



Green Plan

2025-28

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Welcome

Introduction from our Chair Eileen Milner, and Chief Executive Steve Grange

The UK is experiencing changes in its climate. Since the introduction of the Trust's initial Green Plan, climate records have changed, reflecting continued variations in climate patterns and their relationship to health outcomes. The Trust continues to assess the challenges, risks, and opportunities involved in transitioning to net zero.

To protect our own health and wellbeing, and to protect the existence of future generations, we need to prevent further harm and adapt to an environment that is changing. We are proud to provide care across Cambridgeshire and Peterborough, and we understand it is within our power to not only change how we do things but to lead by example and influence action across the region to reduce carbon and support our communities through the challenging times ahead.

A balanced approach is required, focusing on both the transition to net zero and efforts to prevent or reduce health inequalities. Our Trust vision is to improve the mental, physical, and social wellbeing of the people in our communities.

Every level of our organisation must act to address climate change. I am confident that by living our Trust values and remaining committed to our ambitious Green Plan we can ensure that we not only deliver high quality healthcare, but we can deliver sustainable, low carbon, climate resilient and inclusive healthcare.

The first CPFT Green Plan published in 2022 marked the start of our Net Zero journey and, although the pace of change has been slower than we had anticipated, our carbon footprint is reducing, and we are beginning to see the green shoots of sustainability embedded as a criterion of quality within the organisation.

Through this refreshed Green Plan, we will continue to build upon the conditions to embed sustainable values to enable inclusive and equitable change, continually build our knowledge and as the breadth and pace of change demands, maximise opportunities to improve wellbeing and community and organisational resilience.

We are dedicated to contributing across the NHS network to implement this Green Plan, with the aim of mitigating climate change effects and enhancing health outcomes.



Eileen Milner
Chair



Steve Grange
Chief Executive

About CPFT



We strive to improve the health and wellbeing of the people we care for, our staff and members, and to support and empower them to lead a fulfilling life.

Here at Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) we provide high quality care with compassion. We provide a wide range of NHS services within the community, including both physical and mental health care, as well as specialist services delivered outside of hospital settings.

We are a health and social care organisation and have clinical teams providing services in inpatient, community and primary care settings supporting a population of just under a million people and employ more than 5,000 staff.

Our services are predominantly located within Cambridgeshire, but also within Lincolnshire and Norfolk. Together with national and local partners, we conduct high-quality and ground-breaking research into mental and physical health and support innovation to improve patient care.

Why do we need a Green Plan?

In 2020, the NHS became the world's first health system to commit to reaching net zero emissions. The [Delivering a Net Zero National Health Service](#) report set out the scale of ambition. The Health and Care Act 2022 reinforced this commitment, placing new duties on Integrated Care Boards (ICBs), and NHS Trusts to consider statutory emissions and environmental targets in their decisions. NHS Trusts and ICBs are expected to meet these duties through the delivery of board-approved green plans.

What are we seeking to achieve?

These plans now need to be refreshed in line with guidance by 31 July 2025 and to support systems and trusts to refresh their green plans for the next three-year cycle with the aim of:

- Prioritising interventions that support world-leading patient care and population health, and reduce inequalities, while tackling climate change and broader sustainability issues
- Supporting NHS organisations to plan and make considered investments while increasing efficiencies and delivering value for taxpayers
- Ensuring every NHS organisation supports the ambition to reach net zero carbon emissions, reflecting learning from delivery to date

Greener NHS

The NHS is responsible for 4% of the UK's total carbon emissions. In October 2020, NHS England became the world's first health system to commit to reaching net zero carbon emissions, as outlined in the Delivering a 'Net-Zero' National Health Service report, which has two targets:

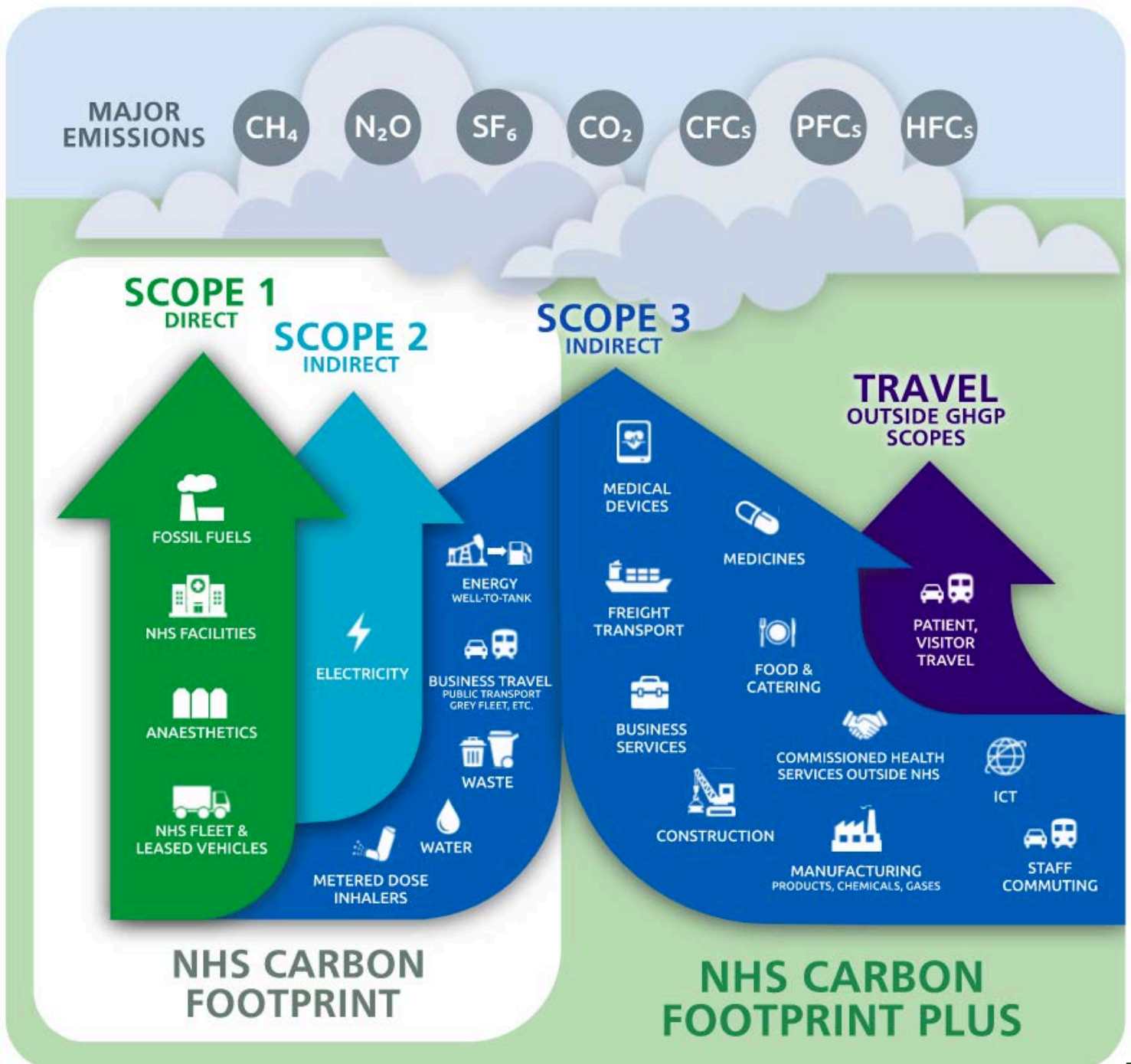
For the emissions we control directly (the NHS carbon footprint), we will reach net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032;

For the emissions we can influence (our NHS Carbon Footprint Plus), we will reach net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

What is a Green Plan?

To support our net-zero ambition, each Trust and ICB should have a Green Plan that sets out their aims, objectives, and delivery plans for carbon reduction. In each case, this should be signed off by the Trust Board, with a board level 'net-zero lead' responsible for overseeing its delivery.

Given the pivotal role that ICB system plays, each system will also need to develop its own Green Plan, based on the strategies of its member organisations.



Principles of sustainable healthcare

- Prevention; promoting health and preventing disease by tackling the cause of illness and health inequalities
- Patient empowerment and self-care; Empowering service users to play a greater role in managing their own health and healthcare
- Lean systems; Streamlining care systems to minimise wasteful activities
- Low carbon alternatives; Prioritising technologies and treatments with lower environmental impact

(Mortimier, F, The Sustainable Physician, Clinical Medicine 2010, Vol 10, No 2: 110–11)

The climate change emergency is a health emergency. It has the potential to affect all of the people we care for, now and in the future. It is our duty to act with urgency to protect the environment.

Providing greener, more sustainable and net zero mental health care will not only help to reduce carbon emissions, wider environmental impacts and, potentially, the harmful effects of climate change, but by implementing principles of sustainable healthcare will also enable CPFT to deliver better quality and more efficient healthcare.

Sustainable healthcare is good healthcare.

Sustainability in practice must span the entire service user journey and every member of CPFT staff, our partners, our service users and our suppliers have a significant role to play ensuring we meet our net zero duties.

The UK Health Alliance on Climate Change 2021, Climate Health Coalition report, states that about 1.8 million people in the UK are living in areas at significant risk of flooding - a number which could increase to 2.6 million by 2050.

Just under 12 million people in the UK are also dangerously vulnerable to future summer heatwaves, particularly the elderly or people with pre-existing health conditions such as diabetes or heart disease. Increasingly, research and evidence are paying closer attention to the mental health and psychosocial well-being impacts of climate change.

As demonstrated in the diagram overleaf, there are multiple direct and indirect pathways by which climate-related hazards, long-term risks, exposure pathways and vulnerabilities interrelate to impact mental health.

Most concerning of all, these exposure pathways have the potential to amplify existing health inequalities globally and within the populations we serve.

CPFT must and will continue to accelerate action on climate change to not only reduce carbon emissions but will also focus on developing effective interventions to prevent and address mental health impacts, based on our assessments to identify local risks, vulnerabilities and capacities to be resilient to climate change.



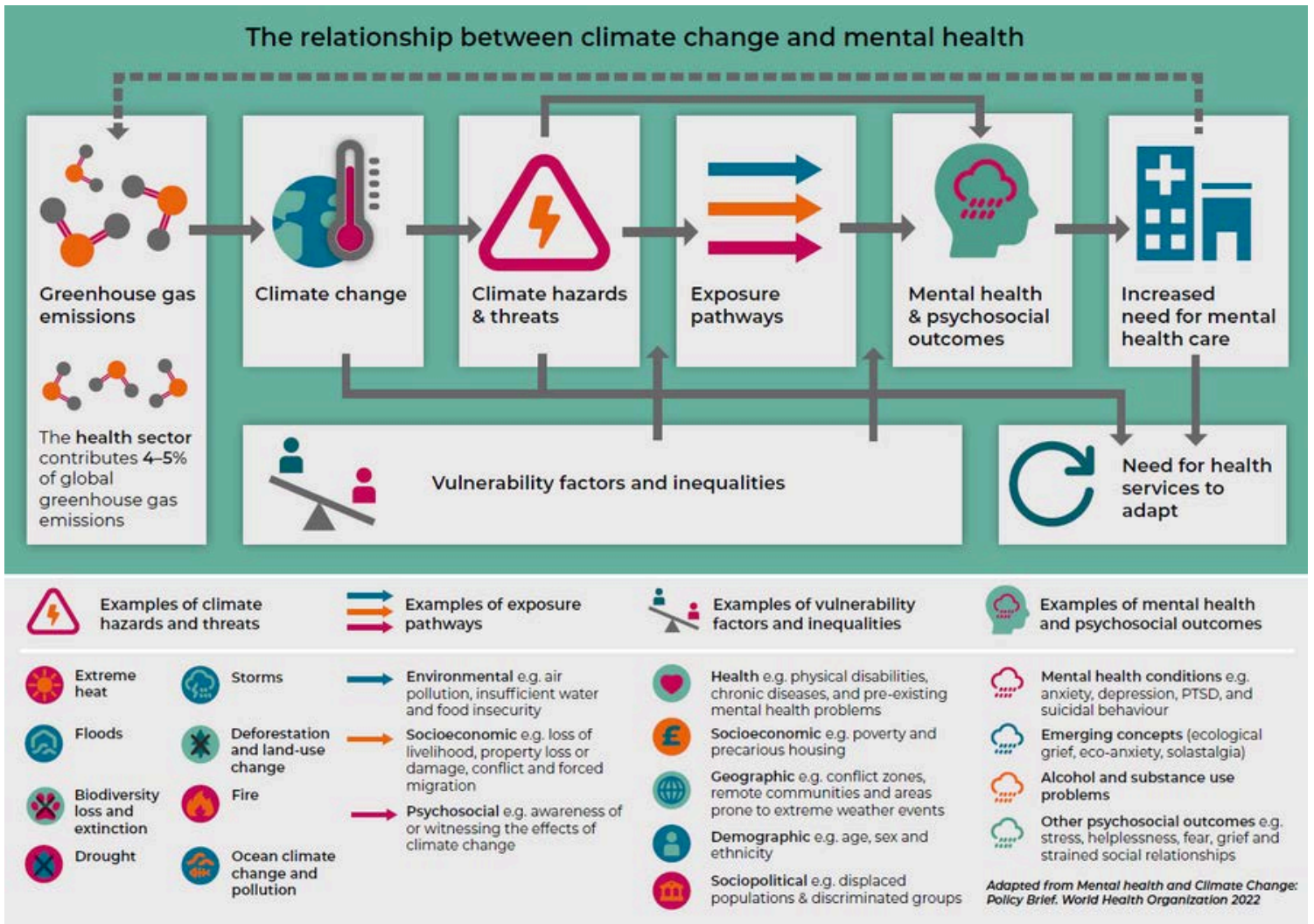


Fig 1, Page 8, National Collaborating Centre for Mental Health. Delivering greener, more sustainable and net zero mental health care: Guidance and recommendations. London: National Collaborating Centre for Mental Health; 2023

Our progress so far

Whilst there is no requirement for NHS organisations to calculate and report organisational carbon footprints, we know through our data collection that we have made progress in reducing our carbon footprint. CPFT has undertaken innovative work which has a positive impact on the efficiency and effectiveness of diagnosis and treatments and improved efficiencies in the way that we work and operate in our buildings.

The following are just some examples of progress made:

Staff and leadership

- Continued development of Technology Enhanced Learning (TEL)
- Library and knowledge services available online
- Continued development of digital corporate task.

Research and collaboration

- Dementia diagnosis and treatment [Help to set the direction of dementia research](#) | [Research news](#) | [CPFT NHS Trust](#)
- Neuro technologies [Research award joy for Trust and partners involved in pioneering computer game link-up](#) | [Research news](#) | [CPFT NHS Trust](#)
- Increasing access to effective treatment for severe mental health conditions psychosis and schizophrenia [Improving treatment for people living with psychosis](#) | [Improvement stories](#) | [Intranet](#)

Medicines

- Implementation of Medicines Optimisation and Pharmacy Strategy Development
- Use of electronic prescribing systems
- Change of formulary at our Minor Injuries Units to reduce nitrous oxide

Business technology and digital transformation

- Rationalised print fleet and introduction of secure printing
- Support for secure consultation software
- Healthy.io for wound care management [Digital app is helping to improve wound care across the Trust](#) | [Innovation stories](#) | [CPFT NHS Trust](#)
- Implementation of Brigid – an app for clinicians using SystemOne

Travel and transport

- 25% reduction in grey fleet mileage
- Nine electric vehicle charge points introduced across our sites
- Development of travel page on our intranet

Estates, facilities, food and waste

- Increased coverage of LED lighting - 88% of our properties have LED lighting
- Seventeen sites have use of UBook system - enabling smarter use of desks
- More than 3% reduction in energy consumption (KwH per floor area)
- Waste volumes reduced by 3%
- Landfill diversion rate at 97%
- Healthcare segregation of waste exceeding national target of 20:20:60
- Introduction of waste food collection service for recycling

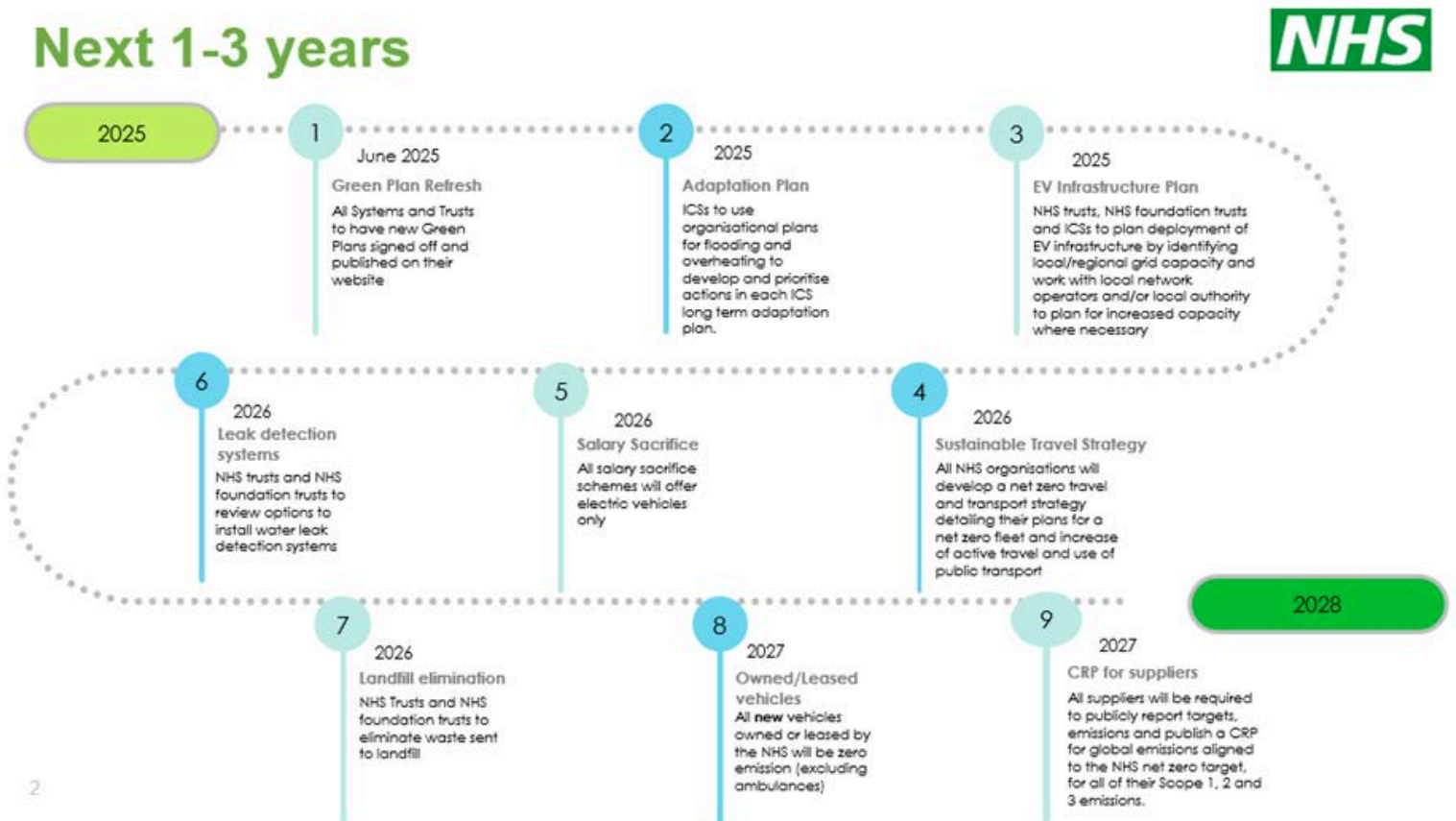
Working with our partners

The Trust will continue to work with NHS Provider collaboratives, Integrated Care Boards and the greener NHS systems to support:

- The role of the local system and provider collaboration in supporting delivery, such as through the spread and standardisation of best practice
- Opportunities for collaboration with wider system partners to reduce emissions
- Engagement with research and innovation activities to support the transition to a net-zero NHS.

Key areas of focus

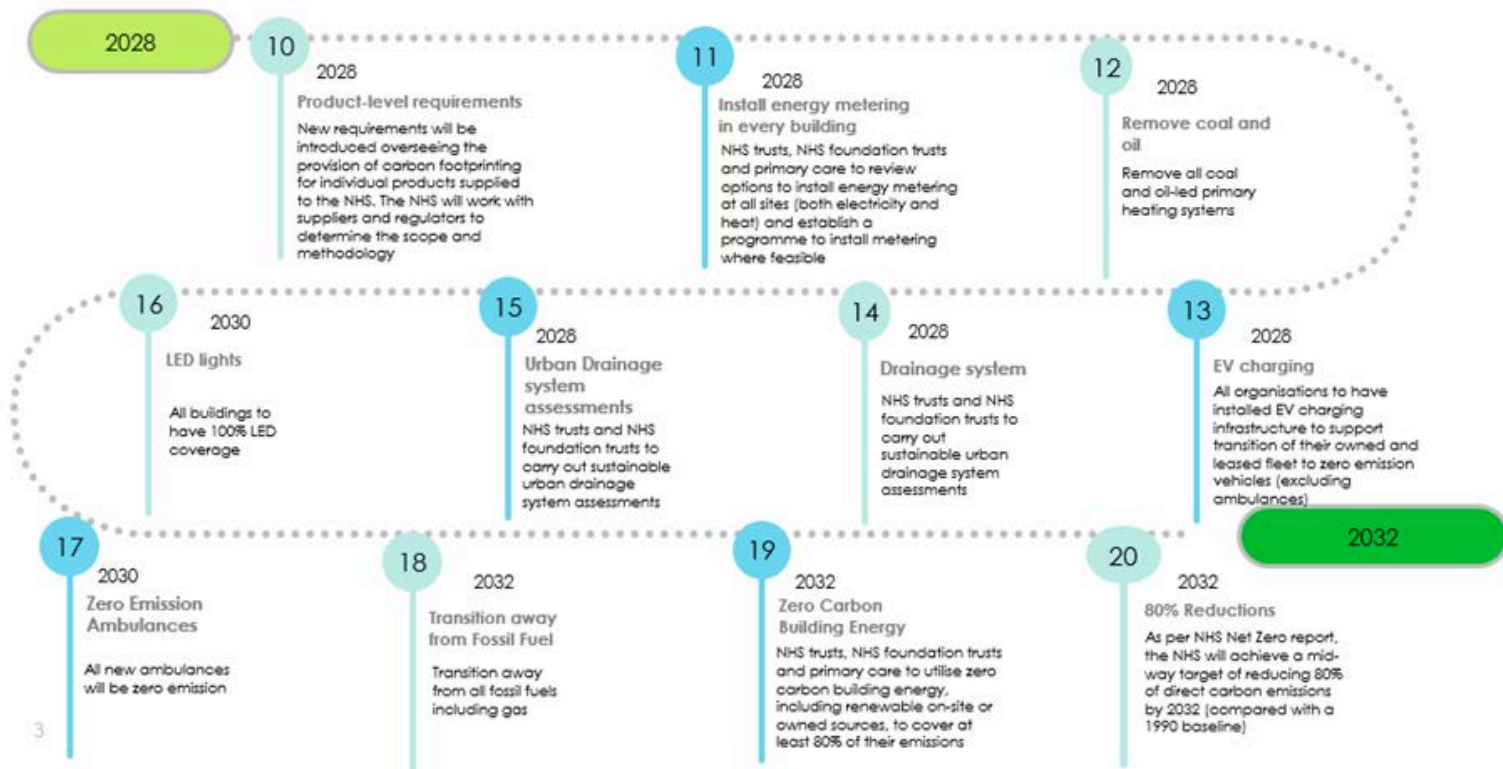
Greener NHS has published the following roadmap towards net zero for years one to three, and four to eight to meet the ambition to reach an 80% reduction to the NHS carbon footprint by 2028 to 2032.



Key areas of focus



Next 4-8 years



Whilst not every key area of focus is mentioned within the roadmap above, each area contributes towards the end goal. The following sections outline principal actions for development and implementation, along with the governance aspects to ensure that the Board is sighted on progress.



Workforce and leadership

The transition to a net-zero NHS will be driven by its people. There is already strong support for a greener future; nine in 10 staff support the NHS net-zero ambition, whilst six in 10 say they are more likely to stay in an organisation taking decisive climate action (YouGov, 2023).

Organisations should support their staff and leaders to learn, innovate and embed sustainability into everyday actions.

The Board level lead for this area is the Chief Strategy and Commercial Officer and Deputy CEO.

Key actions

- Appoint a designated board-level net-zero lead, generally an existing executive director, to oversee Green Plan delivery with clearly identified operational support.
- Assess workforce capacity and skill requirements for delivering the Green Plan, considering good practice examples such as hybrid roles, apprenticeships, [fellowships](#) and [NHS estates sustainability career pathways](#).
- Promote, and consider setting uptake targets for core training offers set out on the [Greener NHS Training Hub](#).
- Promote specialist training for staff groups who underpin the delivery of Green Plans, such as Board members, [procurement](#), finance, [estates](#) and [facilities](#) staff and clinicians.
- Recognise the organisation's legal commitment towards achieving net-zero emissions (in line with the Health and Care Act 2022) - for example, in the published values, mission statement and principles of health organisations.
- Establish and promote 'green' staff benefits, including cycle-to-work schemes and access to electric vehicles and promote home energy improvements and low carbon goods/services.



Digital transformation

Strong digital foundations are essential for transforming care by improving access, quality, productivity and reducing emissions. However, digital services can also increase emissions. NHS England's What good looks like framework encourages NHS organisations to prioritise sustainability in the procurement, design and management of digital services to meet the objectives of the Greening government: ICT and digital services strategy.

The Board level lead is the Chief Finance Officer.

Key actions

- Maximise the benefits of digital transformation to reduce emissions and improve patient care, for example, by reducing the use of paper and providing virtual pathways where clinically appropriate (see also net-zero clinical transformation).
- Supported by the Digital Maturity Assessment, consider opportunities to embed sustainability in digital services, such as by:
 - Using circular and low-carbon approaches to IT hardware management, which may include longer device lifetimes, leasing models, buying refurbished or remanufactured equipment and PC power-down configuration.
 - Considering low-carbon hosting, promoting good data hygiene (such as deduplication and archiving) and engaging digital suppliers (see also Supply chain and procurement).
 - Embed the principles and guidance of the “Technology Code of Practice” across the digital commissioning cycle / relevant policies, including prioritising procurement of low-power equipment.
 - Implement a trial and eventually deploy "power-down" software designed to automatically turn off unnecessary computer hardware when idle, leading to energy and cost savings.
 - Prioritise the hosting of data in energy-efficient low carbon local or cloud-based data centres.



Net-zero clinical transformation

The NHS is committed to moving to out-of-hospital and digitally enabled care where clinically appropriate, improving prevention of ill health and reducing health inequalities.

These changes also underpin our commitment to net zero. Net-zero clinical transformation should ensure high-quality, preventative, low-carbon care is provided to patients at every stage.

The clinical lead for CPFT with oversight of net-zero clinical transformation is the Chief Medical Officer.

Key actions

Focus on reducing emissions and improving quality of care for at least one clinical area (see suggested areas below), for example by:

- Establishing a clinical lead and multidisciplinary working group responsible for reducing emissions in the clinical area(s).
- Completing quality improvement project(s) in the clinical area(s) that focus on a measurable reduction in emissions, with co-benefits for outcomes and quality of care, efficiency and reducing healthcare inequalities (supported by resources in [Annex B: selected resources](#)).
- Sharing learning and outcomes - for example, through clinical networks, the ICB and NHS England.
- Ensure the inclusion of sustainable quality improvement training to workforce training programmes.
- Consider net-zero principles in all service change, reconfiguration programmes and pathway redesign. Advocate for and enhance the adoption of social prescribing, green social prescribing and physical initiatives in every local area.

Suggested clinical focus areas

Five clinical areas are suggested for focused action due to their high carbon intensity or volume:

- Critical and perioperative care
- Mental health
- Urgent and emergency care
- Diagnostic tests and procedures
- Medical pathways, with a focus on acute or long-term conditions such as renal disease, diabetes or cardiovascular disease.

Medicines

Medicines account for about 25% of NHS emissions. A few medicines account for a large portion of these emissions - for example, anaesthetic gases (2% of NHS emissions) and inhalers (3%).

Organisations should build on progress in reducing these “point-of-use” emissions, whilst improving patient care and reducing waste. Actions to reduce emissions from the medicines supply chain are set out under [Supply chain and procurement](#).

At CPFT, we do not have any piped medical gases and utilise only a small amount of nitrous oxide and oxygen.

The Board level lead for this area is the Chief Medical Officer.

Key actions

- Monitor use of oxygen and nitrous oxide.
- Support high-quality, lower-carbon respiratory care in secondary care, including supporting patients to choose the most appropriate inhaler(s) in alignment with clinical guidelines, performing inhaler technique checks with patients and promoting the appropriate disposal of inhalers.



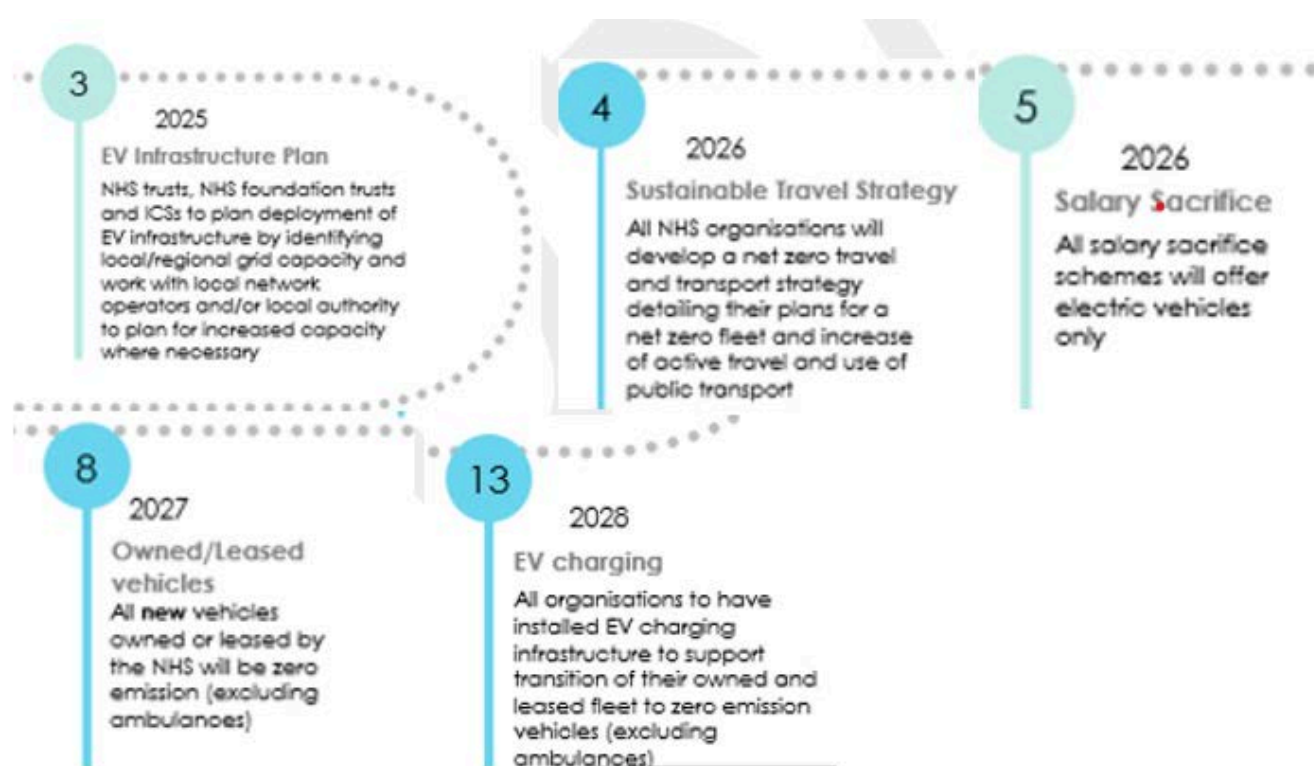
Travel and transport

The NHS fleet is the second biggest in the country, consisting of more than 20,000 vehicles. It directly contributes to harmful air pollution. The [NHS net-zero travel and transport strategy](#) outlines a roadmap to decarbonise NHS travel and transport, whilst also providing cost savings and health benefits.

CPFT uses many grey fleet vehicles to deliver services countywide. Within the ICB region, it has the biggest grey fleet usage. The challenge here is to rationalise the number of and type of vehicles that we utilise and to make every mile count.

The Board level lead for this area is the Director of People and Organisational Development.

Milestones within the areas of focus roadmap are:



Key actions

- By Dec 2025, plan deployment of electric vehicle infrastructure, identifying Trust-wide needs, local capacity. Work with local system operators to plan for increased capacity where necessary.
- By Dec 2026, develop a sustainable travel plan to be incorporated into the Green Plan as an annex, focusing on active travel, public transport and zero-emission vehicles, supported by a clear understanding of staff commuting (NHS England guidance will be available in 2025).
- By Dec 2026, offer only zero-emission vehicles through vehicle salary sacrifice schemes (for new lease agreements).
- By Dec 2027, all new vehicles owned or leased by the Trust will be zero emission.
- By Dec 2027, complete installation of EV charging infrastructure to support transition of owned and leased fleet to zero-emission vehicles.
- Form partnerships with local authorities and local transport authorities to maximise funding and infrastructure opportunities on behalf of the ICS member organisations.
- Continue to monitor and report travel metrics to greener NHS fleet returns.

Estates and facilities

There are significant opportunities across the NHS estate to reduce emissions and lower costs, whilst improving energy resilience and patient care. CPFT will focus on:

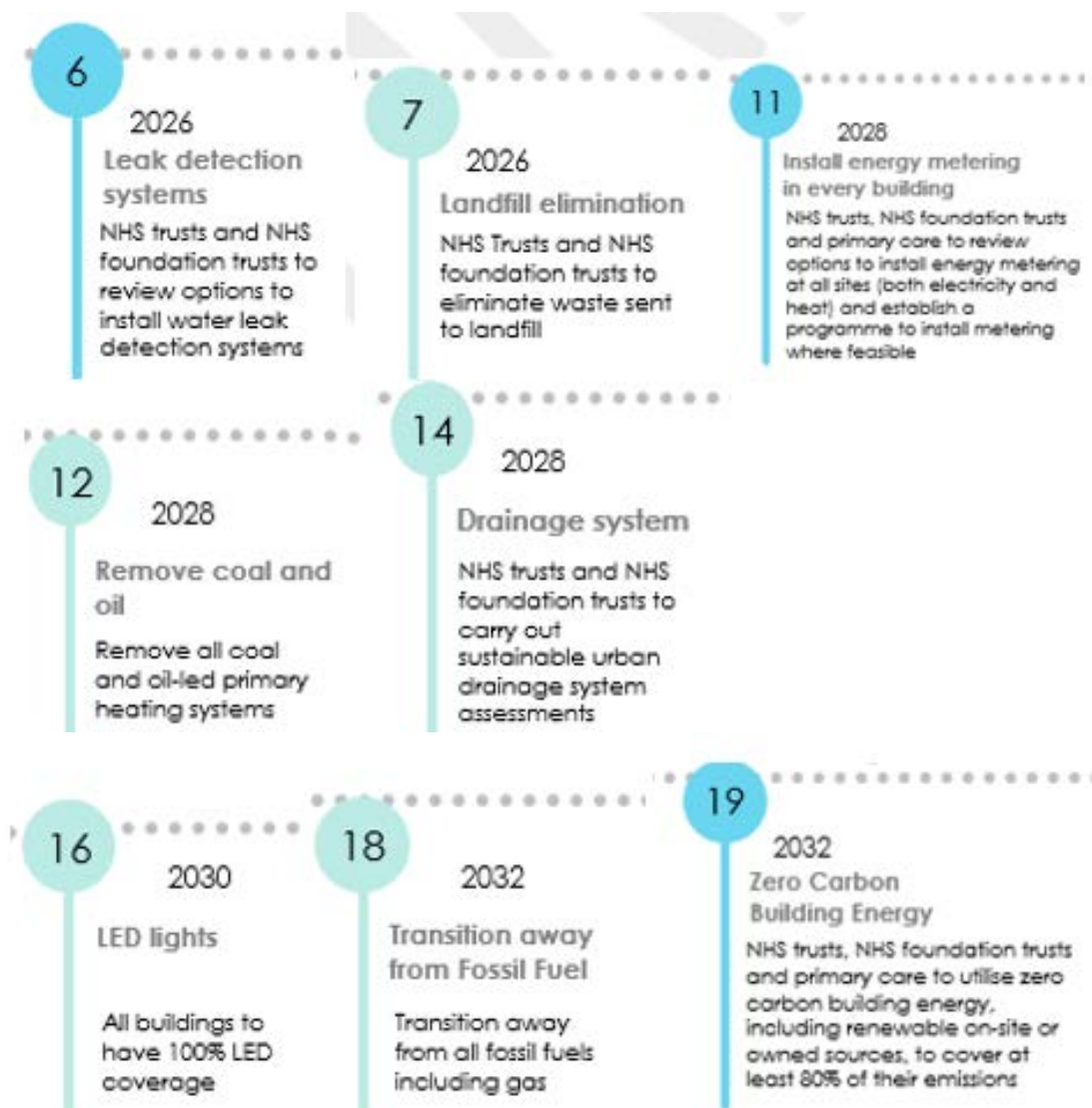
- Improving energy efficiency by completing the installation of LED lighting across its property portfolio, and develop business case for upgrades to insulation and double-glazed windows.
- Replacing fossil fuel heating systems with lower-carbon alternatives such as heat pumps or connecting to a heat network system where available.
- Increasing use, where available, of renewable energy by investing in or near-site renewable energy generation to meet NHS energy demand.

CPFT has and will continue to submit expressions of interest to NHS England to develop a pipeline of revenue and carbon-saving NHS projects for 2025-26 and beyond. This will ensure that the NHS is optimally placed to secure any future funding made available across government.

CPFT has already produced HDPs for some of our properties.

In the absence of external funding sources, we will continue to develop our business cases.

The Board level lead for this area is the Chief Strategy and Commercial Officer and Deputy CEO.



Key actions

- Develop heat decarbonisation plan (HDP) for the remaining properties within the portfolio, which includes:
 - By Dec 2026, review options to introduce leak detection systems.
 - By Dec 2026, eliminate landfill waste.
 - By Dec 2028, review options to install energy metering systems at all sites (gas and electricity) and establish a programme to install metering where feasible.
 - By Dec 2028, remove coal and oil-fed primary heating systems (note - we currently do not have any).
 - By Dec 2028, carry out urban drainage system assessments.
 - By Dec 2030, all lighting to be 100% LED.
 - By Dec 2032, identify and prioritise the phasing out of all existing fossil-fuel primary heating systems.
 - Consider local area energy plans and opportunities from heat networks and other low-carbon solutions.
 - Identify any installations in scope of the UK Emissions Trading Scheme and outline plans to reduce emissions in line with allocated targets.
- Develop business cases to deliver the measures outlined in the HDP, as well as accompanying energy efficiency and renewable energy interventions with a view to submitting a funding application through the PSDS if projects cannot be financed through internal budgets.
- Ensure all applicable new building and major refurbishment projects are compliant with the NHS Net-Zero Building Standard.
- Utilise data from central reporting sources such as ERIC, Model Hospital, and Greener NHS to support review, benchmarking and decision making.



Supply and procurement

The [NHS net zero supplier roadmap](#) outlines steps suppliers must follow to align with the NHS net-zero ambition between now and 2030. Roadmap implementation is a nationally shared responsibility across Trusts, systems, and regional procurement hubs. Organisations should also seek to embed circular solutions, such as using reusable, remanufactured or recycled solutions when clinically appropriate, which are often cost-saving.

CPFT currently outsources its procurement functions and will work with our provider to gain traction on the following actions.

The Board level lead for this area is the Chief Finance Officer.



Key actions

- Embed [NHS net-zero supplier roadmap](#) requirements into all relevant procurements and ensure they are monitored via Key Performance Indicators.
- By 2027, suppliers to publish their Carbon Reduction Plans.
- Encourage suppliers to go beyond minimum requirements and engage with the [Evergreen Sustainable Supplier Assessment](#) to support a single conversation between the NHS and its suppliers on sustainability priorities.
- Reduce reliance on single-use products, considering how to safely build this work into clinical improvement projects (see [Net zero clinical transformation](#) and [Annex B: selected resources](#) for additional support tools).
- By 2028, review output of product-level requirements.

Food and nutrition

Organisations should continue implementing the [National standards for healthcare food and drink](#), requiring NHS organisations to deliver high-quality, healthy and sustainable food and minimise waste.

The Board level lead for this area is The Chief Nurse.

Key actions

- Measure food waste in line with the [Estates Returns Information Collection \(ERIC\)](#) and set reduction targets.
- Consider opportunities to make menus healthier and lower carbon by supporting the provision of seasonal menus high in fruits and vegetables and low in heavily processed foods.
- Utilise key metrics from the Greener NHS Food Collection. The data collected will be used to consider ways of reducing waste, improve quality, and making menus healthier and with lower carbon emissions.

Adaptation

Climate change threatens the ability of the NHS to deliver its essential services in both the near and longer term. Resilience and adaptation should be built into business continuity and longer-term planning to avoid climate-related service disruptions. Partnership working between sustainability leads, public health, emergency response teams and estates leads at Trust and system level is crucial.

The Board level lead for this area is the Chief Operating Officer.

Key actions

- Comply with the adaptation provisions within the [NHS Core Standards for emergency preparedness](#), resilience and response (EPRR) and the [NHS Standard Contract](#) to support business continuity during adverse weather events.
- Set out actions to prepare for severe weather events and improve climate resilience of local sites and services, including digital services (see [Annex B: selected resources](#) for a supporting [Climate Change Risk Assessment Tool](#)).
- Factor in the effects of climate change when making infrastructure decisions and designing new facilities, including enhancements such as improved green spaces, drainage systems and passive cooling solutions.
- Ensure adequate cascading of weather health alerts and relevant messaging across the organisation in line with the Government's [Adverse Weather and Health Plan](#).

Governance and accountability

Delivery of this Green Plan should be overseen by a designated Board-level net-zero lead, generally an existing executive director, with clearly identified operational support.

The plan will also require senior leadership and oversight of delivery from a range of functions that may include:

- Chief medical, chief nursing, chief allied health professional officers and chief pharmacists
- Directors of estates and facilities
- Directors of procurement
- Chief information officers
- Directors of finance.

When considering future resilience, requesting oversight from the accountable emergency officer may also be appropriate.

Proposed CPFT Green Plan governance

It is proposed that the CPFT governance for delivery of the Green Plan is as follows:

- The designated board-level net zero lead: Chief Strategy and Commercial Officer and Deputy CEO
- Operational support to the Chief Strategy and Commercial Officer and Deputy CEO: Associate Director of Estates
- Create a Green Plan Delivery Committee: comprising the following attendees:

Chair	Chief Strategy and Commercial Officer and Deputy CEO
Key area of focus groups	Lead Executive
Workforce and leadership	Director of People and Organisational Development
Digital transformation	Chief Finance Officer
Clinical transformation	Chief Medical Officer
Medicine	Chief Medical Officer
Travel and transport	Director of People and Organisational Development
Estates and facilities	Director of People and Organisational Development
Supply and procurement	Chief Finance Officer
Food and nutrition	Chief Nurse
Climate adaptation	Chief Operating Officer

Purpose

- For each executive lead to review and direct co-ordination of arrangements to deliver the Green Plan and review of progress against key metrics. For each executive lead to provide updates to the Green Plan Delivery Committee for upward reporting purposes to The Business and Performance Committee. Executive leads may chose to utilise existing meeting structures to support this process and adapt terms of references where required.
- Frequency: Bi-monthly
- Upward reporting:
- Chair to report to Business and Performance Committee bi-monthly, who then annually reports to Board a summary of progress on delivery of the Green Plan to the Trust Board and publish this in the annual report, including actions taken and planned, with quantitative progress data. This should include, for each key area of focus:
 - Narrative updates on progress to date and key achievements
 - Delivery of key milestones and risks to future delivery
 - Quantitative assessment of progress against defined targets.

There is no requirement for NHS organisations to calculate and report organisational carbon footprints.

Task Force on Climate-related Financial Disclosures (TCFD)

The [DHSC group accounting manual \(GAM\)](#) sets out how TCFD requirements are being applied to NHS bodies, including explicitly stating that disclosure of Scope 1, 2 and 3 emissions is not required for NHS bodies as this is reported by NHS England.

Where Green Plan content meets some of the requirements for TCFD reporting (for example, in relation to strategy or governance), the GAM suggests:

“... where external reports, such as NHS green plans, contain relevant information for the recommended disclosures, entities are not required to duplicate this information in this part of the annual report. Entities can cross reference to the content of external reports for the purpose of compiling these TCFD disclosures.”

Appendix 1

Key areas of focus action and proposed Key Performance Indicator metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
1. Assurance and governance	Key action	1.1	ICS organisations and Trusts to designate a board level Senior Responsible Officer (SRO) accountable for achieving net-zero targets and overseeing the progress of the Green Plan.	In place: True/False
1. Assurance and governance	Key action	1.2	Organisations should put in place governance arrangements to co-ordinate delivery, such as a regular green plan delivery board chaired by the organisation's Board-level net-zero lead and attended by relevant directors.	Scheduled meetings held ToR reviewed annually. Upward reporting to Board
1. Assurance and governance	Key action	1.3	ICBs and Trusts are required to report an annual summary of progress on delivery of Green Plans to their board and publish this in their annual report, including actions taken and planned, with quantitative progress data.	True/False
2. Workforce, networks and leadership	Key action	2.1	Assess workforce capacity and skill requirements for delivering the green plan, considering good practice examples such as hybrid roles, apprenticeships, fellowships and NHS estates sustainability career pathways.	Annual review completed: True/False
2. Workforce, networks and leadership	Key action	2.3	Promote, and consider setting uptake targets for, core training offers set out on the Greener NHS Training Hub.	Subject to review
2. Workforce, networks and leadership	Key action	2.4	Promote specialist training for staff groups who underpin the delivery of green plans, such as board members, procurement, finance, estates and facilities staff and clinicians.	Subject to review

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Key areas of focus action and proposed Key Performance Indicator metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
2. Workforce, networks and leadership	In addition	2a	Recognise the organisations' legal commitment towards achieving net-zero emissions (in line with the Health and Care Act 2022) - for example, in the published values, mission statement and principles of health organisations.	In place True/False
2. Workforce, networks and leadership	In addition	2b	Establish and promote green staff benefits, including cycle-to-work schemes and access to electric vehicles and promote home energy improvements and low-carbon goods or services.	Cycle to work scheme uptake: number Electric vehicle uptake: %
3. Clinical transformation	Key action	3.1	Identify a clinical lead with oversight of net-zero clinical transformation with formal links to board level leadership and governance.	In place: True/False
3. Clinical transformation	Key action	3.4	Focus on reducing emissions and improving quality of care for at least one clinical area.	Subject to review
3. Clinical transformation	In addition	3a	Ensure the inclusion of sustainable quality improvement training to workforce training programmes.	In place: True/False
3. Clinical transformation	In addition	3b	Consider net-zero principles in all service change, reconfiguration programmes and pathway redesign. Advocate for and enhance the adoption of social prescribing, green social prescribing and physical initiatives in every local area.	Subject to review
4. Digital transformation	Key action	4.1	Maximise the benefits of digital transformation to reduce emissions and improve patient care, for example, by reducing the use of paper and providing virtual pathways where clinically appropriate.	Number of paper-based assessments remaining: Balance subject to review

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Key areas of focus action and proposed Key Performance Indicator metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
4. Digital transformation	Key action	4.2	Supported by the Digital Maturity Assessment, consider opportunities to embed sustainability in digital services.	Subject to review
4. Digital transformation	In addition	4b	Embed the principles and guidance of the “Technology Code of Practice” across the digital commissioning cycle / relevant policies, including prioritising procurement of low power equipment.	Subject to review
4. Digital transformation	In addition	4c	Implement a trial and eventually deploy "power-down" software designed to automatically turn off unnecessary computer hardware when idle, leading to energy and cost savings.	Subject to review
4. Digital transformation	In addition	4d	Prioritise the hosting of data in energy-efficient low-carbon local or cloud-based data centres.	Subject to review
4. Digital transformation	In addition	4e	Implement a holistic circular device strategy, integrating refurbishment, leasing, education and community reuse, maximise hardware lifespan, support digital inclusion, and minimise waste.	Subject to review
5. Medicines	Key action	5.4	Reduce waste from mixed nitrous oxide (Entonox) Medical Gas Pipeline Systems (MGPS) by progressing the actions outlined in the updated Nitrous Oxide Waste Mitigation Toolkit.	No MGPS in place, but monitor use of Entonox?

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Key areas of focus action and proposed Key Performance Indicator metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
5. Medicines	In addition	5a	Support high-quality, lower-carbon respiratory care in secondary care, including supporting patients to choose the most appropriate inhaler(s) in alignment with clinical guidelines, performing inhaler technique checks with patients and promoting the appropriate disposal of inhalers.	Subject to review
6. Travel and transport	Key action	6.1	In line with the net-zero travel and transport strategy and roadmap, develop a sustainable travel strategy and integrate into Green Plans (by December 2026).	In place: True/False
6. Travel and transport	Key action	6.2	All vehicles offered through salary sacrifice will be zero emission (from December 2026).	In place: True/False
6. Travel and transport	Key action	6.3	All new fleet - (owned and leased) to be zero emission (Dec 2027) excluding ambulances.	In place: True/False
6. Travel and transport	In addition	6c	Actively promote and facilitate staff adoption of low-carbon travel options, emphasising modal shift principles to transition from private cars to sustainable modes like public transport, cycling, walking, or carpooling.	Travel Survey undertaken: Yes / No Pool car petrol use: Pool car diesel use: Number of non-electric pool cars in place: Number of electric pool cars: Grey fleet miles: Public transport expenses paid: Air miles cost:
6. Travel and transport	In addition	6d	Maximise the environmental sustainability of commissioned goods and services transportation across the system, including patient transport, courier services, and deliveries, to ensure minimal ecological impact.	Non emergency patient miles: Taxi cost: Courier service miles: % LED by GIA

Appendix 1

Key areas of focus action and proposed KPI metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
7. Estates and facilities	Key action	7.2	Improving energy efficiency by increasing the percentage of GIA covered by LED lighting.	% LED by GIA
7. Estates and facilities	Key action	7.4	Support Trusts that have not accessed PSDS funding previously to develop applications (this may include exploring joint bids between trusts or other partners).	Number and value of funding requests made:
7. Estates and facilities	Key action	7.6	Develop a Heat Decarbonisation Plan that includes: <ul style="list-style-type: none"> Identifying and prioritising the phasing out of all existing fossil-fuel primary heating systems by 2032 and seeking to remove all oil primary heating systems by 2028. Considering Local Area Energy Plans and opportunities from heat networks and other low-carbon solutions. Identifying any installations in scope of the UK Emissions Trading Scheme and outline plans to reduce emissions in line with allocated targets. 	% properties with HDP
7. Estates and facilities	Key action	7.7	Develop business cases for implementing the measures outlined in the heat decarbonisation plan, along with complementary energy efficiency and renewable energy initiatives. If internal budgets are insufficient, prepare funding applications for submission through the Public Sector Decarbonisation Scheme (PSDS).	% business cases in place: Number of PSDS scheme bids made:
7. Estates and facilities	Key action	7.8	Ensure all applicable new building and major refurbishment projects are compliant with the NHS Net Zero Building Standard.	Number of projects applicable: % compliance to net-zero building standard

Appendix 1

Key areas of focus action and proposed KPI metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
8. Supply chain and procurement	Key action	8.1	Ensure NHS net-zero supplier roadmap requirements are embedded into all relevant procurements and implementation is monitored via KPIs.	Subject to review
8. Supply chain and procurement	Key action	8.2	Encourage suppliers to go beyond minimum requirements and engage with the Evergreen Sustainable Supplier Assessment to support a single conversation between the NHS and its suppliers on sustainability priorities.	Subject to review
8. Supply chain and procurement	In addition	8a	Reduce reliance on single-use products, considering how to safely build this work into clinical improvement projects (see net-zero clinical transformation and Annex B of the Green Plan guidance: selected resources for additional support tools) - for example, reusable PPE, reusable tourniquet, glove off, EP catheters, reusable sharps containers and any others.	Number of single use plastic products identified
8. Supply chain and procurement	In addition	8b	Nominate a lead for sustainable supply chain and procurement to incorporate sustainability into foundations of delivery, ensuring the procurement governance structure aligns to the net-zero supplier roadmap.	Nominated lead in place : True/False
8. Supply chain and procurement	In addition	8c	Training for all finance and procurement teams in the application and development of meaningful social value criteria, as per PPN 06/20 and PPN 02/25.	% trained
9. Food and nutrition	Key action	9.1	Measure food waste in line with the Estates Returns Information Collection (ERIC) and set reduction targets.	Food waste collection volumes reported: Trust/False. Waste volume reduction: %

Appendix 1

Key areas of focus action and proposed KPI metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
9. Food and nutrition	Key action	9.2	Consider opportunities to make menus healthier and lower carbon by supporting the provision of seasonal menus high in fruits and vegetables and low in heavily processed foods.	Number of meal plan reviews per year:
10. Climate change adaptation	Key action	10.1	All providers and commissioners of NHS-funded services must comply with the adaptation provisions within the NHS Core Standards for Emergency Preparedness, Resilience and Response (EPRR) and the NHS Standard Contract to support business continuity during adverse weather events.	Compliance : True/False
10. Climate change adaptation	Key action	10.2	Set out actions to prepare for severe weather events and improve climate resilience of local sites and services, including digital services (see Annex B of the Green Plan Guidance: selected resources for a supporting Climate Change Risk Assessment Tool).	In place : true/false
10. Climate change adaptation	In addition	10c	Factor in the effects of climate change when making infrastructure decisions and designing new facilities, including enhancements like improved green spaces, drainage systems and passive cooling solutions.	Number of projects applicable: % projects assessed
10. Climate change adaptation	In addition	10d	Ensure adequate cascading of weather health alerts and relevant messaging across the organisation in line with the Government's Adverse Weather and Health Plan.	Number of weather alerts produced:
10. Climate change adaptation	In addition	10e	Implement the "Climate Adaptation Framework" as a comprehensive method to cultivate climate resilience.	Subject to review

Appendix 1

Key areas of focus action and proposed Key Performance Indicator metrics

Areas of focus	Key actions / in addition	Number	Description	Proposed metrics to track progress
10. Climate change adaptation	In addition	10f	Participate in adaptation training programmes addressing extreme weather events, such as heatwaves and flooding, available to our workforce.	Subject to review
11. Green space and biodiversity	In addition	11a	Ensure biodiversity net gain on any developments from 2024.	Subject to applicable projects
11. Green space and biodiversity	In addition	11c	Play an active role in local authority biodiversity initiatives, providing valuable input to relevant nature recovery strategies and programmes, distributing opportunities throughout our healthcare networks.	Subject to review
11. Green space and biodiversity	In addition	11d	Actively encourage healthcare providers to develop and enhance incidental green spaces and implement small biodiversity measures such as tree planting, pocket parks, bat/bird boxes and pollinator programmes, identifying relevant funding pots wherever possible.	Number of measures in place:

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