshops, training almost 1% of staff to be certified 'Carbon Literate', and increased the training available to staff
- ✓ Established a Green Newsletter to improve staff knowledge and engagement
- ✓ Embedded sustainability into all staff job descriptions, ensuring everyone plays a role in reducing waste, minimising resource use, and supporting our net zero goal by 2040
- ✓ Implemented a flexible working policy, enabling staff to work from home and therefore reducing emissions from travel

What we need to do

- Assess workforce capacity and skill requirements for delivering our Green Plan, and upskill where necessary through core and specialist training
- Embed sustainability into roles, decision-making and workplace culture

Net Zero Clinical Transformation

We are committed to supporting the NHS's shift toward out-of-hospital and digitally-enabled care, particularly in mental health. We have a strong track record in this sphere, as the first of the seven Community and Mental Health NHS trusts in England to achieve Global Digital Exemplar accreditation. Our focus needs to be on delivering preventative, low-carbon care that improves patient outcomes and reduces health inequalities, including benefitting under-served communities, all while supporting the NHS's net zero goals.

What we've done

- ✓ Introduced online consultations to improve access to care and reduce travel
- Embedded sustainability considerations into projects through a sustainability impact assessment

What we need to do

- Appoint a clinical lead to drive forward net zero clinical transformation
- Embed sustainability into all clinical transformation and quality improvement projects, ensuring that environmental considerations become a core part of how we deliver high-quality, future-focused care
- Evaluate the sustainability impact of moving towards digitally enabled care to ensure it's having a positive impact against the 'triple bottom line' (people, planet, profit)

Digital Transformation

Digital transformation is essential for improving care quality, access, and efficiency while reducing emissions. However, they are not inherently low carbon. Digital services can also increase emissions if not managed properly, particularly through the energy demands of data storage, video consultations, and the use of multiple digital platforms.

To meet the objectives of the Greening government: ICT and digital services strategy, our Trust must therefore include sustainability considerations in the procurement, design, and management of all digital services.

What we've done

- ✓ Introduced autotimers to reduce power consumption through sleeping and switching off unused displays
- ✓ Moved local data centres to cloud-based services for efficiency
- ✓ Launched a digital patient appointment portal to reduce paper use
- ✓ Removed standalone desktop printers and shifting to shared, centrally managed printers
- Embedded sustainability into the procurement of digital services, and ensured that all outdated equipment is recycled responsibly

What we need to do

- Continue to deliver a digital-first approach for care pathways, so that patients can receive care in a place, time, and way that's best for them
- Support corporate teams to shift to digital ways of working

Estates and Facilities

Our Trust's geographically dispersed estate represents the largest source of direct carbon emissions, making it a key area for achieving significant reductions in line with net zero legislation. By improving energy efficiency and reducing emissions across our estate, we not only reduce our environmental impact but also increase resilience, lower costs, and enhance patient care. However, with buildings of varied efficiency and age, this is a significant challenge. Our heat decarbonisation plans (HDPs) and energy audits – which identify opportunities to transition to clean energy and save money through efficiency measures – estimated that upgrades needed to meet net zero across our managed buildings (i.e., not those managed by NHS Property Services) will cost in the region of £12.5 million. Due to the scope of works required, this will take time as well as investment.

As outlined in our HDPs, to meet net zero, our Trust needs to prioritise efficiency improvements through upgrades to building fabric (walls, floors, roofs, windows, and doors), in addition to transitioning away from fossil fuel heating systems and exploring opportunities for on-site renewable energy generation.

What we've done

- ✓ Completed heat decarbonisation plans (HDPs) and energy audits at 13 key sites, excluding those with short leases or those managed by other entities (NHS Property Services)
- ✓ Installed solar panels at 2 sites
- ✓ Carried out a feasibility study for a major solar farm at West Berkshire Community Hospital
- ✓ Secured over £2 million in government funding to decarbonise West Berkshire Community Hospital
- ✓ Achieved 100% LED coverage at Trust-managed sites
- ✓ Purchase 100% renewable energy

What we need to do

- Improve energy efficiency through a fabric-first approach, such as insulation and double-glazing
- Replace fossil fuel heating systems with lower carbon alternatives, such as heat pumps
- Increase use of renewable energy by investing in on- or near-site renewables
- Develop business cases to deliver the measures outlined in heat decarbonisation plans

Travel and Transport

After utilities, transport is the second largest contributor to Berkshire Healthcare's direct carbon footprint. The NHS fleet is also a significant contributor to health problems due to air pollution, which claims 36,000 lives a year in the UK alone.

The NHS England Net Zero Travel and Transport Strategy aims to address this issue by fully decarbonising its fleet by 2035, and outlines a number of targets to guide this transition. These goals, alongside our recent commissioned Travel and Transport Review, conducted by the Energy Saving Trust, are shaping our Trust's strategy to reduce emissions, optimise fleet usage, and promote sustainable travel options for both staff and operations, supporting our commitment to achieving net zero.

What we've done

- ✓ Completed a comprehensive review of travel and transport at the Trust
- ✓ Initiated a staff travel survey for monitoring and reporting
- ✓ Transitioned all Estates vans to electric vehicles
- ✓ Developed an EV policy and installed 34 EV chargers at 8 sites

What we need to do

- Complete the development of the Sustainable Travel and Transport Strategy to reduce mileage from fossil fuel vehicles and associated emissions
- Support the transition to electric vehicles through policy changes, salary sacrifice schemes, and expansion of our charging network, ensuring accessibility and affordability and promoting to staff through simple guides
- Support and encourage staff to use greener modes of transport
- Improve monitoring and reporting of staff travel through annual surveys

Supply Chain and Procurement

The NHS supply chain and procurement is the largest contributor to the NHS' direct carbon footprint and accounts for approximately 62% (<u>bmj.com/content/385/bmj-2024-079259</u>)of total carbon emissions, and is therefore a clear priority area for the Green Plan. Reducing carbon will require a greater understanding of emissions across the supply chain to identify opportunities for action, and embedding circular solutions – such as reusable or recycled products – where possible.

What we've done

- ✓ Developed a sustainable procurement policy
- ✓ Ensured that all corporate contracts >£50k incorporate business continuity planning for the impact of extreme weather
- ✓ Incorporated social value into all major contracts (assessed at 10%), and carbon reduction is a mandatory criterion within this
- Implementing a graduated approach to extend Carbon Reduction Plan requirements to all contracts

What we need to do

- Save money and emissions by reducing reliance on single use products in line with the Government's Design for Life Roadmap (<u>gov.uk/government/publications/design-for-life-roadmap</u>)
- Monitor suppliers' progress towards net zero commitments, and promote their completion of the Evergreen Assessment
- Implement supply chain carbon monitoring to establish a baseline and emissions reduction targets

Adaptation

Most expected impacts of climate change are negative, with weather extremes becoming more frequent and intense, impacting service delivery through logistical and infrastructure challenges, as well as affecting the physical and mental health of our community. Climate change will therefore bring an associated burden on service delivery that must be appropriately and adequately planned for to prevent our services from becoming overwhelmed. Resilience and adaptation should therefore be built into business continuity, risk and compliance processes, and longer-term planning to avoid climate-related service disruptions.

What we've done

- ✓ Implemented a Sustainability Impact Assessment for new capital projects to ensure the effects of climate change are factored into decision-making
- Developed a Sustainability Checklist for new properties to embed climate considerations into site selection decisions
- Disseminate weather health alerts and relevant messaging, in line with the government's Adverse Weather and Health Plan

What we need to do

- Set out actions to prepare for severe weather events and improve climate resilience of local sites and services, including digital services
- Implement the Climate Change Adaptation Plan

Food and Nutrition

A well-balanced diet supports overall well-being, while the way food is produced, sourced, and consumed has significant impacts on carbon emissions, biodiversity, and resource use. By promoting plant-forward diets, reducing food waste, and prioritising sustainable sourcing, we can improve patient and staff well-being while cutting our environmental impact.

What we've done

- ✓ Send food waste from wards to anaerobic digestion
- ✓ Introduced on-site composting at West Berkshire Community Hospital, used to grow fresh fruit and vegetables at the hospital
- ✓ Implemented electronic food ordering at Prospect Park Hospital to reduce food waste
- ✓ Improved monitoring and reporting by measuring food waste at the ward-level
- ✓ Increased plant-based menu options to support World Vegan Month and Veganuary

What we need to do

- Reduce food waste
- Explore opportunities to make menus healthier and lower carbon, for example using seasonal fruit and vegetables and replacing meat with legumes, while maintaining affordability

Medicines

As a community and mental health trust, our challenges related to medicines and their environmental impact differ from those faced by acute trusts. While medicines account for around 25% of NHS emissions overall, with significant contributions from anaesthetic gases (2%) and inhalers (3%), these are less prominent within our services. However, there are still valuable opportunities to reduce the environmental impact of our medicines, minimise waste, and promote responsible prescribing practices that benefit both patient care and sustainability.

What we've done

- Removed nitrous oxide manifolds and shifted to smaller portable cylinders, reducing waste and emissions from leaks
- ✓ Run a glove reduction initiative, saving 1 million gloves and £60,000 in one year
- ✓ Introduced reusable tourniquets, saving over £11,000 and a tonne of waste in a year-long trial

What we need to do

- Support low-carbon respiratory care
- Encourage correct inhaler disposal to reduce waste
- Collaborate with social prescribing teams to embrace low-carbon, high-quality care

Carbon savings opportunities

The Action Plan that follows sets out how the Green Plan will be delivered, presenting high-level objectives for each focus area alongside targeted actions, timelines, responsibilities, and success measures. While it is not possible to calculate potential emissions reductions across every action, those with quantifiable impacts have the potential to cut the Trust's emissions by over 1,000 tonnes — equivalent to around 20% of 2025 levels. Achieving these reductions would put the Trust on track to exceed its interim goal of 80% of emissions cut by 2032 (vs 1990 levels). However, successful delivery will depend on both practical feasibility and available



Action plan

| Area of focus | Workforce and System Leadership | | | |
|--|---|---|---|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Increase staff-led sustainability action by embedding it into everyday roles, decision-making, and workplace culture | Use existing digital platforms to empower staff with practical actions and track progress Require all business cases to include a sustainability impact assessment, embedding environmental considerations into decision-making and ensuring long-term resilience, and provide appropriate training to staff Integrate sustainability into annual appraisals to ensure all staff consider and demonstrate how they proactively integrate sustainable practices into their role, reducing waste and resource use | Platform available Business case template amended Appraisals forms amended | Sustainability Manager Director of People | 2026 |
| Strengthen workforce capacity to effectively deliver the Trust's sustainability commitments, ensuring effective waste, | Refresh and expand Net Zero Heroes network to improve engagement and identification and delivery of actions Secure dedicated resources for waste and energy management to meet NHS Standard Contract and Clinical Waste Strategy requirements, through | Net Zero Heroes recruitment Resource utilisation rate | Sustainability Manager Director of Estates & Facilities | 2027 |

| environmental and energy management and monitoring | recruitment, contracting, or shared central resources (minimum 0.5 FTE each) Ensure that at least 80% of staff in Procurement, Estates and Facilities complete at least one core or specialist sustainability training module, with training uptake monitored quarterly and reported annually | Number of training sessions offered Number of trainees | Chief Financial Officer | |
|---|--|--|---|------|
| Ensure sustainability is a core leadership priority, integrated into decision- making, funding allocations, and strategic planning to support high-quality patient care | Ensure all opportunities are taken to source external funding to support / supplement Trust funding allocated to achieve net zero and interim targets Provide Board-level sustainability leadership training | Funding allocated Number of Board members completing sustainability leadership training | Chief Financial Officer Sustainability Manager | 2026 |

| Area of focus | Net Zero Clinical Transformation | | | |
|---|---|--|--------------------------------------|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Embed sustainability within health services to reduce emissions while improving care quality | Appoint a Clinical Lead with oversight of net zero clinical transformation, with formal links into board- level leadership and governance Integrate sustainability principles into all clinical transformation projects, for example through a sustainability impact assessment, and use data to monitor and report on progress, ensuring alignment with NHS sustainability goals | Clinical lead appointed Emissions reduced | Chief Operating Officer | 2026 |
| Embed sustainability into quality improvement projects that reduce emissions while enhancing care, efficiency, and equity | Use regional funding to provide sustainable quality improvement training for staff through the Centre for Sustainable Healthcare Embed sustainability into the QI project charter template to ensure all projects consider environmental impacts, include measurable sustainability goals where applicable, and use data to track outcomes. Share learning and results through clinical networks and partners to support system-wide improvement. | Number of staff trained | Sustainability Manager Head of QI | 2026 |

| Area of focus | Digital Transformation | | | |
|---|---|---|---------------------------|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Improve communication while reducing paper consumption and associated emissions by adopting a digital-first approach | Digitise all appointment letters through the implementation of a new patient portal Enhance patient-initiated information via digital methods across services Ensure a consistent, digital-first approach to sending documentation to non-patient third parties (GPs, local authorities, etc) Support corporate teams to use digital forms over printed forms | Reduction in paper consumption Increase in the number of patients supported by digital- augmented care delivery | Chief Information Officer | 2028 |
| Increase the availability and quality of care, while reducing associated care miles, by providing more virtual patient support and care pathways where clinically appropriate | Continue to expand on digital monitoring and intervention to offer patients choice of where, when and how their care is delivered, to reduce associated care miles, achieving 79,000 patients supported by digital augmented care delivery by 2026, with further expansion to 2028 | Increase in number of patients supported by digital- augmented care delivery | Chief Operations Officer | 2026 |

| Area of focus | Estates and Facilities | | | |
|---|---|--|-------------------------------------|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Reduce emissions from buildings through energy efficiency measures, renewable energy generation, and transition away from fossil fuel heating systems | Implement a multi-year energy reduction plan for priority sites, aiming for a 10% reduction in utility emissions by 2028 (vs. 2024/25, equating to 300 tonnes CO ₂ e), by using HDPs to identify and deliver energy efficiency and renewable energy measures, developing business cases, and seeking PSDS funding where internal budgets are insufficient Achieve zero carbon energy for at least 80% of Trust utility emissions by 2032 (compared to a 1990 baseline) through a combination of renewable heating systems, energy efficiency measures including insulation upgrades, and on-site renewable energy generation, with an interim target of 33% by 2028 (equating to a reduction of around 1,000 tonnes compared to the 2019 baseline) Phase out gas in all hospitals by 2032 at Trust- managed sites and through to 2028 (equating to around 500 tonnes CO ₂ e), replace end-of-life boilers with renewable heating Install solar panels at a minimum of one site per year until 2028 and pursue a major solar farm at West Berkshire Community Hospital (equating to around 110 tonnes CO ₂ e) | Emissions reduced Number of gas boilers Number of renewables installed BMS improvements implemented LED coverage | Director of Estates & Facilities | 2028 |

| | Work with PFI and NHSPS partners to increase use of LED lighting to achieve 100% coverage by 2028 | | | |
|--|--|--|-------------------------------------|--------------|
| Reduce water consumption | Install leak detection systems across 80% of Trust- managed sites by December 2026 Invest in water conservation measures at Trust- managed sites – such as low-flow plumbing fixtures, rainwater and greywater harvesting, to achieve 10% water reduction by 2028 compared to 2025 (around 3,000M ³ , saving around 1 tonne of CO ₂ e) | Number of sites fulfilled Number of measures, sites Water use (M3) | Director of Estates & Facilities | 2026 2028 |
| Improve energy monitoring and reporting | Install smart meters at all Trust-managed sites Evaluate the cost/benefits of real-time energy monitoring and analysis platforms and implement if a sufficient ROI can be achieved (achieving at least 5% reductions in energy consumption and utility costs, equating to around 100 tonnes CO ₂ e) | Number of meters | Sustainability Manager | 2026 |
| Support nature and wellbeing by improving biodiversity | Conduct biodiversity surveys at key sites Use findings from biodiversity surveys to develop a Biodiversity Strategy aimed at supporting nature and wildlife | Number of surveys Strategy implemented | Sustainability Manager | 2026 2027 |

| Improve waste management to reduce associated costs and carbon | Improve clinical waste segregation through staff awareness, education and training, and providing sufficient infrastructure and facilities, to achieve targets of 20% High-Temperature Incineration (HTI), | Waste volume | Head of Compliance & Risk/Training & Compliance Lead | 2026 |
|--|--|---|--|------|
| | 20% Alternative Treatment (AT), and 60% Offensive Waste (OW) Achieve a 50% reduction in carbon emissions produced from waste management by 2026, progressing to an 80% reduction by 2028-2032 (compared to a 1990 baseline), at Trust-managed sites (equating to around 4 tonnes CO ₂ e) Assess the feasibility of introducing uniform reuse and recycling schemes so that no end-of-life uniforms go to waste | Waste emissions Number of uniforms recycled/reused | Sustainability Manager | |

| Area of focus | Travel and Transport | | | |
|---|---|--|--|------------------------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Develop a comprehensive travel strategy and implement recommendations to decarbonise travel and transport | Produce a Trust Travel and Transport Strategy that supports Berkshire Healthcare's net zero goal by March 2026 Implement Travel Strategy recommendations, including agreement on interim targets to 2028, to reduce business travel emissions by 50% (around 400 tonnes CO ₂ e), and commuting emissions by 10%, by 2033 | Strategy ratified Implementation of recommendations Emissions reduced | Sustainability Manager | 2026 2028- 2033 |
| Transition to a zero-emission vehicle fleet and support staff adoption of electric vehicles | Ensure all new Trust-owned and leased vehicles are zero-emission, replacing existing fossil fuel fleet vehicles with EVs upon renewal in December 2026 Offer only zero-emission vehicles through the salary sacrifice scheme from December 2026 (saving around 70 tonnes CO ₂ e, in conjunction with the action outlined above) Expand EV charging infrastructure based on usage and capacity evaluations Provide staff with online information, and learning sessions, on battery electric vehicles (BEVs) to support uptake | Number of BEVs Policy change Number of chargers Number of sessions and attendees | Head of Financial Services Head of Estates Sustainability Manager | 2026 2028 From 2026 |

| Raise awareness of the importance of, and support, green and active transport for employees | Ensure relevant information is made available through intranet and websites Use the Net Zero Hero network to drive forward transport-related initiatives across the Trust, supported | Page views Number of | Sustainability Manager/ Communications Officer Sustainability Manager | 2026 |
|--|---|--|---|-----------------------|
| | by leadership Review facilities (secure cycle sheds, lockers, showers) at sites, refurbish and fit as necessary | campaigns Coverage of facilities | Sustainability Manager/Head of Facilities | |
| Improve travel data collection and monitoring to identify and evaluate opportunities for emissions reductions | Conduct annual travel surveys and consider methods to increase participation from employees | Response rate | Sustainability Manager/Communications Officer | Annually from 2025 |

| Area of focus | Supply Chain and Procurement | | | | |
|---|--|--|---|----------------|--|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date | |
| Embed sustainability into procurement decision-making and supplier engagement | Extend Carbon Reduction Plan (CRP) requirements to all procurements in a proportionate, relevant manner in line with the NHS Net Zero Supplier Roadmap Review and update Trust procurement policies in line with the NHS Net Zero Supplier Roadmap Encourage and support suppliers to complete the Evergreen Sustainable Supplier Assessment | All contracts are required to have a CRP or net zero commitment | Head of Procurement | 2028 | |
| Reduce supply chain emissions and improve data transparency | Establish a baseline for supply chain emissions and monitor progress annually Set emissions reductions targets against the established baseline and aligned with the NHS goal of 80% reduction by 2036-2039 | Baseline calculations | Sustainability Manager / Head of Procurement | 2027 2027 | |
| Promote circular and low- impact procurement practices | Prioritise reusable and circular products, especially in medtech and consumables, where clinically appropriate Train procurement teams on circular economy principles and lifecycle impact assessment Implement NHS "Design for Life" principles in procurement decisions to reduce waste and preserve value | Reduction in single use MedTech products procured | Head of Procurement Sustainability Manager Clinical Directors | 2028 | |

| Area of focus | Adaptation | | | |
|--|--|---|--|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Strengthen the Trust's resilience and preparedness to climate change and the impacts of extreme weather | Implement the Trust's Adaptation Plan to effectively prepare for and respond to the current and future impacts of climate change Develop a Climate Change Risk Register as part of business continuity plans to identify and evaluate risks posed to estates, facilities, services and operations | Number of Plan actions delivered Completion of register using the Climate Change Risk Assessment Tool | Sustainability Manager Chief Operations Officer | 2026 |
| Enhance estate resilience and adaptation to climate change through the integration of green infrastructure | Carry out sustainable urban drainage system assessments at relevant Trust-managed sites Explore the feasibility of introducing living walls and roofs Plant 50 trees per year | Site coverage Number of trees planted | Head of Estates Sustainability Manager | 2028 2028 |

| Area of focus | Food and Nutrition | | | |
|--|--|----------------------|---|----------------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Reduce food emissions while enhancing service user health by cutting waste and ensuring the provision of nutritious and sustainable menu choices | Reduce food waste to below 3% in community wards, and below 7% in mental health wards Collaborate with NHSPS and PFI providers to implement Trust-wide electronic food ordering systems Collaborate with catering providers to optimise patient and nursery menu choices by increasing the proportion of climate-friendly, seasonal, nutritious options that align with patient preferences and nutritional needs | Food waste volume | Head of Facilities/PFI and NHSPS Managers Head of Facilities/Lead Dietician/Nursery Manager | 2028 2026 2026 |

| Area of focus | Medicines | | | |
|---|---|--|--|----------------|
| Objective | Key Actions | Metrics | Responsible person(s) | Target date |
| Reduce emissions and waste associated with medicines | Explore integrating inhaler choice into the patient medicines reconciliation process to ensure prescribing is rational, appropriate, and aligned with sustainability goals, reducing waste and unnecessary emissions Improve patient education on correct inhaler technique to maximise effectiveness and reduce waste, for example through the provision of educational materials, while ensuring clear guidance and facilities for the proper disposal of inhalers and general pharmaceutical waste Standardise prescribing practices in line with the system-wide formulary to reduce unnecessary variation and minimise waste Establish a structured approach to encourage and support pharmacy staff in identifying and implementing sustainability initiatives, such as reducing medicines waste and improving recycling and disposal processes Collaborate with social prescribing teams to explore the implementation of high-quality, low-carbon care, such as green social prescribing | Consistent system-wide patient education initiatives Implementation of standardised prescribing practices Number of initiatives progressed | Chief Pharmacist/Pharmacy Operations Manager Chief Pharmacist/Pharmacy Operations Manager/Head of Facilities Chief Pharmacist/Pharmacy Operations Manager Chief Pharmacist Operational Directors | 2027 |

Governance

The delivery of this Green Plan is overseen by the Trust Green Group chaired by the Trust's Net Zero Lead, the Trust's Chief Financial Officer. Progress is reported to the Trust Board on an annual basis and a summary is published in the Trust annual report. Progress is reported bimonthly to and overseen by the Trust Green Group and reviewed regularly by the Sustainability Manager and Head of Compliance and Risk.

Its delivery is coordinated by the Trust's Green Group and other associated Green Groups, including the Trust Estates and Facilities Management Green Liaison Group.



Risks

| Risk | Description | Likelihood (1-3) | Impact (1- 3) | Score (L x I) | Mitigation |
|----------------------------------|--|---------------------|------------------|------------------|--|
| Funding availability | Limited internal funding and eligibility for external grants (e.g., PSDS) may hinder ability to fund large-scale decarbonisation. | 3 | 3 | 9 | Prioritise cost-effective projects, seek alternative funding, plan phased investments. |
| Workforce capacity | Increasing workload as we approach net zero targets; lack of in-house expertise in energy and waste management. | 3 | 2 | 6 | Upskill existing staff, consider outsourcing to specialists or digital platforms for efficiency. |
| Staff engagement | Low staff buy-in could result in missed opportunities, reduced impact, and poor compliance with sustainability measures. | 2 | 3 | 6 | Develop clear communication, embed sustainability into job roles, provide training and incentives. |
| Missing targets | Potential reputational damage, legal implications, and loss of public trust if targets are missed. | 2 | 3 | 6 | Establish clear reporting, monitor progress regularly, adjust strategies proactively. |
| Data and reporting quality | Inaccurate data could undermine decision-making and reporting, impacting our ability to track progress effectively. | 2 | 3 | 6 | Ensure partners and contractors are aligned with data quality standards. Secure dedicated resources for waste and energy management/monitoring to |

| | | | | | meet NHS Standard Contract and Clinical Waste Strategy requirements, (minimum 0.5 FTE each) |
|---------------------------|---|---|---|---|---|
| Supply chain alignment | Our supply chain may not align with the Trust's carbon reduction goals or may fail to deliver on their carbon reduction plans, impacting our overall sustainability progress. | 2 | 3 | 6 | Engage suppliers early to communicate sustainability goals and expectations. Regularly monitor and report on supplier progress. Prioritise contracts with suppliers demonstrably committed to carbon reduction. |

Key: 1= low, 2 = medium, 3= high

Equality Impact Assessment

1. What is changing and why?ⁱ

The Trust's sustainability strategy (Green Plan) is being refreshed in line with statutory NHS guidance. This replaces its former plan (2022-2025).

2. What do you know? What disparities or inequalities already exist?ⁱⁱ

Climate change disproportionately impacts already vulnerable groups including people from lower socioeconomic backgrounds, people with pre-existing health conditions, women, older people and younger people.

3. Assessing the impact

| | Could benefit | May adversely impact | What does this mean? Impacts identified from what you know (actual, potential and unintentional) | What can you do? Actions (or why no action is possible) to advance equality of opportunity, eliminate discrimination, and foster good relations | | | | |
|---|------------------|----------------------------|---|---|--|--|--|--|
| a) How could this affect different ethnicities? Including Gypsy, Roma, Traveller, Showmen and Boaters, migrants, refugees and asylum seekers. | | | Cleaner air and greener environments benefit all, including marginalised ethnic groups who often live in more polluted areas. | Some groups may be harder to reach with communications; ensure accessible, translated, and culturally relevant materials are used. | | | | |
| b) How could this affect cisgender and transgender men and women (including maternity/pregnancy impact), as well as non- binary people? | | | Health benefits from cleaner air and reduced exposure to toxins may particularly support pregnant people. | Inclusive staff training and facilities (e.g. active travel infrastructure) must meet diverse gender needs. | | | | |
| c) How could this affect disabled people or carers? <i>Including</i> <i>neurodiversity, invisible</i> <i>disabilities and mental</i> <i>health conditions.</i> | | | Greener spaces and improved air quality support mental and physical wellbeing. Changes (e.g. to travel systems) could pose accessibility issues | Must involve disabled voices in service/user/staff co-design. | | | | |

| | | | without inclusive design or reasonable adjustments. | |
|---|-------------|---|--|---|
| d) How could this affect people from different faith groups? | | | Sustainability values may align with environmental ethics in many religions. | Catering/food policy changes should be sensitive to dietary requirements tied to religious practice. |
| e) How could this affect people with different sexual orientations? | | | No direct adverse impacts identified. | Ensure inclusive engagement and representation in sustainability communications and Net Zero Heroes network. |
| f) How could this affect different age groups or generations? | | | Young people benefit from long- term climate action and cleaner environments. Older adults may need more support to adapt to changes (e.g. digital platforms, new menus, active travel schemes). | Menu changes must align with nutritional needs/preferences of older adults. |
| g) How could this affect those who are married or in a civil partnership? | | | No significant impact identified. Benefits (e.g. healthier environments) apply equally. | |
| h) How could this affect people from different backgrounds such as: socio-economic disadvantage/deprivation, homeless, alcohol and/or substance misuse, people experiencing domestic and/or sexual violence, ex-armed forces, looked after children and care leavers? | | | Green initiatives can support mental wellbeing and social inclusion. | Changes to access (e.g. transport, services) may risk exclusion if affordability or digital access isn't considered. |
| i) How could this affect people based on their | \boxtimes | X | Areas with poorer infrastructure may benefit from targeted | Ensure equitable distribution of investment across sites. |

| geographic location or the area they live? | | | improvements energy efficie | s (e.g. air quality, ncy). | | | |
|---|-----------|-----------------------------|--|---|---|----------------------------|--|
| | | | Risk of unequ sustainability sites/regions. | al distribution of investment across | | | |
| j) How could this affect people with multiple intersectional experiences? ⁱⁱⁱ | X | | People with n experiences (income + ethic compounded | nultiple overlapping e.g. disabled + low- nic minority) may face barriers. | Active inclus design esse outcomes ac | sion a ntial t cross | nd meaningful co- o ensure equitable groups. |
| 4. Overall outcome | | | | | | | |
| No major change needed l | | Adjust approa | ch □ | Adverse impact but continue □ | Stop | o and | remove 🗆 |
| 5. Details of further a | ictions r | needed ^{iv} e.g. \ | What specific a | ctions would you take | e to address | (heal | th) inequalities? |
| | | | | | | | |
| 6. Arrangements for | delivery | y and future m | onitoring ^v e.g. | What output and proc | cess measure | es wi | II be used? |
| | | | | | | | |
| 7. Completed by: | | Justine Alford | | | | ate | 20/05/2025 |
| 8. Signed off by ^{vi} : | | Justine Alford | | | D | ate | 20/05/2025 |

ⁱ Summarise the scope of the proposal including aims, context and timescales. Use plain English (plainenglish.co.uk/free-guides.html); refer to other document(s) if needed ⁱⁱ Summary of data about patients and/or colleagues (include consultation feedback where relevant, info from reviews, audits, national or wider data and local dashboards. What do you have in your team or dept?) Reference primary or secondary research/feedback, the date it was carried out and any gaps: including actions, timeframes and accountable persons for addressing gaps. Consider and note who you have engaged with and who else you need to engage with. E.g. patients, staff networks, trade unions, voluntary groups, forums etc.

ⁱⁱⁱ Assess the cumulative impact. This looks at the combined influences of various impacts. E.g. young gay showmen.

^{iv} Outline further actions and/or recommendations. Will you review your approach, when will you do this? Can you align a review with any planned closure report, policy review or (event) evaluation?

^v Detail how you are delivering your project, policy change or service change. What governance arrangements are in place, which internal stakeholders have/will be consulted and informed about the project or changes? How do you intend to communicate any changes to the affected groups? e.g., easy read and communication plan

^{vi} Sign off should be proportionate to the change and checked by someone outside of the area/dept/division. <u>You may want to complete the template as a group if you are</u> <u>doing a project.</u> If you are unsure, please speak to EDI Team <u>EDITeam@berkshire.nhs.uk</u>

Public Health England, Health equity assessment tool (HEAT) has further information about assessing impact for health inequalities Health Equity Assessment Tool (HEAT) - GOV.UK (gov.uk).