

A Sustainable Development Strategy for NHSScotland



NHS

Foreword

This is the first sustainable development strategy produced for NHSScotland. It comes at an exciting time, as the Scottish Government's Purpose and National Performance Framework take ever greater effect in the day-to-day focus for our public services and, more importantly, on improving the outcomes and quality of life for all of Scotland's people.

It is hard to imagine an issue other than sustainable development that is more fundamental to virtually every aspect of what NHSScotland does, or hopes to achieve. In times of serious global threats where we face climate change, unprecedented economic challenges and significant public health issues, there is an urgency to achieve development and progress in ways that are genuinely sustainable. Not only that, but we must do so at a significant scale and rate.

NHSScotland needs no invitation to make its own contribution to achieving sustainable development, and has been doing so for some time in the context of environmental management. However, the challenges mentioned above have direct and indirect health consequences for the communities we serve. NHSScotland is an organisation of significant scale in itself and the environmental impacts of some of our hospitals have been likened to those of a small town. Hence, we must be acutely aware of the way we deliver all of our services, to ensure we maximise social and health benefits, whilst reducing our costs. We must maximise our efficient use of resources, minimise pollution and waste, and reduce our effects on the local and global environment. All forms of unsustainable development, whoever is responsible for them, can undermine NHSScotland's work to improve the nation's health and wellbeing.

For these reasons, we have an important dual role. One is delivering, within the health service, an integrated approach to health improvement and sustainable development, as they are inextricably linked. The other is leading by example: championing this approach to help others deliver on the same challenges. NHSScotland is and should be an agent for change and already we have made huge strides.

This Strategy provides a vital framework for action to continue this progress. Its focus, rightly, is on the most immediate opportunities and manageable priorities of transport, procurement, facilities management, employment and skills, community engagement and buildings, as well as biodiversity. I strongly urge all NHSScotland bodies and other partners involved in the delivery of our healthcare services to embrace actively the messages it contains.

Through development and implementation of this Strategy, we continue towards a more sustainable, healthier future for Scotland's people and the Service itself. We will continue the vital partnership between Government, NHS Boards, local authorities, the Sustainable Development Commission and others in advancing progress and, importantly, refining our future priorities on these key issues.



Nicola Sturgeon, MSP (Deputy First Minister and Cabinet Secretary for Health and Wellbeing)

Contents

	Page
Foreword	2
Executive summary	6
1. Introduction	
Purpose of this strategy	
What needs to be done?	
How will we achieve and monitor this strategy?	
When will this happen? Who needs to be involved?	9
Next steps	
2. Sustainable Development	
What is sustainable development?	
National sustainable development strategies and approaches	
Health, NHSScotland and Sustainable Development	
Benefits of Sustainable Development	
Cost of Sustainable Development	
3. A Framework for Sustainable Development	
Key Priorities in Sustainable Development for NHSScotland	
,	
4. Where do I start?	
Key Stakeholders	
Produce an action plan	
Appendix 1. National Performance Framework - National Outcome	es43
Appendix 2. Scottish Indicators and Performance	
Appendix 3. Recommendations set out in Procuring the Future	
5. References and additional information	48
6. Acronyms and Abbreviations	

NHS

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Note on Strategic Environmental Assessment (SEA)

In drafting this strategy, Health Facilities Scotland considered the requirements of the Environmental Assessment (Scotland) Act 2005³. After informal discussion with the SEA Gateway, Health Facilities Scotland (HFS) concluded that the strategy fell outwith the definition of plan, programme or strategy under the 2005 Act, as it forms non-restrictive guidance to NHSScotland Boards on how they could contribute to the delivery of the sustainable development objectives set by the Scotlish Government.

Despite the above conclusion, Boards, when developing their own sustainable development action plans, will need to determine whether their individual plans fall within the scope of the 2005 Act and whether the actions they contain are likely to result in significant (positive or negative) environmental effects.

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Executive summary

Public sector bodies, including NHSScotland, must contribute to the Scottish Government's purpose: "to create a more successful country where all of Scotland can flourish through increasing sustainable economic growth". This strategy interprets what that contribution, and the five strategic objectives, mean for NHSScotland. It outlines the benefits to NHSScotland and to our society as sustainable development principles are adopted.

Sustainable development requires an integrated approach, harmonising environmental, social and economic issues. Sustainability is of central relevance to NHSScotland because of the well established links between environmental quality and the health of Scotland's communities, as well as the need for efficient use of resources in the delivery of services.

Relative to other public sectors, NHSScotland has made significant progress already on some key aspects of its sustainability performance, notably on reducing CO₂ emissions and energy use in its buildings. It has at its disposal some of the tools that form part of its coordinated approach to sustainable development. These include using Corporate GREENCODE¹ to establish an environmental management system (EMS). Corporate GREENCODE should be at the heart of the Boards' reporting on the headline environmental issues, and contribute to compiling NHSScotland's Annual National Environment Report. In addition, Boards will need to develop their own methods of coordinating activity across the full range of sustainable development issues. Two key opportunities that will help ensure further progress are the nomination of a board-level champion for sustainability, and the development and implementation of a sustainability action plan by each Board.

In contributing more effectively to the delivery of sustainable development, the benefits will spread further than is likely under the existing management and reporting structure. As well as reduced costs resulting from greater resource efficiency, where Boards develop and manage healthier buildings, their staff and patients can expect to benefit from increased wellbeing. Boards also need to play their part in stimulating thriving local communities to stimulate reductions in health inequality; better and healthier travel options accessing NHSScotland facilities; and thriving local economies with employment and skills benefits which contribute to community cohesion. The reasons behind these outcomes and opportunities are developed in this document.

This strategy draws on the principles and commitments arising from relevant international and national sustainable development and environmental management policies, including those of NHSScotland. It also draws on the Sustainable Development Commission's (SDC) Good Corporate Citizenship Assessment Model² (GCCAM), which identified six priority areas for action. These will enhance the NHS contribution to sustainable development. Work has commenced on the adaptation of the Good Corporate Citizenship Assessment Model for NHSScotland. This will be delivered by March 2010. The

priority issues identified by the SDC have been used to form the basis for this strategy because they are highly pertinent to the Scottish Government's five strategic objectives, the issues that NHSScotland faces, and the actions it needs to progress.

This strategy is designed to aid that progress through:

- briefly outlining the benefits that can be achieved by addressing these priority issues;
- examining a number of sub-components and opportunities within each issue, contributing to an overall action plan template which each NHSScotland body can use to develop its own action plan; and
- referring to relevant sources of information and funding.

In the final section, 'Where do I start?' the focus moves from the strategic goals to the development of a culture which will enable those goals to be reached. Sound governance is vital in delivering sustainable development. It requires an appropriate combination of top-down and bottom-up mobilisation, involving leadership and commitment at senior management levels, and empowerment and direction for those tasked with delivering each aspect of the action plan. The strategy briefly sets out the steps that need to be taken in order to develop and deliver a successful action plan, and points to relevant sources of guidance.

Finally, it also indicates very briefly the areas where future work is required on the implementation, monitoring and reporting requirements of this strategy, and on the further evolution of the sustainable development agenda within NHSScotland. The ongoing development and implementation of this strategy will be informed by two key new initiatives recently funded by the Scottish Government. The first will review and adapt the Good Corporate Citizenship Assessment Model for use in Scotland. The second will establish both the carbon and ecological footprints of NHSScotland's activities.

1. Introduction

Purpose of this strategy

The purpose of this strategy is to set a clear framework that will guide and stimulate a fundamental shift in culture and behaviour within NHSScotland. That shift will enable NHSScotland to maximise its role as a 'good corporate citizen', contributing to addressing national and global sustainability challenges.

This strategy pulls together the key strands of policy, and the opportunities to deliver those policy objectives that will make NHSScotland more sustainable in its delivery of healthcare services. It recognises that in doing so, there are wider benefits to society, the environment and the economy. It defines more clearly the roles and contribution that NHSScotland can and should make to the collective national effort in achieving the Scottish Government's purpose. In doing so, it sets out the 'what', 'how', 'when' and 'who' for NHSScotland's contribution, and the 'next steps'. The main sustainability priorities and opportunities, and what can and should be delivered initially, with some progress milestones, and the development of future targets, must be clear so that subsequent Sustainability Action Plans of Boards are ambitious yet realistic and appropriate. These aspects are outlined below, and summarised in Table 1 at the end of this section.

What needs to be done?

This strategy reinforces rather than replaces or duplicates good practice in, e.g. the Scottish Government Health Directorates' Environmental Management Policy⁴, the Environmental Management Policy Action Plan⁵ and the Waste Management Action Plan⁶. Boards are already making good progress in delivering better environmental management through the implementation of these. However, within the health service itself, and wider society, within which NHSScotland has an important role to play, considerable challenges remain before the purpose and outcomes sought by the Scottish Government can be said to have been achieved.

The strategy defines a set of key target areas for action within NHSScotland that are aligned with Scottish Government priorities. It is consistent with and supports delivery of the sustainability principles and objectives of the government's 'Better Health Better Care'⁷ agenda, the core strategic change programme which determines the operational and performance focus for NHSScotland. Its 3 main components (health improvement, tackling health inequality and improving the quality of health care) all, in their planning and delivery, need to be underpinned by sustainability.

How will we achieve and monitor this strategy?

The outcome expected from this strategy is that Boards build on their progress and develop action plans to take the next steps towards sustainable



development, recognising the links between their activities, the quality of the environment, both locally and globally, and the health of the communities they serve. A series of key actions is set out in Table 1. Establishing baseline performance on the main issues is an early priority. Monitoring, evaluation, review and reporting will be important annual requirements in the next 5 years.

When will this happen?

Table 1 provides a broad overview of the development and implementation ofthe sustainable development process proposed by this strategy over the next 5years. This will be refined and determined by the Scottish Government,NHSScotland Bodies, and others, working in partnership.

Who needs to be involved?

This document is aimed primarily at senior decision makers within NHSScotland Bodies including, e.g. Chief Executives Directors of Facilities, Directors of Finance and Procurement, Estates Managers, etc. The Environmental Management Policy Action Plan (2008) called for Boards to nominate a boardlevel environment (or better a sustainability) 'champion', and an Environmental Management Representative (EMR). These two roles will be crucial in focussing on and achieving more sustainable outcomes, embedding sustainability within the core business and performance of Boards, where they can ensure greater consistency in policy decision-making and operational planning. However, the champions and EMRs on their own cannot be expected to deliver the sustainable development objectives outlined in this document. It will require leadership and commitment from the top, and throughout each Board, along with action and involvement of staff at a range of levels. Section 4 provides further detail on this, but the appropriate governance structures must be in place for this to happen.

Next steps

Further vital research work is also needed to underpin this strategy with the right data, analysis and recommendations to ensure evidence-based policy development and operational planning within the service. Two key pieces of research now funded by the Scottish Government will be fundamental to the refinement of this strategy within the next 12 months, and subsequent sustainability action plans of NHSScotland Bodies that will be put in place. The two projects are:

- adaptation of the Good Corporate Citizenship method and tool for specific use by NHSScotland (to be complete by January 2010);
- a carbon footprint assessment of NHSScotland (1992-2004), and follow-up work backdating this to 1990; an ecological footprint (2004) allowing national comparison; and policy scenario testing with recommendations.

In future, this strategy, and the results of the above projects may help to inform the implementation and ongoing development of the Health Improvement, Efficiency, Access, Treatment (HEAT) targets⁸ set out in 'Better Health Better Care Action Plan'.

Actions, related projects and requirements	Year 1 2009- 2010	Year 2 2010-2011	Year 3 2011-2012	Year 5 2013-2014
Strategy launched				
NHSScotland Bodies establish appropriate governance structures to implement it				
NHSScotland Bodies prepare in readiness to develop their own Sustainability Action Plans				
Adapt Good Corporate Citizenship method and tool for Scotland. Pilot in 2 Boards				
Complete carbon and ecological footprint projects, and policy scenario analysis				
Revise strategy accordingly, and develop further targets				
Awareness raising and training				
Establish baseline data and performance in key areas				
NHSScotland Bodies Action Plans prepared and implementation begins				
NHSScotland Bodies Action Plans implementation complete				
Substantial reduction in NHSScotland's carbon and ecological footprints (and % of other SD initiatives and outcomes successfully achieved)				
Monitor, evaluate, review and report progress				
Develop second phase Action Plans				

Table 1 – A summary of actions and milestones in the next 3-5 years

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2. Sustainable Development

What is sustainable development?

The 1987 Brundtland Report, 'Our Common Future'⁹, provided the widely used and accepted definition of sustainable development as "*development that meets the needs of the present without compromising the ability of future generations to meet their own needs.*" Others describe it as "*living here as if we intended to stay*", or the alternative – unsustainable future – "*living as if we had another planet to go to*"¹⁰ The UK shared framework for sustainable development (*One future – different paths*¹¹), which was agreed in March 2005 between the UK Government and the Administrations of Scotland, Wales and Northern Ireland, states that the goal of sustainable development is "*to enable all people throughout the world to satisfy their basic needs and enjoy a better quality of life without compromising the quality of life of future generations.*"

Since the Brundtland Report, most environmental problems have accelerated as production shifts to developing economies which are themselves growing rapidly. This has significant implications for global pollution and consumption of resources. *"The past 20 years have seen a growing realisation that the current model of development is unsustainable. In other words we are living beyond our means. Our way of life is placing an increasing burden on the planet."*¹²

For development to be sustainable, the economy, including service delivery, should provide for society's needs but within the limits or capacity of the environment to supply the resources and to be able to recover. Unsustainable practices or negative impacts often become visible in the form of pollution or environmental degradation. These can have direct and indirect effects on neighbouring and distant communities, which can in turn have serious implications for people's health and wellbeing.

One increasingly recognised method for calculating environmental sustainability is the 'ecological footprint'. Data on e.g. transport provision, waste production, energy consumption and use of water and other materials are analysed, and the corresponding impacts are expressed in global hectares (gha) of land and sea resources used in meeting such needs. It is a powerful tool as it can be used to estimate and compare the impacts and the relative environmental sustainability of any given community, whether a city, region or country, in terms of its 'fair share' of the earth's available biological resources.

Using 2001 data, 'Scotland's Footprint'¹³ was estimated at 5.35 gha per person, when the earth's available biological resources, if shared equally by everyone would be 1.9 gha per person. This means that if everyone uses as many resources as the average Scot, almost two more planets would be needed to meet their needs. Scotland, therefore, is using resources some 3 times in excess of equitable levels, as are other developed countries with similar or even larger ecological footprints. Clearly this is not sustainable. The latest data in the WWF Living Planet Report (2006)¹⁴ estimates a similar picture of 5.6 gha per





person for the UK as a whole (the 14th largest footprint in the world). It states that the global footprint now exceeds, by about 25%, the ability of the world to regenerate. In other words, it takes about 15 months for the world to produce the resources that are used in a year. This is described as consuming the earth's capital instead of living off its interest. The biggest factors in this are the ways in which we generate and use energy.

National sustainable development strategies and approaches

In 2005, the UK Government and Devolved Administrations jointly launched a Strategic Framework, 'One future - different paths'. In the same year the sustainable development strategies of the UK Government, and Scotland, were launched respectively: 'Securing the Future'¹⁵, and 'Choosing our future'¹⁶. Broadly, these approaches had the following similar guiding principles, with emphasis on sustainable communities; sustainable consumption and production; climate change and energy, and protection of natural resources and environmental enhancement:



Source: One future - different paths.

In 2007, the Scottish Government set out a new vision for success for Scotland. This is described and measured in four parts, which support and reinforce each other, and form Scotland's current approach to sustainable development. The four parts are:

- the Government's <u>Purpose</u> and its associated targets;
- five Strategic Objectives that describe where actions will be focused;
- 15 <u>National Outcomes</u> that describe what the Government wants to achieve (see Appendix 1); and
- 45 <u>National Indicators</u> that enable progress to be tracked (Appendix 2).

NHS National Services The Scottish Government's single purpose is: "to create a more successful country where all of Scotland can flourish through increasing sustainable economic growth". The five strategic objectives at its core are, for a Scotland that is:

- Wealthier and Fairer: enable businesses and people to increase their wealth and more people to share fairly in that wealth;
- Smarter: expand opportunities for Scots to succeed from nurture through to life long learning ensuring higher and more widely shared achievements;
- **Healthier:** help people to sustain and improve their health, especially in disadvantaged communities, ensuring better, local and faster access to health care;
- **Safer and Stronger:** help local communities to flourish, becoming stronger, safer place to live, offering improved opportunities and a better quality of life;
- **Greener:** improve Scotland's natural and built environment and the sustainable use and enjoyment of it.

The objectives, outcomes, and indicators are part of the National Performance Framework. Progress is measured and presented on the Scotland Performs website¹⁷. Some of the outcomes and indicators pertain specifically to health, others highlight progress in terms of e.g. climate change, ecological footprint, neighbourhoods and protected sites, which also influence health outcomes.

This strategy is consistent with and supports the strategic objectives and purpose of the Scottish Government. The objectives, outcomes and indicators of the National Performance Framework have also been used to guide the key target areas for NHSScotland identified in this strategy, as NHSScotland has clear roles, although to varying degrees, in the delivery of all 5 of the strategic objectives and many of the 15 national outcomes.

Announcing their approach to the 'Greener Scotland' strategic objective, ministers called for the Scottish Government, and its partners, including the National Health Service, to work to become exemplars of good practice in environmental issues¹⁸. They acknowledged the good work already being done throughout the public sector but called for more, stressing the need to cut energy and water use, reduce waste, reduce travel emissions and support biodiversity. Within the 'Healthier Lives' national outcome, the need was identified for the Scottish Government to: "*work with NHSScotland…to deliver the full range of healthcare services*" and for NHSScotland to maximise its productivity.

The 'Greener Scotland' objective is being delivered through three enabling programmes: 'leading by example', 'capacity building' and 'communications'. NHSScotland is closely involved in 'leading by example'.

Other key government documents relevant to sustainable development and health improvement include the statutory guidance on planning and sustainable development¹⁹ to support the implementation of The Planning etc. (Scotland)





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Act 2006²⁰, and the UK sustainable procurement task force action plan 'Procuring the Future' in June 2006²¹. The latter detailed six key procurement recommendations in an action plan for public sector bodies, summarised in Appendix 3. However, the Scottish Government is producing a Scottish Sustainable Procurement Action Plan which will give guidance to the Scottish public sector on how to build sustainability into public procurement. NHSScotland will reflect that guidance in the future implementation of its Sustainable Development Strategy.

Health, NHSScotland and Sustainable Development

The inextricable links between health improvement, healthcare provision and sustainable development are well understood. A positive natural environment has a beneficial effect on both mental and physical health, and many of the long-term illnesses impacting on the health service are, at least in part, related to immediate environmental triggers and economic and social factors.

Sustainable development is broader than environmental concerns, despite their fundamental importance. It also encompasses society's needs and the economy. Issues of social justice profoundly influence public health concerns, which are central to sustainable development. Social, economic, environmental and health inequalities often coincide, resulting in disadvantaged communities being disproportionately affected by issues like pollution, poor air quality, and limited or no access to safe green spaces.

As a major employer, and with significant resources at its disposal, NHSScotland is in a position to shape the communities it serves and improve their circumstances well beyond its direct health improvement objectives. Choice of location for facilities and services has an impact on the communities involved, so it is vital that positive impacts are maximised, and negative ones minimised. Added benefits can include local employment, local business and supply opportunities, and outreach work to address health inequalities.

There are many possibilities for advancing the sustainability of healthcare operations. These can include the priorities behind healthcare procurement policies; purchasing decisions relating to goods, services and buildings; relationships with local suppliers; investment in carbon-neutral technologies and renewable energy; greener transport initiatives, including Travel Plans, and use of more fuel-efficient vehicles and alternative fuels.

By adopting a culture focussed on sustainability within each Health Board, NHSScotland can create the necessary structures and promote the training essential to enable the success of this strategy, allowing it to go beyond environmental management towards an integrated approach to the environment, to healthy communities, and to the delivery of services.

In 2002, in 'Claiming the health dividend'²², the King's Fund described the following 'virtuous circle' of health, sustainability and healthcare service provision:





targeted, also help to reduce

health inequalities.



Anna Coote, editor of 'Claiming the health dividend' and Commissioner for Health at the UK Sustainable Development Commission, noted:

"The NHS is a huge and powerful buyer of goods and services. As a consumer of energy, a producer of waste, a cause of travel and a commissioner of building works, its potential impact on health, on the environment, and on the social and economic fabric of our lives is without parallel."

Similarly, in every sense, as one of Scotland's largest organisations with over 150,000 staff, a £10 billion annual budget and a vast and complex asset base worth some £4.9 billion, NHSScotland has an influence of national and local significance on our environment, society, and economy.

By maximising its opportunities, and managing and reducing its negative impacts, NHSScotland can make an important contribution towards meeting Scotland's sustainable development priorities, including reducing CO₂ emissions, reaching full economic potential and living longer and healthier lives.

Sustainability principles need to be mainstreamed through planning, delivery and monitoring of all healthcare services from the outset. As it cannot deliver the sustainability agenda single-handedly, these are not just challenges for NHSScotland alone. Although NHSScotland can influence some of these issues through its own policies and practices, equally, if not more importantly, it must operate through effective joint working via Community Planning Partnerships and regeneration initiatives with a range of key partners. For widespread health benefits, sustainability principles should be a priority in the design of all aspects of the built environment and not just those for healthcare facilities. This must extend to the provision of quality and energy-efficient housing, local and accessible services, and transport infrastructure.

The NHS is ideally placed to use its immense spending power to make more sustainable choices through its energy, building and transport policies, and provide a powerful example to others to take action on climate change, further reduce carbon emissions and promote a healthier, more sustainable future.

What is certain is that NHSScotland has a clear and important role in supporting and, in places, facilitating the delivery of the Scottish Government's targets and national outcomes, specifically the health ones, but also in contributing to many of the broader sustainability outcomes. This must be achieved not just through health interventions, but through joint working and a range of policy levers e.g. active travel plans and incentives. One opportunity for this is NHSScotland's active engagement with the Greener Directorate's 'leading by example' programme, where valuable lessons are being shared and developed for possible wider application across the whole public sector e.g. adoption and use of NHSScotland's Environmental Monitoring and Reporting Tool (eMART).

In taking forward the national challenges of the linked health and sustainable development agendas referred to above, a range of environmental and broader sustainability strategies, policies and tools developed specifically for the NHS and NHSScotland is available. The following are seen as particularly important.

The Environmental Management Policy for NHSScotland

In 2006, the Scottish Government issued HDL (2006)21 with mandatory requirements and guidance on the implementation of an environmental management policy for NHSScotland Bodies. It made useful and explicit links to sustainable development, and the role of improved environmental performance by NHSScotland in contributing to that. Its priorities include:

- use of an approved environmental management system, such as Corporate GREENCODE (see below), to report performance;
- annual 2% reduction in energy consumption until 2010, and future national targets thereafter. Targets to be set for NHSScotland Bodies, and agreed with Scottish Government relating to other impacts too, e.g. for water and waste water, waste reduction, etc.
- assessment of climate change impacts and a suitable adaptation strategy;
- key staff appointments, and
- monitoring requirements.

HFS published the Environmental Management Policy Action Plan in 2008. This provides a framework and identifies 50 priority actions for the implementation of the environmental management policy by all NHSScotland Boards.

Environmental performance and the Annual National Environment Report

NHSScotland's contribution to sustainable development can be assessed partially through the specifications and performance of its buildings and the way it manages them; the priorities behind its purchasing decisions; the distances travelled by its vehicles, and the quantities and ultimate fate of its waste. These issues tend to indicate the direct environmental impacts that can be attributed to the NHSScotland (energy, climate change, waste and pollution, for instance).

Since 1985 – 86, NHSScotland Boards have had an annual target reduction of 2% in energy use. In the 22 years since that baseline, against a target of 44%, Boards have achieved significant progress in managing their energy consumption, with a cumulative reduction of 40.7%. This has been achieved through both a reduction in the size of the health estate and through energy efficiency measures, whilst increasing service performance. Where there is less scope for further efficiency improvements, emissions could still be reduced substantially by harnessing carbon-neutral technologies, and by renewable sources of energy for heating or electricity as a substitute for fossil fuels.

The Scottish Government is committed to an emissions reduction target of 80% by 2050 through the Climate Change (Scotland) Bill. For NHSScotland to contribute its fair share, it is likely that the annual target of a 2% reduction in energy use will be replaced with a more stringent target both for energy efficiency and a reduction in CO₂ emissions. As shown above, although NHSScotland Bodies have considerable expertise and have performed well on energy use and CO₂ reductions to date compared with others, they should prepare for tougher targets. The recent introduction of an environmental HEAT target to reduce energy usage is an example. HEAT targets are fundamental to the performance and delivery of healthcare services at the local level throughout Scotland. From a 2007/8 baseline, in future, each Board must now reduce annually by 2% its energy use. Boards will be required to report their performance on energy reductions guarterly, with the first reporting year being 2009/10 (covering the two years post-2007/8, i.e. with a target reduction of 4%). The provisions of the Climate Change (Scotland) Bill, particularly the 50% reduction in CO₂ target by 2030, and introduction of a framework of annual targets, will inform development of NHSScotland's own CO₂ targets, performance requirements and responses.

HFS produces the NHSScotland Annual National Environment Report²³, which shows the performance of all Boards in relation to the NHSScotland's environmental targets. Although its scope is to increase, this report currently focuses only on hospitals in respect of the following core issues: energy consumption and costs; water consumption and costs; trade effluent and wastewater production and costs; clinical non-clinical and recycled waste arisings, and CO₂ emissions.

Whilst there is great value in continuing to report the specific environmental impacts noted above, there is a need to extend the monitored parameters to take better account of broader sustainability issues. HFS, with input from NHSScotland Boards, has undertaken some initial work to review the annual



report to consider extending its scope beyond hospitals to cover health centres and GP practices, and to incorporate data on, e.g. the procurement of equipment; recycling; biodiversity, travel planning; and procurement of buildings. The final conclusions of that work will need to be carefully integrated with this strategy and its ongoing implementation and development in the next 12 months.

Corporate GREENCODE

Corporate GREENCODE is a computer-based tool that enables NHSScotland Bodies to establish and implement an effective environmental management system, and to achieve full ISO 14001 certification. Three Boards have sites which have successfully achieved ISO 14001 status. HFS is working with a range of NHSScotland Bodies and other users to improve the Corporate GREENCODE toolkit, to increase its uptake, and to continue to improve environmental performance and compliance. The majority of Boards are actively engaged in the Corporate GREENCODE User Group.

BREEAM Healthcare

In 2008, a UK-wide healthcare version of the Building Research Establishment Environmental Assessment Method²⁴ replaced the NHS Environmental Assessment Tool (NEAT). Use of the new toolkit enables assessment of buildings under 9 sustainability criteria (Management; Health and Wellbeing; Energy; Transport; Water; Materials; Waste; Land Use & Ecology, and Pollution). Scottish Government Health Directorates support the general thrust of the other UK health departments that from August 2008 all Boards should seek to attain the BREEAM Healthcare 'excellent' rating for new builds and 'very good' rating for refurbishment of existing properties. SGHD is currently integrating such a requirement into its procurement policy and guidance, for building projects of £2million or more.

Good Corporate Citizenship Assessment Model

The GCCAM is an online toolkit produced by the Sustainable Development Commission and the NHS in England. The SDC is the UK Government's independent watchdog on sustainable development and has a team in Scotland. The tool's purpose is to help NHS organisations embrace sustainable development and tackle health inequalities through their day-to-day activities. The website includes links to case studies and essential resources, and a checklist-based benchmarking tool. Although developed initially for the NHS in England, and subsequently adapted for use in Wales, it has significant relevance and potential for further adaptation in Scotland, in particular to accommodate the Scottish Government's new strategic objectives, Performance Framework and Better Health Better Care priorities. The Scottish Government's Greener and Health Directorates, and HFS, are currently working on a project with the SDC in Scotland to adapt the GCCAM tool for Scotland by March 2010. That project, along with the NHSScotland carbon footprint project recently commissioned by HFS, will be pivotal in refining this strategy's priorities, targets and outcomes over the next year. However, for the present,



the 6 key issues in the SDC tool used in England have been used as a basis for developing the actions that follow in this strategy.

Benefits of Sustainable Development

In progressing the 6 key issues set out by the SDC, NHSScotland will improve its own environmental performance, enhancing its sustainability and direct contributions to the Healthier and Greener Scotland objectives. In doing so, it will also assist Government in achieving the other wider objectives and national outcomes. The following list suggests a few of the many benefits under each key issue:

Transport – Thoughtful planning regarding choice of site, access to it (including for pedestrians, cyclists, and those with mobility impairments), and public transport provision, can all contribute to staff satisfaction and retention. 'Better Health Better Care' and CEL 1 (2008)²⁵ make specific reference to the links between transport and health, and the importance and benefits of developing Travel Plans. Scottish Planning Policy 17 also highlights these links: "Access to opportunities to exercise is an important element of a strategy for improving health in Scotland. There are potential health benefits if people forego car travel for walking and cycling"²⁶. Clearly, advancing these issues requires the involvement and support of a range of important partners, e.g. local planning authorities.

Procurement – Benefits from sustainable procurement can relate to what is procured (healthy food, for instance, which can contribute to the success of the core services delivered by NHSScotland) and the way in which it is procured (which can benefit local businesses and help to build sustainable communities through supplier engagement processes). On climate change mitigation, there is a key opportunity for NHSScotland Boards to work closely with experts in National Procurement to take advantage of knowledge and research into sustainable procurement. For example, ensuring a consistent approach to procurement of low-carbon goods and services. Another example could be to procure new sources of green tariff electricity from suppliers. Similarly, there are huge opportunities to ensure and procure much more sustainable healthcare buildings through Frameworks Scotland²⁷, and through application of the principles in the revised Scottish Capital Investment Manual (SCIM)²⁸ and business case process (recently published by Scottish Government Health Directorates). The outcomes of the Scottish Government's Carbon Accounting Project will inform policy-making and budget setting across government directorates at the national level, but there will be important lessons, parallels and principles for the public sector, including NHSScotland, both as a whole and at the local level.

Facilities Management – Energy efficiency interventions frequently repay their investments within one year, and usually within two to five years (although renewable energy schemes can take longer). With energy prices fluctuating, but with the recent steep rises, such measures bring improvements in revenue costs and predictability, and can lead to much shorter pay-back periods. Developing on-site or off-site sources of renewable energy will also help to



mitigate climate change contributions. There may also be opportunities to explore with Community Planning partners community-based, or district energy solutions. Nevertheless, the priority remains to reduce energy demand in the first place, including through effective energy conservation measures, rather than continue to meet supply-side challenges.

Employment and Skills – With more than 150,000 staff, NHSScotland is one of the largest employers in the country and has a significant role in the development of the nation's workforce. By recruiting and training people from local populations, Boards can contribute to regeneration and social cohesion in their areas, whilst meeting objectives for reducing the impacts of commuting.

Community Engagement – Through their activities and services, Boards can help to remove health inequalities in those communities. Involving communities in the planning, operation and maintenance of facilities and services, helps in delivering more effective local services.

New Build Projects – In the mid to late twentieth century, health buildings were functional spaces occupied by patients, health workers and equipment. Recently, there has been wider recognition of the role of the environment in health and recuperation. This link is explicit in BREEAM tools which cover a range of building types and always include 'health and wellbeing' as one of the main category headings (partly because of established links between sustainable design and employee productivity). Although not NHS facilities, the Maggie's Centres are a high profile example, but designs that give precedence to daylight and to views out are taking a valuable step in the right direction.

The NHSScotland policy on design quality²⁹ addresses the point as follows:

"traditionally, there has been an assumption that the main requirement placed upon a healthcare facility should be the mitigation of infection or the risk of exposure to disease... By concentrating on the need for functional efficiency and the pathogenic concept of disease and health, healthcare facilities have been procured which contain environments which can be considered stark, institutional, stressful to their occupants and thus detrimental to the quality of care they are intended to provide. In spite of evidence of the major stress caused by illness and the subsequent traumatic experience of hospitalisation, there has, historically, been comparatively little emphasis on the creation of surroundings which can calm patients, reinforce their ability to cope in such environments and generally address their social and psychological needs.

The process of 'supportive design' begins by eliminating the environmental characteristics which are known to contribute to stress or can have negative impacts on outcomes and, importantly, continues by emphasising the inclusion of characteristics in the healthcare environment which research has indicated have the ability to calm patients, reduce stress and strengthen their ability to cope and promote healthy, healing processes."

Ulrich³⁰, and others, have highlighted the importance of views of and access to green space. These not only alleviate stress and boost morale in staff and patients, but have been shown to enhance the healing process and recovery

times. Provision of sufficient, diverse and quality green space, at both new and existing healthcare sites, is not only consistent with NHSScotland's duty as a public body to further the conservation of biodiversity, but will have benefits for staff, patients, visitors and the local community, as well as for wildlife.

Cost of Sustainable Development

A common misconception is that sustainable development is more expensive or too expensive. Whilst that may be true in short-term comparisons, it is not the case in the longer-term or holistic sense. In fact, genuinely sustainable development is more responsible as it accounts for social and environmental costs not normally or effectively (truly) factored into short-term pricing practices. Therefore, rather than asking what sustainable development will cost, a more relevant question is what not achieving it will cost.

Cost should be no barrier to sustainable development. It should be of less concern than the duty to secure Best Value, as public services need to make the best use of public money, and focus on helping the government achieve its overarching purpose and strategic objectives. Ministers aim to create a clearer, simpler and more effective public sector. There are 3 government programmes in place to deliver this: Best Value; Efficient Government, and Community Planning. Best Value principles underpin the operation of public service organisations, and balance quality and cost considerations in improving their performance. It centres on economy, efficiency, effectiveness, equal opportunities arrangements, and sustainable development. The Scottish Government has produced a helpful toolkit³¹ which provides advice and guidance on meeting the requirement on the wider public sector that: "An organisation which adopts Best Value principles will be able to demonstrate a contribution to sustainable development" (Secondary Guidance to Accountable Officers issued on behalf of Ministers May 2006).

Although cost can obstruct individual initiatives, sustainable development can yield overall cost savings. The Sustainable Procurement Task Force noted that "sustainable procurement, as part of an improved procurement process, seen as an organisational priority which questions the need to spend; cuts out waste, seeks innovative solutions and is delivered by well trained professionals will reduce rather than add to public spending in both the short and the long run. A resource efficient public sector will have lower impacts. Sustainability versus efficiency is a false choice. The taxpayer, and the citizen – and future generations – deserve both."²¹

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3. A Framework for Sustainable Development

Key Priorities in Sustainable Development for NHSScotland

As noted earlier, the strategy developed below is based on the six headline priorities set out by the SDC's Good Corporate Citizenship tool. They all have strong, direct or indirect links to the Scottish Government's objectives, outcomes and indicators. Each of the following 6 priorities is broken down into discrete areas of activity, through which managers can address cross-cutting topics such as greenhouse gas emissions, waste, and sustainable communities:

- Transport including journeys to, from, around and between sites by patients, staff and visitors;
- Procurement including equipment and food, and sustainable building materials;
- Facilities Management including Corporate GREENCODE reporting issues;
- **Employment and Skills** including staff training, retention and recruitment;
- Community Engagement including health inequality and community consultation;
- **New Build Projects** the design and construction of NHSScotland sites. The principles discussed generally apply, also, to refurbishments.

Table 2 indicates worthwhile strategies or example activities and objectives that will assist in addressing the six priority issues. The left-hand 'issues' column also contains a series of numbers (1-15) which cross-reference and correspond to the 15 national outcomes, with the central column indicating how those desirable outcomes might be evidenced. Relevant sources of information and guidance for Boards to develop their own action plans are signposted in the right hand column. This is not intended to be a comprehensive list of information sources; rather, it is an indication of where to start. Further references can be found under the same topic headings on the Good Corporate Citizen website (http://www.corporatecitizen.nhs.uk/). Although that site contains materials mostly developed in and for England and Wales, it is a useful reference point for NHSScotland Bodies, especially, e.g. for getting started on their own sustainable development action plans^{32, 33}. The current project to adapt the GCCAM tool specifically for Scotland means it will eventually contain Scottish-specific case studies.

It should be taken as read that Boards' own action plans will need appropriate development, implementation, monitoring and reporting.

Table 2 – A framework for addressing key target areas

TRANSPORT			
Issue	Example Strategies & Activities	Outcomes	Resources
Carbon emissions from NHSScotland fleet (influence on National Outcomes 10, 12, 14, 15)	Review business travel policies – reduce need to travel and incentives to drive. Introduce programmes to assess and improve efficiency of all vehicles. Pilot novel options such as hybrid vehicles. Monitor fuel used by fleet and distance travelled (include in annual eMART returns). Address CO ₂ emissions through improvements in logistical planning – requiring more service delivered per mile travelled. Provide information and trial technologies to	CO ₂ emissions from transport monitored and reduced to contribute to an overall 80% reduction from 1990 levels in line with Scottish Government climate change targets by 2050. Reductions sought across all operations, not just those from energy consumption in buildings, where the greatest progress has been made to-date.	Scottish Government guidance on transport is available at: www.chooseanotherway.com The Energy Saving Trust has a website devoted to travel, which includes hints, strategies and case studies relating to green fleet management. www.est.org.uk/fleet The Trust also offers free Green Fleet Reviews. eMART will also monitor business mileage for lease and private vehicles.
Carbon emissions from patients and staff travel (influence on National Outcomes 10, 12, 14, 15)	support fuel-efficient driving. Planning, site location, layout and access, public transport provision, travel plans. Develop and implement Travel Plans to support the National Transport Strategy December 2006. Carry out transport surveys. Promote an overarching travel hierarchy for Board business – walk, cycle, public transport, managed service transport, etc. Promote car-sharing. Provide a travel information notice board. Links to health inequalities agenda – pay attention to accessibility for socially excluded groups and deprived areas.	Effective Travel Plans in place for all Boards, informed by travel survey information. Guidance on travel hierarchy available for and promoted to staff travelling on Board business. Monitoring, and evaluation processes in place to review effectiveness of measures and provide basis to ensure ongoing progress (planning and monitoring of initiatives should enable their relative CO ₂ emissions to be evaluated).	Scottish Planning Policy (SPP) 17 – Planning for Transport. http://www.scotland.gov.uk/Publications/200 5/08/16154406/44078 Public transport information on www.travelinescotland.com Check CEL 1 (2008) – Revised Guidance on Hospital Car Park Charging. http://www.pcpd.scot.nhs.uk/PDFs/Carparkin g/CEL2008_1.pdf The Energy Saving Trust offers a free travel planning service for organisations in Scotland, which has already been used in NHSScotland. www.est.org.uk/fleet



Issue	Example Strategies & Activities	Outcomes	Resources
Access by pedestrians and cyclists (influence on National Outcomes 6, 10, 12, 14, 15)	Develop and implement travel plans, in association with regional transport partnerships, local authorities, local community representatives, public transport operators and other stakeholders, to increase and facilitate the use of healthier and greener (sustainable) travel choices. Monitor and set targets for higher levels of cycling, walking and public transport. Use fiscal incentives to offer and promote tax-efficient cycle to work scheme. Provide high quality and convenient facilities for cyclists that are well designed, well located, and well signed. Awareness raising of the connection between travel choices and health – involve front-line health professionals.	Effective Travel Plans in place to support greater walking, cycling and use of public transport. Proportion of health-related journeys using public transport, and by walking and cycling, increased. Reliance on car-dependent travel choices decreased.	Sustrans, through its Active Travel Scotland programme, offers several guidance documents on this topic. www.sustrans.org.uk Cycle Friendly Employer Awards – http://www.cyclingscotland.org/cyclefriendlye mployer.aspx Paths For All partnership supports the promotion of walking in the community, healthcare and workplace settings in Scotland www.pathsforall.org.uk Guidance on the cycle to work scheme can be found on http://www.dft.gov.uk/pgr/sustainable/cycling cycletoworkschemeimplementat5732

PROCUREMENT	PROCUREMENT			
Issue	Example Strategies & Activities	Outcomes	Resources	
Sustainable procurement (influence on National Outcomes 1, 2, 11, 12, 14)	Develop a clear Sustainable Procurement Policy in each Board, with guidance for staff on the importance of sustainability issues, and consistent with national logistics and procurement policy procedures, e.g. those of National Procurement, Frameworks Scotland, etc. Develop objectives and indicators of sustainable procurement and regularly monitor and review progress towards these.	Environmental impacts of NHSS consumption and production reduced. Procurement realises community benefits. Staff involved in procuring goods and services are clear on the sustainability implications of their choices.	Best Value toolkit – Sustainable Scotland Network: <u>http://www.sustainable-</u> <u>scotland.net/page.asp?pg=43</u> <u>http://www.sustainable-</u> <u>scotland.net/documents/PublicSectorBestValueToolkit.pdf</u>	



PROCUREMENT (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources
Sustainable procurement (influence on National Outcomes 1, 2, 11, 12, 14)	Embed sustainability within selection and evaluation processes of tenders (to which suppliers have to be able to respond) and may include specification of aspects that bring benefits to the local community. Evaluation should include sustainability considerations, including, e.g. carbon footprint. Establish relations with local businesses and social enterprises and encourage fair competition for contracts. Monitor involvement of local suppliers to ensure they have a fair and equal opportunity to bid for contracts on the same basis as others. Develop links between local procurement and transport objectives.	Best Value secured through sustainability receiving a high priority in procurement decisions, from supplier selection and evaluation, to product and service choices. Low-carbon and more sustainable local suppliers are encouraged to build a relationship with NHSS.	The Scottish Government will publish a Scottish Sustainable Procurement Action Plan, which will be a key source of information and guidance for NHSS. Small supplier better value? Office of Government Commerce 2005. <u>http://www.ogc.gov.uk/documents/CP0083</u> <u>Small supplier better value.pdf</u>
Sustainable food (influence on National Outcomes 2, 5, 6, 8, 12, 14)	Ensure that menus and retail outlets reflect "5 a day" advice. In the Sustainable Procurement Policy, set clear targets to increase proportions of seasonal and organic fruit and vegetables purchased. Consult with fresh food suppliers and build menus around availability. Healthy and sustainable food principles can be extended to include non-food items – e.g. natural cleaning materials. Explore relationship between procurement and health.	Environmental impacts of NHSS consumption and production minimised, and opportunities maximised. Healthier diet actively promoted by NHSScotland bodies specifying fresh, seasonal produce. Providers of healthy food encouraged and engaged by NHSScotland. Sustainable food is a major element of the procurement strategy. Carbon footprint of food monitored and minimised.	National Programme to Improve Nutritional Care in Scotland's Hospitals. <u>http://www.sehd.scot.nhs.uk/mels/CEL2008_32.pdf</u> Eating for Health – Scottish Executive 2004. <u>http://www.scotland.gov.uk/library/document</u> <u>s/diet-00.htm</u> Sustain – the alliance for better food and farming – has published case studies on Getting more sustainable food into London's hospitals, and A manual for sustainability in public sector catering. <u>www.sustainweb.org</u>



PROCUREMENT (PROCUREMENT (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources	
Waste minimisation (influence on National Outcomes 2, 10, 12, 14, 15)	Engage with suppliers to reduce packaging waste and encourage "take-back". Respond effectively to targets for waste minimisation and increase proportions of recycled and recyclable materials purchased to reduce waste generation. Review need for purchase when other options are possible, e.g. repair, sharing with other departments, purchase of service	Amount of waste sent to landfill minimised. More efficient use of resources as demand for recycled and re-used products is encouraged and increased. Financial and non-financial costs and benefits over the useful life of major purchases factored in to ensure most sustainable procurement choices.	Waste Minimisation for Managers (GG367). http://www.envirowise.gov.uk/uk/Our- Services/Publications/GG367-Waste- minimisation-for-managers.html The Scottish Environment Protection Agency's (SEPA) website contains information promoting waste minimisation. http://www.sepa.org.uk/waste.aspx WRAP offers tools and guidance to help with	
	rather than product. Lifecycle costing of significant purchases – include operational, maintenance and disposal (and carbon emission) costs. Procure recycled paper – specify appropriate minimum recycled content for different applications. Follow Waste Resources Action Programme (WRAP) guidance.		targets for use of recycled materials in construction contracts <u>http://www.wrap.org.uk/construction/index.ht</u> <u>ml</u> and paper procurement – <u>http://www.wrap.org.uk/construction/construc</u> <u>tion_procurement/devolved_administrations/</u> <u>scottish_public_sector/paper_resources.html</u>	
Energy efficient equipment (influence on National Outcomes 2, 14)	Any goods subject to the EU-energy label to be A-rated or better. The amount of specialist diagnostic equipment, e.g. scanners, is increasing. Whilst the primary choice will be their suitability for the intended function, energy efficiency should also be a consideration. Check energy efficiency of existing electrical and electronic equipment, with a view to replacement or maintenance. Comply with WEEE regulations where equipment is to be disposed of.	Least energy-efficient equipment identified and prioritised for replacement (replacement policy is driven primarily by patient safety, although energy efficiency is important, it is not the over-riding factor, but once a decision has been taken to replace kit, energy efficiency should feature in the decision of what to buy.	The Government's Market Transformation Programme offers guidance relating to energy efficiency of a range of products. <u>www.mtprog.com</u>	



PROCUREMENT (C	PROCUREMENT (Cont)		
Issue	Example Strategies & Activities	Outcomes	Resources
Energy efficient equipment (influence on National Outcomes 2, 14)	When accounting for the costs of energy used by equipment, allow also for the energy used by air conditioning to remove the heat generated by the equipment. Provide staff training to ensure best possible use of equipment.	A lower overall lifecycle energy impact is achieved, contributing to the Scottish Government's commitment to reduce CO ₂ emissions by 80% by 2050.	
Suppliers (influence on National Outcomes 1, 10, 14)	Evaluate the extent to which sustainability can legally and usefully be incorporated into procurement policies. Incorporate sustainability requirements into product and service specification documents. Ask for and test proof of sustainability credentials of suppliers' products and services where this information is directly relevant to the performance of the contract in question.	Environmental impacts of NHSS consumption and production minimised, and opportunities maximised. Social and health benefits of workers enhanced. Greater use of local and of more sustainable products and services through development of a sustainable procurement strategy and Action Plan.	Making the case for sustainable procurement: the NHS as a good corporate citizen – NICE Report, 2005. <u>http://www.nice.org.uk/aboutnice/whoweare/ aboutthehda/hdapublications/making the ca</u> <u>se for sustainable procurement the nhs a</u> <u>s_a good corporate_citizen.jsp</u>
Suppliers (influence on National Outcomes 1, 10, 14)	Where relevant, seek assurance over suppliers' site safety and control processes (e.g. details of Environmental Management System - EMS). Run sustainable development workshops for existing suppliers. Relevant issues include legal and sustainable timber, and worker rights – at home and abroad.	Clear indicators of progress set and monitored to inform future procurement decisions and improvement. Supplier relationships strengthened.	Environmental Management Systems (EMS) - HFS is developing its website to include information on Corporate GREENCODE® and ISO 14001. <u>http://www.hfs.scot.nhs.uk/</u> The Forest Stewardship Council is one of four schemes which provide sufficient evidence of timber legally sourced from sustainable origins. <u>http://www.fsc.org/</u> The Fairtrade Foundation <u>www.fairtrade.org.uk</u>



FACILITIES MANAGEMENT			
Issue	Example Strategies & Activities	Outcomes	Resources
Energy and carbon – facilities (influence on National Outcomes 10, 12, 14)	 Develop and implement energy management programmes for buildings and plant to reduce greenhouse gas emissions through: reducing energy consumption; increasing energy efficiency; increasing proportion of energy from carbon-neutral technologies and renewable generation (both on-site and off-site). Support with appropriate programmes of monitoring and sub-metering, and 'invest to save' initiatives. Maintenance and cleaning programmes should promote efficiency (e.g. of lighting installations) and should be tasked with identifying and delivering improvements. 	Significant reduction in building energy use and in CO ₂ emissions contributing to the Scottish Government's commitment to reduce CO ₂ emissions by 80% by 2050. All buildings have clear energy management programmes and supporting processes in place. Financial benefits arise from reduced energy cost outlays, and from renewable energy generation revenues. 'Invest to save' and energy efficiency grant schemes such as CEEF realise savings which can be re- invested in patient services.	HFS is compiling information on the carbon emissions / CO ₂ reduction HEAT target / KPI. It will be circulated to all Boards. The Scottish government's Central Energy Efficiency Fund (CEEF). Boards can access this for energy efficiency initiatives. <u>http://ceef.energy-efficiency.org/</u> The Carbon Trust has published guides relating to energy efficiency in a huge range of building types and situations. <u>www.carbontrust.co.uk</u> Specific requirement listed in SGHD HDL(2006)21 Environmental Management Policy (2% reduction in energy consumption per annum, climatically adjusted).
Energy and carbon – facilities (influence on National Outcomes 10, 12, 14)	Devise awareness raising programmes – e.g. public displays showing energy use, energy sources (e.g. on-site renewables), and effect of energy saving initiatives.		http://www.sehd.scot.nhs.uk/mels/hdl2006_2 1.pdf Scottish Health Technical Memorandum 07- 02: EnCO ₂ de – making energy work in healthcare. Health Facilities Scotland (2006). http://www.hfs.scot.nhs.uk/online- services/publications/environment/miscellane ous/



FACILITIES MANAGEMENT (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources
Waste production – both clinical and non-clinical (influence on National Outcomes 12, 14, 15)	Preventative maintenance maximises resource efficiency and reduces waste creation by lengthening replacement cycles. Factor disposal costs into decisions to repair / replace (note the rapid annual increase in landfill tax). Carry out waste audits, and develop clear targets for reductions in waste arisings and appropriate follow-up action plans.	Amount of waste sent to landfill minimised. Financial savings as waste disposal costs are minimised.	Waste Management in NHSScotland – Action Plan: 2007 – Health Facilities Scotland – a response to Audit Scotland's May 2005 Follow-Up Report 'Waste Management in Scottish Hospitals'. <u>http://www.hfs.scot.nhs.uk/online-</u> <u>services/publications/environment/miscellane</u> <u>ous/</u>
Waste re-use and recycling (influence on National Outcomes 12, 14, 15)	Review existing waste management contracts to determine fates of the various waste streams. Where appropriate, increase segregation of waste into more streams to improve recycling rates; investigate recycling services offered by local waste management contractors.	More efficient use of resources, as rates of recycling are steadily increased within a context where overall waste production is falling. Amount of waste sent to landfill minimised.	The Waste Aware Business website, which operates under the auspices of Waste Aware Scotland, identifies local disposal routes for business waste. <u>www.wasteawarebusiness.com</u> , Waste Aware Scotland's healthcare micro-site is under development. It will provide advice how healthcare premises, can reduce, reuse and recycle. <u>http://www.wasteawarehealthcare.org.uk/</u>
Waste re-use and recycling (influence on National Outcomes 12, 14, 15)	Identify types of materials and equipment that might constructively be re-used either within or outside the organisation, in preference to recycling, and develop systems accordingly.		The WRAP website is a useful starting point when investigating alternative uses for waste. <u>www.wrap.org.uk</u> . Also Remade Scotland <u>www.remade.org.uk</u>



FACILITIES MANA	FACILITIES MANAGEMENT (Cont)		
Issue	Example Strategies & Activities	Outcomes	Resources
Water consumption (influence on National	Incorporate water efficient fittings and equipment (low flush toilets, aerated taps, PIR initiation, auto-stop taps, etc.) into maintenance and replacement programmes.	Environmental impacts of NHSS consumption and production minimised, and opportunities maximised.	"Making the most of your liquid assets – creating a water efficient business" – Scottish Water. <u>www.scottishwater.co.uk</u> www.envirowise.gov.uk/water
Outcomes 12, 14, 15)	Reduce consumption of mains water by using rain or 'grey' water where appropriate.		The Environment Agency's "water resources" pages include factsheets on water saving
	Use leak detection and carry out water audits – incorporate more water meters to help identify opportunities for reducing water consumption.	1.0	technologies. <u>http://www.environment-agency.gov.uk/business/topics/water/32066.</u> aspx
	Set clear targets for reduction in water consumption in line with health service best practice but taking into account the particular challenges of individual buildings.		

EMPLOYMENT & S	EMPLOYMENT & SKILLS			
Opportunities (influence on National Outcomes 2, 3, 7, 8, 13, 15)	 Build on existing good practice within NHSScotland to strengthen: employment diversity and equality, with targets set to provide opportunities for the long-term unemployed, both directly and through the letting of contracts; 	Contribution to the Scottish Government's commitment to realise Scotland's full economic potential with more and better employment opportunities for our people	 Delivering Care, Enabling Health: Harnessing the Nursing, Midwifery and Allied Health Professions' Contribution to Implementing Delivering for Health in Scotland, Scottish Executive 2006. The NEET Strategy, More Choices, More Chances, an action plan to reduce the proportion of young people not in education employment or training in Scotland, Scottish Executive 2006. www.scotland.gov.uk 	
Opportunities (influence on National Outcomes 2, 3, 7, 8, 13, 15)	 disability access structured training, facilities and career development approach for all staff. 		Flying Start NHS. http://www.flyingstart.scot.nhs.uk National Workforce Plan 2006 – Scottish Executive Health Department.	



EMPLOYMENT & SKILLS (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources
Flexible working (influence on National Outcomes 2, 4, 7)	Build on existing good practice within NHSScotland to improve recruitment and retention whilst offering support to staff with caring and other commitments.	Development of a flexible working plan that is compatible with wider objectives around, e.g. health, family, energy and climate change	Better Health, Better Care: Planning Tomorrow's Workforce Today. Scottish Government. http://www.scotland.gov.uk/Publications/200
	Invest in facilities that enable flexible working practices – e.g. secure access to IT systems from home, crèche facilities.		<u>7/12/13102832/5</u>
	Ensure workforce planning is an integral part of Local Delivery Plans.		
Healthy workplace (influence on National	Improve recruitment, retention and productivity by providing a healthy workplace (reference sustainable design objectives) – green spaces, good indoor air quality, daylight, opportunities for active travel, etc.	All buildings managed in line with <i>Managing Health at Work</i> .	Free guides on designing for airtightness and avoiding use of toxic chemicals in construction and management of buildings - <u>http://www.seda2.org/guides/index.htm</u>
Outcomes 2, 6, 10, 14, 15)	Ensure these principles are central to Frameworks Scotland contracts for construction, refurbishment and management of healthcare estate (see buildings section below).		Managing health at work: Partnership Information Network guidelines for NHSScotland 2003. HDL(2003)04 <u>http://www.sehd.scot.nhs.uk/mels/HDL2003</u> 04.pdf www.workinginhealth.com <u>http://www.healthworkerstandards.scot.nhs.u</u> <u>k/</u>



COMMUNITY ENGAGEMENT				
Issue	Example Strategies & Activities	Outcomes	Resources	
Community participation (influence on National Outcomes 2, 4, 7, 8, 11, 13, 15)	Build on existing good practice within NHSScotland to improve, expand and devise new civic participation schemes. Seek involvement of poorer communities. Align strategies and share resources between Local Authorities and other support partners such as Registered Social Landlords. Ensure new patient focus and public representation optimised in community consultation, evaluation and decision-making processes.	A greater proportion of people enabled to contribute to a growing economy, lead healthier, more independent lives and live in a more sustainable way that is better for the environment Improved partnership working with Local Authorities and community organisations. Greater participation and involvement of poorer communities.	Community Planning Partnerships (facilitated by Local Authority) CHP – Involving the Voluntary Sector, 2005. Also CHP Statutory Guidance, 2004. NHS Centre for Involvement. http://www.nhscentreforinvolvement.nhs.uk Community Health Partnerships – Involving People – Advice Notes, SEHD 2004.	
Work in the community (influence on National Outcomes 7, 11, 13)	Encourage staff involvement in local community and environmental initiatives, and participate in networks active in sustainable development.	Information provided and other events supported to enable staff to be aware of opportunities to volunteer in the community. Greater work flexibility provided to enable staff to become involved more easily.	The Opportunities for Environmental Volunteering to deliver Scottish Executive Policies: a discussion paper – Scottish Executive 2007. Volunteering Strategy – Scottish Executive 2004 <u>www.scotland.gov.uk</u>	
Develop links between strategies (influence on National Outcomes (7, 11, 15)	Align strategies by developing links between outreach projects and programmes, care in the community and the sustainable development strategy. Work in partnership with other agencies to tackle inequality.	A more integrated approach between different projects and programmes, reducing duplication of effort and resulting in better use of resources. Greater equity.	Health, diet and lifestyle advice through Healthy Start – <u>http://www.healthystart.nhs.uk/en/fe/page.as</u> <u>p?n1=1&n2=8&n3=97</u>	



Issue	Example Strategies & Activities	Outcomes	Resources
Putting sustainable development principles at the	Clear indication of senior level commitment required. Also recognition by finance directors of whole life costs (so efficiency measures can be paid for by future savings).	People's physical and mental wellbeing supported through the provision of well- designed, sustainable places / healthcare estate.	A Policy on Design Quality for NHSScotland – SEHD 2006 – requires NHSScotland Bodies to appoint a design champion at Board level, and a supporting project officer.
heart of construction projects (influence on National Outcomes 1, 2, 3, 6, 10, 12, 14, 15)	Appoint sustainability 'champion' for projects, and hold sustainable design workshops. Improve linkages between building design	Clear governance arrangements, targets and indicators in place to drive improved performance in the sustainable design, operation, management and delivery of healthcare construction projects.	www.pcpd.scot.nhs.uk. Architecture + Design Scotland (ADS) has a healthcare design champion. ADS supports a NHSS Design Champions Network
	team and building users (<i>"The contribution of designers is fundamentally restricted by a lack of consultation & contact between the design team and clinical staff"</i> – comment from CABE Health Week 2006).		http://www.ads.org.uk/tag/Health In April 2008 ADS published 'Masterplannin Health – a brief guide for Health Boards', with specific relevance to NHSScotland.
	Focus on influence of building design on health – e.g. daylight, views, air quality.		http://www.ads.org.uk/documents/380/380.p
	Align sustainable design and design action plans.		Scottish Capital Investment Manual (2009). http://www.scim.scot.nhs.uk/
	Embrace sustainability principles in business case process required by revised SCIM.		Building Research Establishment Environmental Assessment Method for
	Embed sustainable developments firmly and clearly in specifications and contract agreements when procuring and commissioning buildings.		Healthcare (BREEAM Healthcare) is an important resource for guiding standards of sustainable construction and for certification of buildings.
	Aim for BREEAM Healthcare 'Excellent' rating for all new build, and 'Very Good' for refurbishment projects.		http://www.breeam.org/page.jsp?id=105 http://www.seda2.org/guides/index.htm
	Design for deconstruction; airtightness and toxic chemical reduction in buildings (see 3 free guides by Scottish Ecological Design Association (SEDA)).		HTM 07-07 – Sustainable Health and Socia Care Buildings (2009) - to be available from the Stationery Office. <u>http://www.tso.co.uk/</u>



NEW BUILDS (AND REFURBISHMENTS) (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources
Putting sustainable development principles at the heart of construction projects (influence on National Outcomes 1, 2, 3, 6, 10, 12, 14, 15)	Establish methods of incorporating sustainable development objectives into contracts. Maximise opportunities through Frameworks Scotland.		Sustainable Buildings Guide (HFS, in press). Scottish Capital Investment Manual (2009). http://www.scim.scot.nhs.uk/ Setting a requirement for recycled content in contracts www.wrap.org.uk www.wrap.org.uk/procurement_scotland
Carbon emissions from future site-wide energy use (influence on National Outcomes 6, 10, 12, 14, 15)	Respond to demanding targets for carbon emissions. Recognise that this might be less expensive than it seems, as highly efficient buildings need less plant (and space for it), sometimes resulting in lower capital costs. Efficient new buildings are essential in meeting overall CO ₂ reduction targets. Take a site-wide approach to supply of heat and power – not just one building at a time. Set objectives for meeting energy needs of new buildings with on-site generated renewable electricity: must at least meet planners' requirements. (SPP6: Renewable Energy).	Contribution to the Scottish Government's commitment to reduce CO ₂ emissions by 80% by 2050	The Carbon Trust offers a free Design Advice Service to minimise carbon emissions from new buildings, as well as renewable energy solutions. <u>www.carbontrust.co.uk</u> Scottish Health Technical Memorandum 07- 02: 'EnCO ₂ de – making energy work in healthcare' includes a good design and efficiency checklist. Health Facilities Scotland (2006). <u>http://www.hfs.scot.nhs.uk/online-</u> <u>services/publications/environment/miscellane</u> <u>ous/</u> . CIBSE Renewable Energy Sources for Buildings (TM38) – book and tool, to determine appropriate technologies for a project. <u>www.cibse.org</u> Scottish Planning Policy (SPP6) – Renewable Energy <u>http://www.scotland.gov.uk/Publications/200</u> <u>7/03/22084213/0</u>



NEW BUILDS (AND REFURBISHMENTS) (Cont)			
Issue	Example Strategies & Activities	Outcomes	Resources
Resource efficient and sustainable design (influence on National Outcomes 6, 10, 12, 14, 15)	As a first step, all new builds to aim to achieve BREEAM Healthcare 'excellent' rating. Reduce energy losses by first focussing on high levels of insulation and airtightness before considering introduction of new plant, e.g. more efficient boilers. Also maximise natural lighting and ventilation. These measures will minimise energy consumption or loss via high levels of mechanical and electrical equipment. Through good design, optimise efficient use of resources throughout the lifecycle– considering consumption throughout the building lifecycle (i.e. planning and design, construction, maintenance, replacement, repair, demolition). Increase use of prefabrication and off-site manufacture to minimise waste and improve quality management.	People's physical and mental wellbeing supported through the provision of well- designed, sustainable places/ healthcare estate. Consistent approach to design brief, embedding sustainable development principles.	HTM 07-07 – Sustainable Health and Social Care Buildings (2009) - to be available from the Stationery Office. http://www.tso.co.uk/ Sustainable Buildings Guide (HFS publication pending). The BRE's Green Guide to Specification and its lifecycle assessment software tool ENVEST can be used to determine the environmental profile of construction materials. http://envest2.bre.co.uk The Waste Resources Action Programme (WRAP) offers tools to help with targets for use of recycled materials in construction procurement. www.wrap.org.uk/procurement_scotland
Resource efficiency in construction (influence on National Outcomes 6, 9, 10, 11, 14, 15)	Develop and implement strategies to minimise the immediate impact of construction projects on the environment and on neighbours, including, e.g. through use of Site Waste Management Plans (SWMPs) for all projects, and off-site prefabrication.	Detrimental environmental and social impacts of NHSS construction activities minimised.	Envirowise has information dedicated to waste minimisation and construction – www.envirowise.org/skip SEPA is conducting further work on promotion of SWMPs <u>http://www.sepa.org.uk/waste/moving_towar</u> <u>ds_zero_waste/waste_planning/development</u> <u>planning.aspx</u>



NEW BUILDS (AND REFURBISHMENTS) (Cont)				
Issue	Example Strategies & Activities	Outcomes	Resources	
Resource efficiency in construction (influence on National Outcomes 6, 9, 10, 11, 14, 15)	Construction contractors to have a certified environmental management system (EMS), and accreditation to, e.g. the Considerate Constructors Scheme.	Detrimental environmental and social impacts of NHSS construction activities minimised.	Department of Business, Enterprise and Regulatory Reform (BERR, (formerly the DTI): Site Waste Management Plans (SWMP) – guide for construction contractors and clients. <u>www.constructingexcellence.org.uk</u> Also on the Constructing Excellence website, the KPIZone introduces Key Performance Indicators for benchmarking construction site water use, energy use, transport, etc. The Waste Resources Action Programme (WRAP) offers tools to help with targets for use of recycled materials in construction procurement – www.wrap.org.uk/procurement_scotland	
Focus on green spaces and biodiversity (influence on National Outcomes 1, 5, 6, 7, 8, 10, 12, 14, 15)	Provide more interesting grounds and views for the benefit, access and enjoyment of patients, staff and visitors at healthcare sites. Achieve this through appropriate landscaping and planting to protect and enhance diverse and native habitats and species. Implement the biodiversity guidance provided by HFS in 2007, and seek further information and support from the relevant local authority and Local Biodiversity Action Plan (LBAP) officer.	Healthier and more stimulating grounds aid patient recovery; boost staff morale and visitor interest, and provide a haven for wildlife. NHSScotland fulfils its duty to further the conservation of biodiversity, and contributes to the implementation of the Scottish Biodiversity Strategy.	Local authority staff and Local Biodiversity Action Plans Greenspace Scotland. <u>www.greenspacescotland.org.uk</u> The Biodiversity Duty and NHSScotland (HFS 2007) <u>www.hfs.scot.nhs.uk/publications/biodiversity</u> <u>-duty.pdf</u> The Scottish Executive – Delivering the Scottish Biodiversity Duty. <u>www.biodiversityscotland.gov.uk</u>	

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NEW BUILDS (AND REFURBISHMENTS) (Cont)				
Issue	Example Strategies & Activities	Outcomes	Resources	
Regeneration and planning (influence on National Outcomes 2, 6, 8, 10, 12, 14, 15)	Apply the principles promoted in the ADS Masterplanning Health guidance. Ensure that new facilities enhance the neighbourhood through catalysing regeneration, through design quality, and through a sensitive approach to travel planning that takes account of the needs of – and impacts on – local communities. Full engagement with Local Authority planners and others to ensure appropriate siting and operation of healthcare buildings. Beyond the boundaries of the NHS estate, engage with and influence the regeneration process, in order to offer the possibility of healthier communities. Use public art – especially if it involves the local community.	People's physical and mental wellbeing supported through the provision of well- designed, sustainable places / healthcare estate. A greater sense of involvement and ownership through participation.	'Masterplanning Health – a brief guide for Health Boards', http://www.ads.org.uk/documents/380/380.p df The Scottish Capital Investment Manual seeks to embed sustainability within design briefs, as well as selection and evaluation of contractors. http://www.scim.scot.nhs.uk/	
Lifecycle Design (influence on National Outcomes 1, 2, 6, 10, 11, 12, 14, 15)	Design that has the flexibility to meet likely future needs. Contribute to the implementation of Scotland's Climate Change Adaptation Strategy through ensuring healthcare building design can withstand and operate comfortably in the changing climate. Develop a climate change adaptation strategy that sets out clear guidance as to how best to adapt buildings. Each new and existing building should have a climate change risk assessment undertaken.	The healthcare estate has reduced exposure to and greater capacity to withstand the risks and threats posed by climate change.	Useful guidance and tools, and information on sharing best practice are available from a number of sources: Sustainable Scotland Network: <u>http://www.sustainable-</u> <u>scotland.net/page.asp?pg=27</u> Scottish Climate Change Impacts Programme (SCCIP): <u>http://www.sccip.org.uk/Default.aspx?pid=1</u> Climate change and the indoor environment – impacts and adaptation (TM36) – CIBSE 2005. <u>www.cibse.org</u>	

4. Where do I start?

Key Stakeholders

Internal stakeholders

The sustainable development agenda presents major challenges to organisations at any scale – but particularly for an organisation of the scale and complexity of NHSScotland. Energy consumption, for instance, has been substantially reduced over a 20 year period, but there is still much to be done – with further annual reductions of 2% required (and more stringent annual CO₂ reduction targets likely). NHSScotland should ensure that its staff are in place, have a clear remit and understanding of the tasks, and are willing and equipped to take on such challenges. While the Scottish Government, SDC Scotland and HFS deliver the project in next 12 months to adapt the GCCAM tool for specific use in NHSScotland, which will refine this strategy, in particular Table 2, the most practical and essential thing for NHSScotland Bodies to be doing is ensuring the most appropriate governance structures are in place to ensure Boards are ready to implement the revised and refined strategy from April 2010 onwards. A number of Boards already have Sustainable Development Teams, or similar arrangements.

In order to engage staff in this range of activity, committed leadership is required, so ultimate responsibility for the plan should rest with a senior individual with a good understanding of the key sustainable development issues and a personal commitment to them. For this reason, it is vital to have, as suggested in the Environmental Management Policy Action Plan for NHSScotland, a board-level environmental champion (better still a sustainable development champion) in each NHSScotland Body to ensure consistency of approach at the strategic, decision-making level.

It is also vital to have a senior member of staff appointed as Environmental Management Representative (EMR) for each Board who will be responsible for the monitoring and reporting of environmental performance through the Corporate GREENCODE environmental management system. The EMR should be able to work with other staff or cross-cutting teams responsible for, e.g. estates and facilities, waste, energy use, supplies, transport, etc. This will help to ensure legislative compliance, and where possible best practice, in the dayto-day operations. However, as the EMR will cover predominantly the environmental sustainability aspects and performance issues, there is a clear need to identify appropriate personnel to be responsible for doing the same for the economic, social and health aspects of sustainable development, to ensure that all six of the current priority areas (transport; procurement; facilities management; employment and skills; community engagement; and new build, refurbishment and biodiversity, are all effectively covered.

In support of putting the above governance structures in place, effective and training will be required for the various target groups internally for example:



- train all decision makers and key influencers in the principles of sustainable development through, for instance, short seminars demonstrating the links between aspects of NHSScotland activity, health outcomes, and relevant legislation and policies;
- targeted training for individuals tasked with delivering specific aspects of this strategy and related policy commitments. Possibilities include technical training for facilities engineers (e.g. in identifying wasted resources and opportunities for improvement); and training for environmental managers in making the business case for, and implementing, resource efficiency and other projects, and in influencing behaviour;
- sustainable development should be included in the induction process, for all new staff to emphasise the importance attached to the issue and relevance to ordinary activities. A refresher course should be developed for existing staff.

There should be a focus on empowerment. For example:

- develop support networks within and between Health Boards (including through existing HFS groups), to share problems and solutions. This might involve some or all of the following: seminars; newsletters to publicise best practice; internet forum; a fully-funded centre of excellence; and guidance;
- form, support and encourage multi-disciplinary cross-service groups which are tasked with developing specific aspects of their Board's sustainable development action plan;
- establish rewards for new ideas and initiatives these could be for projects seen through to completion, and/or for ideas submitted to a mailbox set up for the purpose;
- awareness raising to demonstrate the contribution that all staff can make through modifying their use of energy and resources, and to demonstrate the links between the action plan and the services delivered by the Board.

External stakeholders

Sustainability cannot be successfully developed and delivered behind closed doors, because relationships between internal activities and external effects (environment, community, economy) are so important, and many different partners have important contributions to make.

Therefore Boards need to develop an understanding of who their external stakeholders are and involve them the creation and delivery of the action plan. In this way, Boards can benefit from the considerable expertise that exists within them. A key national delivery programme or mechanism for this, which has been shown to successfully allow partnership working between NHSScotland Boards and external agencies, is Community Planning and its associated Single Outcome Agreements with local authorities. However, there will be other valuable partners and less formal opportunities available.

NHS

Boards should also recognise that they themselves are external stakeholders to other organisations (e.g. planning and regeneration bodies) and can further their own interests and advance their own action plans by engaging with these external stakeholders. This can make more effective use of shared resources and expertise, reducing duplication of effort.

Stakeholders include statutory and non-statutory bodies. Some exist explicitly to assist organisations improve their resource efficiency (including several identified in Table 2, such as WRAP and the Carbon Trust).

Statutory bodies, such as Planning Authorities and SEPA can be consulted on a range of issues beyond the obvious statutory concerns of spatial planning and pollution. Examples include renewable energy, waste, and transport planning.

Non-statutory bodies are too numerous to list exhaustively and will frequently reflect local conditions. They might include a range of charitable organisations, such as Scottish Environment Link and the Scottish Council of Conservation Volunteers; Local Biodiversity Action Plan (LBAP) partners; neighbourhood and community groups; local businesses and suppliers, such as farmers and recycling contractors.

Produce an action plan

Boards will develop their own action plans for sustainable development. Section 2 of this strategy sets out the key issues that stakeholders would expect to see covered in an action plan, organised into headings devised by the Sustainable Development Commission. The right hand column of Table 2 identifies a wide range of information that Boards can use to help develop and implement their action plans: this information includes government policies and guidance; publications from specialist non-government bodies; and programmes and funding related to resource and energy efficiency. In following up these strands of information. Boards will discover other relevant resources that will help to inform their action plans. Although finalising these should wait until the GCCAM project is complete, and its findings refine both the GCCAM tool for use by Boards, and amend where necessary the preliminary 6 priority issues, suggested activities and outcomes in Table 2, Boards can usefully be planning how and when they will develop their plan. This can be done on the back of ensuring the most appropriate governance arrangements are in place, and will enable Boards to move rapidly and more effectively immediately following this strategy being reviewed and refined in the next 12 months.

Although consistency of approach will be helpful across NHSScotland Bodies, the framework presented in this strategy is not intended to be prescriptive. Owing to the unique context in which each Board operates, Boards are currently free to formulate and act on their own set of issues, provided that their action plans meet the requirements of the Environmental Management Policy and further contribute to the Scottish Government's strategic objectives, and those set out in 'Better Health Better Care'.

page 40 of 52



NHS

The creation of an action plan will be part of a continuous cycle for the Boards. Setting up an action plan will include the following steps:

- outline the rationale for sustainable development in the organisation, its strategic importance, and how it is going to be advanced. A multidisciplinary approach should be taken, to assess the relevance of sustainable development to all significant healthcare activities and results, and to identify compliance issues, gaps, opportunities, benefits;
- set out the local sustainable development framework based, for example, on Table 2 – including identification of key local issues. The local Community Planning process and associated Single Outcome Agreements may be valuable sources of information in this. Develop strategies for addressing the framework issues;
- test the business case for sustainable development principles and opportunities, emphasising them in the context of Best Value;
- develop the interface between the action plan for sustainable development and the environmental management system (Corporate GREENCODE can help achieve this);
- set out the steps needed to make progress at both policy level and on operational issues, e.g. consultation, policy, allocation of responsibilities and resources, secure funding, training, staff consultative groups (the board-level sustainable development champion and EMR will play a pivotal role in helping achieve this). Set specific targets against these steps;
- identify indicators that can be used to assess progress against desired outcomes, and develop an appropriate monitoring methodology (for instance, indicator – CO₂ emissions arising from staff commuting; methodology – representative staff surveys of commuting habits);
- produce an annual progress report, and monitor, evaluate and revise the action plan accordingly.

Setting out the local sustainable development framework and prioritising the various elements within it are crucial early steps in producing an action plan. This is likely to involve the development of policy statements on a number of the key areas (examples might include a sustainable procurement policy covering the issues outlined in Table 2, or a sustainable construction policy requiring lifecycle costing of projects and committing to the use of BREEAM Healthcare). Such policy statements are important as they can provide a clear point of reference that managers can use to guide and justify their activities.

To help achieve this, the SDC's updated guidance on Sustainable Development Action Plans (SDAPs) for Government Departments and Executive Agencies³² will be very useful. Whilst not directly tailored for NHSScotland (the guidance, for instance, refers to UK rather than Scottish Government policy), the guidance sets out the general principles of SDAPs in a useful way. The GCCAM work in Scotland will be able to build on this and learn valuable lessons.

Longer-term implementation, monitoring, reporting and coordination

This is the first sustainable development strategy for NHSScotland. It comes at a challenging time when the Scottish Government's strategic objectives and National Performance Framework are bedding in. Simultaneously, the implications of Better Health Better Care, and revised HEAT targets will take effect. This strategy and the GCCAM tool itself will need to evolve in light of these important developments. Eventually, in turn, this strategy and the GCCAM tool may influence future HEAT targets.

At the strategic level that work will require collaboration between the Scottish Government, NHSScotland Bodies, including HFS, and the SDC in Scotland, as well as other possible partners. There is a need for a small number of NHSScotland Boards to be directly involved in the project to adapt and pilot the GCCAM tool, in order to ensure its relevance and practicality for Boards. The wider process of evolving and implementing sustainable development policy and practice within NHSScotland may involve others too, such as Audit Scotland, for integration of Best Value into Health Audits, which the SDC in Scotland has also been working on.

At Board level it is important that there is coordination by the EMR over monitoring and reporting via Corporate GREENCODE to contribute to the Annual National Environment Report. However, there is likely to be a need for a stand-alone sustainable development report covering performance and making further recommendations on the GCCAM priorities, or to ensure sustainability reporting through other existing mechanisms. Communication and consistency between Boards will be valuable, and would be greatly facilitated by a number of stakeholders including the Corporate GREENCODE User Group, as well as by sustainable development champions proposed at board level, and the Strategic Facilities Group (SFG), which currently has responsibility for driving initiatives and progress on sustainability within Boards. It is also anticipated that there will be a key coordination role for the high level performance group led by Sir John Elvidge.

NHS



Appendix 1: National Performance Framework -National Outcomes

- 1. We live in a Scotland that is the most attractive place for doing business in Europe.
- 2. We realise our full economic potential with more and better employment opportunities for our people.
- 3. We are better educated, more skilled and more successful, renowned for our research and innovation.
- 4. Our young people are successful learners, confident individuals, effective contributors and responsible citizens.
- 5. Our children have the best start in life and are ready to succeed.
- 6. We live longer, healthier lives.
- 7. We have tackled the significant inequalities in Scottish society.
- 8. We have improved the life chances for children, young people and families at risk.
- 9. We live our lives safe from crime, disorder and danger.
- 10. We live in well-designed, sustainable places where we are able to access the amenities and services we need.
- 11. We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others.
- 12. We value and enjoy our built and natural environment and protect it and enhance it for future generations.
- 13. We take pride in a strong, fair and inclusive national identity.
- 14. We reduce the local and global environmental impact of our consumption and production.
- 15. Our public services are high quality, continually improving, efficient and responsive to local people's needs.

Source: http://www.scotland.gov.uk/About/scotPerforms

The 15 national outcomes above are cross-referenced with the 6 SDC priorities for action in the 'issues' column of Table 2. This work will be further developed by the GCCAM project, and this strategy revised and refined accordingly in 2009-10.

Appendix 2: Scottish Indicators and Performance

The following 45 national indicators are being used to track progress towards the purpose and strategic objectives of the Scottish Government.

With the exception of the colour-coding, which is an HFS interpretation, the source of the following information and performance trends is the Scottish Government's 'Scotland Performs' website:

http://www.scotland.gov.uk/About/scotPerforms

The colour-coding in grey below shows HFS' interpretation that the delivery of health and social care services by NHSScotland Bodies and its partners has an influence, or that health itself is a relevant factor or influence, in the majority (approximately 28) of the 45 National Indicators. That influence or relevance also may extend to a few of the other indicators in a less obvious or direct way.

Key	,			
	Performance Improving		Performance Worsening	
¢	Performance Maintaining		Performance data currently being collected	
(T) In addition to showing the latest direction of travel, as data for 2007 and beyond become available, Scottish Government will show whether or not Scotland is on track to achieve the target.				

At least halve the gap in total research and development spending compared with EU average by 2011 (T)

Increase the business start-up rate

Grow exports at a faster average rate than GDP (T)

Improve public sector efficiency through the generation of 2% cash releasing efficiency savings per annum (T) Achieve annual milestones for reducing inpatient or day case waiting times culminating in the delivery of an 18 week referral to treatment time from December 2011 (T)

Reduce proportion of people aged 65 and over admitted as emergency inpatients 2 or more times in a single year

Reduce mortality from coronary heart disease among the under 75s in deprived areas

Increase the percentage of people aged 65 and over with high levels of care needs who are cared for at home

Improve people's perceptions of the quality of public services delivered

Reduce the number of Scottish public bodies by 25% by 2011 (T)

Reduce the proportion of driver journeys delayed due to traffic congestion

Increase the percentage of Scottish domiciled graduates from Scottish Higher Education Institutions in positive destinations

Improve knowledge transfer from research activity in universities

Increase the proportion of school leavers (from Scottish publicly funded schools) in positive and sustained destinations (FE, HE, employment or training)

Increase the proportion of schools receiving positive inspection reports

Reduce number of working age people with severe literacy and numeracy problems

Child protection inspection findings: increase the overall proportion of local authority areas receiving positive inspection reports

Decrease the proportion of individuals living in poverty

60% of school children in primary 1 will have no signs of dental disease by 2010 (T)

Improve the quality of healthcare experience

Increase the proportion of preschool centres receiving positive inspection reports All unintentionally homeless households will be entitled to settled accommodation by 2012 (T)

Reduce overall reconviction rates by 2 percentage points by 2011 (T)

Reduce overall crime victimisation rates by 2 percentage points by 2011 (T)

Increase the percentage of criminal cases dealt with within 26 weeks by 3 percentage points by 2011 (T)

Increase the rate of new house building

Increase the percentage of adults who rate their neighbourhood as a good place to live

Decrease the estimated number of problem drug users in Scotland by 2011 (T)

Increase positive public perception of the general crime rate in local area

Reduce overall ecological footprint

Increase to 95% the proportion of protected nature sites in favourable condition (T)

Improve the state of Scotland's Historic Buildings, monuments and environment

Biodiversity: increase the index of abundance of terrestrial breeding birds

Increase the proportion of journeys to work made by public or active transport

page 45 of 52

Version 1: April 2009

NHS



Increase the social economy turnover

Reduce the rate of increase in the proportion of children with their Body Mass Index outwith a healthy range by 2018 (T)

Increase the average score of adults Reduce to 1.32 million tonnes waste on the Warwick-Edinburgh Mental Wellbeing Scale by 2011 (T)

Increase healthy life expectancy at birth in the most deprived areas

Reduce the percentage of the adult population who smoke to 22% by 2010 (T)

Reduce alcohol related hospital admissions by 2011 (T)

Increase the proportion of adults making one or more visits to the outdoors per week

50% of electricity generated in Scotland to come from renewable sources by 2020 (interim target of 31% by 2011) (T)

sent to landfill by 2010 (T)

Ensure 70% key commercial fish stocks at full reproductive capacity and harvested sustainably by 2015

Improve people's perceptions, attitudes and awareness of Scotland's reputation

NHS



Appendix 3: Recommendations set out in Procuring the Future

'Procuring the Future - sustainable procurement national action plan' recommendations from the sustainable procurement task force. DEFRA 2006.

- the first recommendation is for government to *lead by example*. The lack of consistent leadership on sustainable procurement again emerged as a key barrier – as it has from numerous earlier reports;
- the second recommendation is for government to set clear priorities. Procurers complained of too much guidance, presented in an incoherent manner with no cross government ownership – a "one size fits all" approach;
- the third recommendation is to *raise the bar*. The Task Force believes that existing minimum standards for central government should be properly enforced and extended to the rest of the public sector and that further standards (both minimum and forward-looking) should be developed in the priority areas of spend it has identified;
- next the public sector must *build capacity* by developing its capabilities to deliver sustainable procurement. Procurers complained of lack of unambiguous information and training, confused messaging and lack of tools showing how to put sustainability into practice;
- the fifth recommendation is for government to *remove barriers* to sustainable procurement – whether actual or perceived – and put in place the right budgetary mechanisms;
- finally, the public sector needs to *capture opportunities* for innovation and social benefits and to manage risk better through smarter engagement with the market. Many suppliers felt that it was difficult to penetrate the public sector with innovative solutions and that there were missed opportunities for giving clear signals to the market.



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6. Acronyms and Abbreviations

ADS Architecture and Design Scotland

BREEAM Building Research Establishment Environmental Assessment Method

CEEF Central Energy Efficiency Fund

CEL Chief Executive Letter

CO2 Carbon dioxide

(Cont) Continued

DEFRA Department for Environment, Food and Rural Affairs

eMART Environmental Monitoring and Reporting Tool

EMR Environmental Management Representative

EMS Environmental Management System

EU European Union

FE/HE Further Education/Higher Education

GCCAM Good Corporate Citizenship Assessment Model

GDP Gross Domestic Product

Gha Global hectare

GP General Practitioner

HDL Health Department Letter

HEAT (target) Health Improvement, Efficiency, Access, Treatment

HFS Health Facilities Scotland

ISO International Organisation for Standardisation

KPI Key Performance Indicator

NEAT NHS Environmental Assessment Method

NEET Not in education, employment, or training

NHSS National Health Service Scotland

SCIM Scottish Capital Investment Manual SDAP Sustainable Development Action Plan SDC Sustainable Development Commission SEA Strategic Environmental Assessment SEDA Scottish Ecological Design Association SEPA Scottish Environment Protection Agency SFG Strategic Facilities Group SGHD Scottish Government Health Directorates SWMP Site Waste Management Plan WEEE Waste Electrical and Electronic Equipment WRAP Waste Resources Action Programme NHS