**West Yorkshire Health and Care Partnership Board**

**7 March 2023**

| Summary report | |
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| Item No: | 08 |
| Item: | **Partnership's Climate Change Strategy** |
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| Executive summary |
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| Working to address and mitigate against the impact of climate change is one of our big ambitions within our Integrated Care Strategy.  The purpose of this item is to present a working draft of the West Yorkshire Climate Strategy for comment and engagement. |
| The strategy is accompanied by a proposed 'menu of actions' which set out a range of specific actions that can be taken over different time horizons.  This responds to feedback we have received from partners and stakeholders requesting specific recommendations on what can practically be done to make a difference. This menu has been developed with climate leads across the system and aims to address this need. |

| Recommendations and next steps |
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| Members of the WY Partnership Board are asked to provide comments on the strategy and menu of actions.  Following discussion today we will continue to engage with partners across the system with a view to finalising the document later in Spring 2023. |

# West Yorkshire Health Care Partnership Climate Change Strategy 2022-2038

*Beyond 2040 and depending on the level of global warming, climate change will lead to numerous risks to natural and human systems (high confidence). The magnitude and rate of climate change and associated risks depend strongly on near-term mitigation and adaptation actions, and projected adverse impacts and related losses and damages escalate with every increment of global warming (very high confidence)[1].*

## Introduction

Climate change has rightly become an increasingly important feature in our everyday lives. We are all affected by it and, health and social care contribute significantly towards causing it. Climate affects all the determinants of health and wellbeing in our communities. Dealing with climate change requires everyone working and volunteering in health and social care in West Yorkshire to act – to reduce our environmental impact, but also to prepare for the changes that are already taking place and that will intensify in future.

Focusing on climate change is challenging in a system which is already overstretched and under significant pressure. However, failure to address our societal and environmental responsibilities will lead to increasingly frequent and severe emergencies.

Facing the impending effects of climate change can be frightening but everyone in the health and care sector can contribute, and collaborate, to achieve a future in which there is less inequality, more biodiversity, less pollution, and more human thriving than there is at present.

This strategy sets out system ambitions on climate and sustainability, establishes the Doughnut Economic Model of managing trade-offs, and highlights that we need a risk management approach, all in alignment with the West Yorkshire Integrated Care Partnership's (ICP) five-year strategy.

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[1] Climate Change 2022: Impacts, Adaptation and Vulnerability. https://www.ipcc.ch/report/ar6/wg2/

# Background

*Human and ecosystem vulnerability are interdependent (high confidence). Current unsustainable development patterns are increasing exposure of ecosystems and people to climate hazards (high confidence)[1].*

Climate change is fundamentally a human health issue because the drivers of climate change are also the drivers of ill health and health inequalities[2]. We cannot be healthy if our biosphere is poisoned.

In providing health and social care, we are contributing to the degradation of the environment on which we all depend by[3]:

- Burning fossil fuels for heat and transport
- Using single-use plastic
- Eating unsustainable food
- Taking too long to adopt digital technologies
- Underestimating our influence on the supply chain
- Undervaluing water supplies
- Being profligate with our medicines
- Accepting unwarranted variations in care
- Underrating the health benefits of our green and blue spaces

Our contribution to the bigger picture is not inconsequential. Health services contribute about four percent of UK carbon emissions[4].

The UK has a legal obligation under the 2008 Climate Change Act to be net carbon zero by 2050[5]. The NHS Net Zero Paper, published on 1st October 2021, establishes a goal to be net zero carbon by 2040[6], and West Yorkshire Combined Authority has pledged to be net carbon neutral by 2038 (with significant progress towards this by 2030)[7]. As a Partnership, we want and need to do more. Net carbon zero alone is not sufficient for us to be truly sustainable; we must ensure that we do not denude <u>any</u> of our planet's resources over time and that all communities can co-exist for the long run.

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[2] https://www.england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2022/07/B1728-delivering-a-net-zero-nhs-july-2022.pdf

[3] https://view.genial.ly/63186829fa7f08001829bfbb/interactive-image-sustainable-healthcare

[4] https://www.england.nhs.uk/greenernhs/wp-content/uploads/sites/51/2022/07/B1728-delivering-a-net-zero-nhs-july-2022.pdf

[5] Participation, E. Climate Change Act 2008.

[6] Greener, N. H. S. Delivering a 'Net Zero' National Health Service. https://www.england.nhs.uk/greenernhs/publication/delivering-a-net-zero-national-health-service/.

[7] Net Zero-Carbon Leeds City Region. (2019).

Net zero is an important element of doing no harm, but then we must move to regenerative approaches.



*Figure 1 - The transition from maximising profits to sustainability*

As well as reducing our environmental impact, a further focus will be on adaptation to living in a changing environment. Specifically, this is how to manage less frequent but more heavy rainfall (leading to flooding, drought, and wildfires), food and energy insecurity, supply chain disruption, and an influx of climate migrants to higher ground. This is already causing an increased demand for health and care services, and a reduced ability of anchor organisations to provide these services[8].

## Our Ambition

*Many initiatives prioritise immediate and near-term climate risk reduction which reduces the opportunity for transformational adaptation (high confidence)[1].*

Here in West Yorkshire, we have an ambitious ICP strategy which is helping us to reduce inequalities in our communities as well as weaving climate action into all we do. Our Partnership has an agreed vision for the future of health, care, and wellbeing in West Yorkshire, where all partners are working together so people can thrive in a healthy, equitable, safe, trauma informed, and sustainable society.

More specifically, Strategic Big Ambition number nine is," We aspire to be a leader in the delivery of environmentally sustainable health and social care through increased investment, mitigation and culture change throughout our system"

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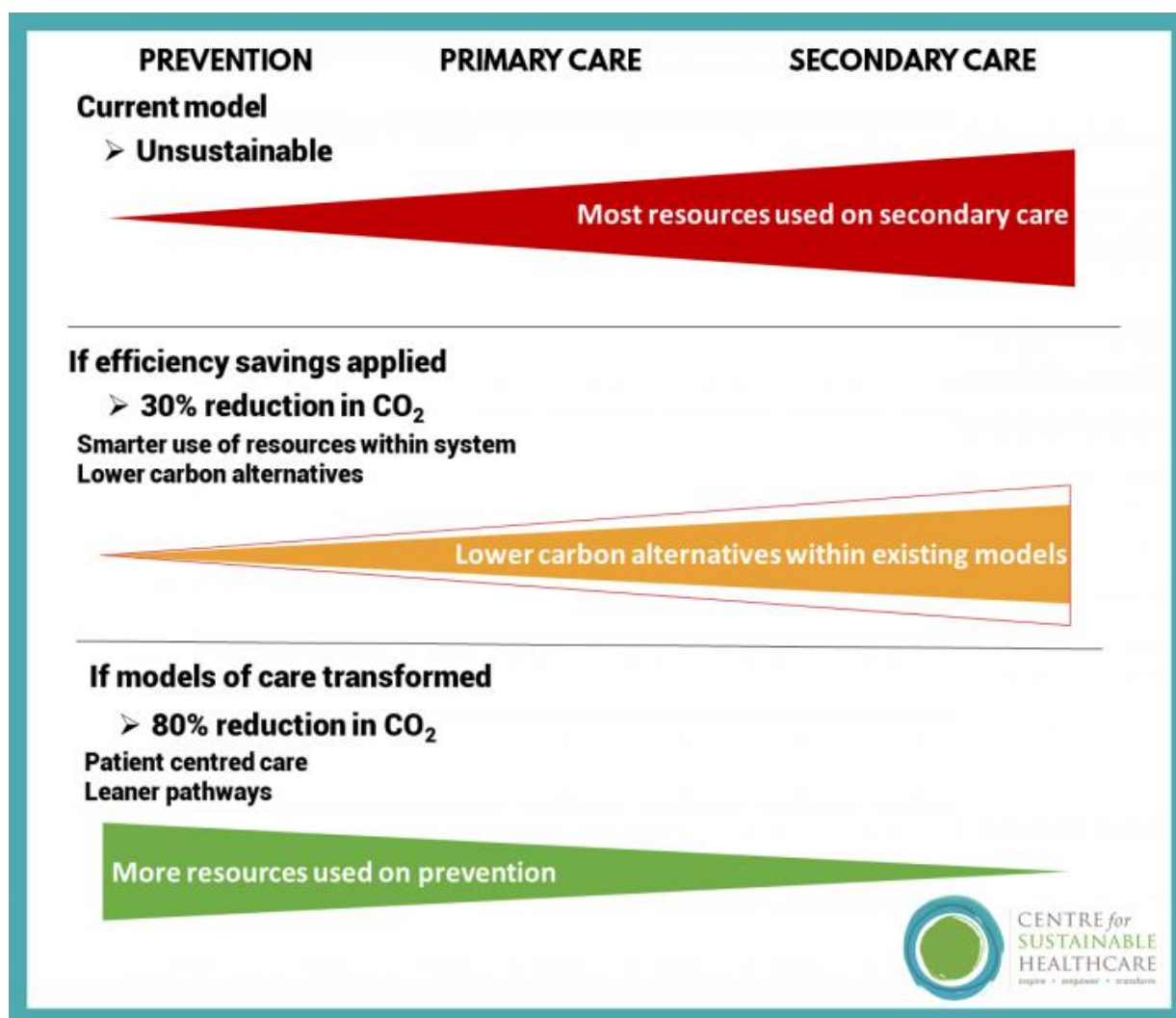[8] https://onlinelibrary.wiley.com/doi/full/10.1002/wmh3.421

*Figure 2 - Incremental change is insufficient. We must implement radical change*

In a future where we fail to act, we will fail to achieve our ambitions and vision. Instead, we will see more morbidity, mortality, and inequality, and the system will struggle to cope, eventually failing under impossible demand. We can expect:

- More people suffering with cardiac disease
- More people developing and dying of respiratory conditions
- More people in food poverty and facing foodborne illness
- Travel and transport difficulties for patients, residents, and staff
- Increased malaria and other vector-borne diseases
- Disrupted supply chains with essential supplies increasingly unavailable
- New and emerging communicable diseases
- Significantly increased inward migration to the region from other parts of the UK facing extreme weather and flooding
- Community collapse leading to poorer population mental health, trauma, violent crime and possibly increased suicide rates

But that future is not pre-determined. In a future where we get this right, we can see better outcomes through better models of care, including:

- More people helped to stay in better health and remain independent
- Care closer to home
- Digital appointments as standard
- Comfortable, efficient, and well-insulated homes safe from extreme temperatures
- Health and care staff who travel actively on flood-resilient green and blue routes, with local public sector anchor organisations leading the way in their adoption of active travel
- Cleaner air leading to fewer respiratory, cardiac, and neurodegenerative conditions
- Good-quality housing, and employment in a sustainable, fair local economy
- A regenerative, local food system that ensures all people can afford a good diet
- Places and system designed to minimise, and prepare for, new infectious diseases

This will not be achieved by the work of individuals in isolation. We must act in collaboration so that the sum of our improvements is much more than each one of us, or each organisation could do on our own.

## How will the change be made?

*Enabling conditions are key for implementing, accelerating and sustaining adaptation in human systems and ecosystems. These include political commitment and follow-through, institutional frameworks, policies and instruments with clear goals and priorities, enhanced knowledge on impacts and solutions, mobilization of and access to adequate financial resources, monitoring and evaluation, and inclusive governance processes. (high confidence)[1].*

In 1987 the Brundtland Commission defined Sustainable Development as, "Development that meets the needs of the present without compromising the ability of future generations to meet their own needs"[9]. To make this high-level definition operational, there are many more functional definitions. The United Nations' 17 Sustainable Development Goals (SGDs)[10] are one paradigm.

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[9] Brundtland. our-common-future. (1987)
[10] Sustainable Development Goals .:. Sustainable Development Knowledge Platform. https://sustainabledevelopment.un.org/?menu=1300.

Many systems and partnerships – including Climate Action Leeds – have used Kate Raworth's Doughnut Economics[11] approach, providing our system with a regional exemplar for adopting this approach across the ICP[12]. The Doughnut approach is a way to think about how a place can meet its local aspirations while also living up to its global responsibilities. It encourages a consideration of the UN SDGs that puts human development in balance with sustainable and responsible planetary limits. Each of the factors in the doughnut must be considered when making every decision, in order that trade-offs are made visible and explicit, risks can be quantified and managed, and progress can me demonstrated towards sustainability.

Adopting this approach enables the ICP to ensure that we were creating a West Yorkshire that is safe and just, exceeding a 'social floor' of what communities need for a good life while staying within the ecological 'ceiling' of local and planetary environmental limits.

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[11] Doughnut. *Kate Raworth | Exploring Doughnut Economics*
https://www.kateraworth.com/doughnut/ (2013).
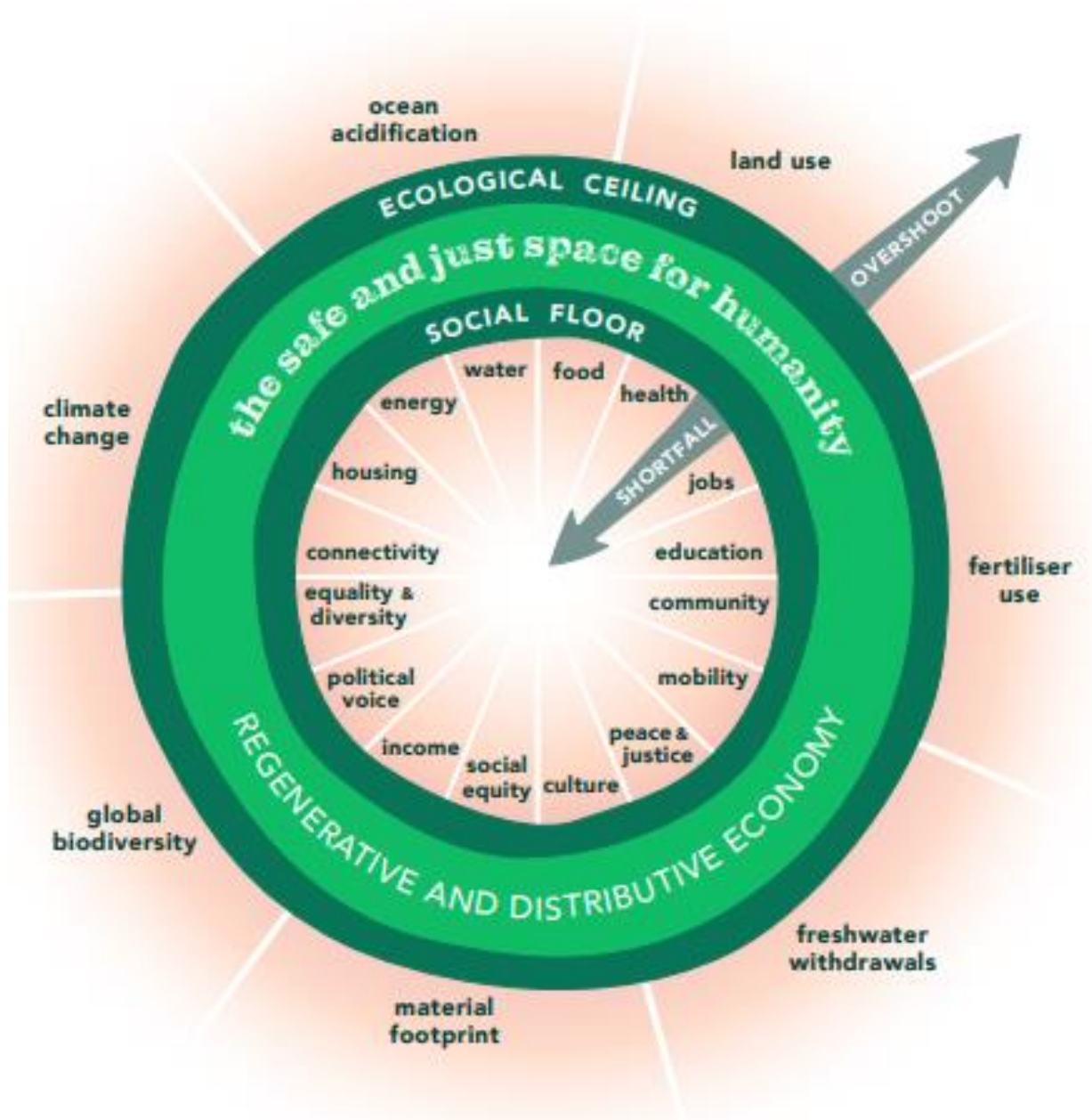[12] https://www.climateactionleeds.org.uk/leedsdoughnut

*Figure 3 - The Doughnut Economics model*

While humanity is currently far from achieving balance in line with this model, on close inspection, we can see that adopting the doughnut model is not such a big change from our current approach in West Yorkshire as it may appear at first. The social floor is the things that we are already working on hard across the whole system. The ecological ceiling is things which we are currently working on but in an unstructured way. By adopting this model, we can ensure that all dimensions of sustainability are incorporated into our existing risk management processes. Although lots of the thinking might be familiar to us, by tying them together and assessing trade-offs between the dimensions, the actions and outcomes will be very different, and much healthier, for the whole system.

Climate risks are experienced across our system, so these risks are identified and registered at a system level in the corporate risk register. Governance of climate change activities sits, where the work happens, with individual organisations.

Building the current work and harmonizing it across the system will help drive the necessary change. For example, in line with the ICP strategy, digital transformation is helping us streamline processes, find patterns that are not obvious, reduce unnecessary variation and share information much more efficiently but it is not a silver bullet, we need to do things differently as well. Climate change is not an "either-or" consideration, where working on one thing means that something else misses out. Instead, we take an "also-and" approach, where climate action is built into all our other decisions and actions across West Yorkshire.

While some actions – like digital transformation and waste reduction – will save money, meeting all our ambitions will need investment, and accessing capital is challenging. We recognise the financial pressures across the health and social care system, among partners and our people. Even so, the cost of inaction is greater than the cost of investing to mitigate and adapt effectively around the climate and biodiversity crises as they unfold. Proactively addressing the climate emergency as an ICP will reduce community need and vulnerability – and thus system workload – in the long term. West Yorkshire's health and care system employs around 100,000 people and controls a budget in excess of £5bn per year. We have people who think big, care deeply, and work hard. As a system, we can choose to commit our considerable pooled resource to changing the way we currently work in order to address the climate emergency and deliver better outcomes for the public[13].

## Who's going to make the change?

*Integrated, multi-sectoral solutions that address social inequities, differentiate responses based on climate risk and cut across systems, increase the feasibility and effectiveness of adaptation in multiple sectors (high confidence)[1].*

Most work and change will happen within organisations. The ICP has a vital role in coordinating and amplifying such organisational action to compound impact across West Yorkshire. It will also continue to lead on revision of this strategy at least every two years to reflect the fast pace of change in climate and sustainability.

Big organisations such as NHS Trusts have big footprints because of their estates and fleets and because of the nature of their work. Rightly, they are the first focus of the

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[13] Haines A, McMichael AJ, Smith KR, Roberts I, Woodcock J, Markandya A, et al. Public health benefits of strategies to reduce greenhouse-gas emissions: overview and implications for policy makers. Lancet 2009; 374: 2104–2114

national Greener NHS team and there are some statutory climate obligations for them to deliver. These are laid out in the ICP and Trust Green Plans. Local authorities are also doing a lot of good work, some to meet their statutory responsibilities and some are going beyond, of their own initiative. This work is not sufficiently joined up across the different parts of our system so we will create and enhance these relationships, because interconnected challenges need interconnected solutions.

By being agile, smaller organisations have an important role to play. They can make changes quickly and then advise their bigger partners on successes. By distributing risk, expertise and funding, smaller organisations can contribute, benefit, and thrive, even if some initiatives fail.

As in the rest of the West Yorkshire system, Places have an important role to play in creating our sustainable future. They are ideal mechanisms to build networks and relationships across professional boundaries, to plan and deliver projects within a geographical boundary, and to establish new social norms which prioritise impact reduction and adaptation.

# System or place?

| | | |
|---|---|---|
| DO ONCE | WORK THAT WE AGREED WOULD MAKE THE MOST SENSE TO BE DELIVERED ACROSS WEST YORKSHIRE | IN THIS STRATEGY |
| COORDINATE ONCE | WORK THAT WE AGREED THAT WOULD MAKE SENSE TO COORDINATE/ SHARE/ GATHER/ COLLABORATE ON ACROSS WEST YORKSHIRE | IN THIS STRATEGY |
| DO FIVE TIMES | WORK IN RESPONSE TO LOCAL INTELLIGENCE AND AUDIT | IN LOCAL STRATEGY OR PLAN |
| ONLY IN CERTAIN PLACES | WORK THAT IS BASED IN COMMUNITIES AND NEIGHBOURHOODS | IN LOCAL STRATEGY OR PLAN |

*Figure 4 - From the ICP Strategy explaining the primacy of place*

Whilst the climate team work closely with the Trusts in the region to align priorities, we have more to do in building and maintaining other relationships which we understand are crucial going forwards. We will work much more closely with the voluntary, community and social enterprise (VCSE) sector, primary care (including primary care networks), private healthcare providers, educational institutions, local authorities

including social care and wider services and the West Yorkshire Combined Authority (WYCA).

## How will we know that the change is being made?

*Societal choices and actions implemented in the next decade determine the extent to which medium- and long-term pathways will deliver higher or lower climate resilient development (high confidence). Importantly climate resilient development prospects are increasingly limited if current greenhouse gas emissions do not rapidly decline, especially if 1.5°C global warming is exceeded in the near term (high confidence). These prospects are constrained by past development, emissions and climate change, and enabled by inclusive governance, adequate and appropriate human and technological resources, information, capacities and finance (high confidence)[1].*

By focussing on levers of change such as relationships, patterns, and culture, we will identify the preconditions for change and impacts, even where those impacts themselves may be intangible and difficult to isolate or quantify. Things which move us towards sustainability are:

- Reducing inequalities in society by any metric[14]
- Behaviours which promote wellness[15] and reduce the need for health and social care
- Incorporating sustainability thinking into board papers and decision-making tools
- Transitioning to net carbon zero
- Increased active travel[16]
- Plant based, seasonal diets and a thriving local food system[17]
- Increased biodiversity and wild space
- Reducing unwarranted variation[18] and unwanted intervention[19]
- Increased availability and take up of training about sustainability

Because of the multidimensional complexity and long-term nature of sustainability, success is usually measured by process measures rather than outcomes. We will facilitate this by incorporating a sustainability element into all Impact Assessment

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[14] The Spirit Level. https://equalitytrust.org.uk/resources/the-spirit-level.

[15] New Economics Foundation. Five Ways to Wellbeing New applications, new ways of thinking. (2011).

[16] Woodcock, J., Givoni, M. & Morgan, A. S. Health impact modelling of active travel visions for England and Wales using an Integrated Transport and Health Impact Modelling Tool (ITHIM). *PLoS One* 8, e51462 (2013).

[17] Tim Lang, B. & Lang, T. Re-fashioning food systems with sustainable diet guidelines: towards a SDG 2 strategy. (2017).

[18] NHS Improvement - Model Hospital. https://model.nhs.uk/.

[19] Dying well at home - Choosing to die at home. *Social Care Institute for Excellence (SCIE)*

tools. It is then possible, by using the Doughnut Economics Model, to quantify and visualise the costs, benefits and trade-offs of decisions in terms of societal inequalities, environmental impact, service provision and financial cost.

## Progress so far

*Across sectors and regions the most vulnerable people and systems are observed to be disproportionately affected. The rise in weather and climate extremes has led to some irreversible impacts as natural and human systems are pushed beyond their ability to adapt. (high confidence)[1].*

Key successes from the ICP climate team across the whole system have been:

- Establishing a diverse steering group to help us ensure the work is effective
- Establishing sustainability networks in
  - Pharmacy
  - Procurement
  - Respiratory care
  - Primary care
  - Anaesthetics
  - Board level Net Zero Leads
  - Operational Leads
- Providing a training offer for 200 spaces for West Yorkshire staff and volunteers on courses run by the Centre for Sustainable Healthcare
- Incorporating sustainability in the syllabus of the national NHS Graduate Management Training Scheme
- Green social prescribing grants and evaluation work
- Active travel grant scheme
- Reduction of desflurane use in every hospital in the region to almost zero
- £1m Winter Warmth programme delivered by WY Health and Care Partnership to help people live in warmer, dryer homes thus reducing the likelihood that people will need healthcare
- All acute providers in the region have produced a Green Plan and many organisations have sustainability plans and adaptation plans too

## Conclusion

*Global warming, reaching 1.5°C in the near-term, would cause unavoidable increases in multiple climate hazards and present multiple risks to ecosystems and humans (very high confidence). Near-term actions that limit global warming to close to 1.5°C would substantially reduce projected losses and damages related to climate change in human systems and ecosystems, compared to higher warming levels, but cannot eliminate them all (very high confidence)[1].*

Climate change is here and now and it's not going away. It is the biggest challenge to our communities and therefore our work as an ICP. It causes poorer health and drives greater inequality in our communities, placing increasing strain on the health and care system. We therefore need a risk management approach to limit our exposure. What is more, in delivering care we are contributing to climate change, so it is beholden upon us to both mitigate and adapt for climate change.

Great work is being done but there is much more to do to achieve net carbon zero by 2038 and adapt our system to increase resilience and minimise vulnerability to climate harms. The Doughnut Economic Model is a way to ensure that we assess the trade-offs of our decisions. Our staff come largely from the communities we serve, and those communities are increasingly concerned about climate impacts. They expect leadership and action. It is everyone's responsibility to act on climate change.

# West Yorkshire Health Care Partnership Climate Change Menu of Actions 2022-2038

## Contents

## Introduction

This menu of actions is designed to be used in conjunction with the West Yorkshire Integrated Care Partnership climate change strategy. It highlights some of the actions that individuals and organisations could take in order to reduce the environmental impact of health and social care, and to prepare the system to deal with the extreme weather events which are going to become more frequent and more severe in the future. It is not intended as an exhaustive list or a mandate, more a starting point because each person and each organisation in the system is starting from a different point and has different priorities and opportunities. It is intended as an illustration of how much work needs to be done and how urgent the situation is. The strategy, the menu of actions, and plans that derive from it, should be reviewed regularly, with planned revision every two years to reflect system achievements and dynamic challenges in sustainability and the climate emergency.

## What can I do?

A starting place for all staff/volunteers to see how they can be involved and how sustainability is the responsibility of all.

As a citizen:
- Eat a diet that is plant based and seasonal
- Ensure that your energy supplier is providing 100% renewable electricity
- Switch it an ethical bank that has divested from fossil fuels
- Avoid flying; take a maximum of one return flight every 5 years
- Take moderate, outdoor exercise for 30 minutes 3 times a week

- Reduce plastic use aiming for zero by 2030
- Walk or cycle journeys less than 2 miles
- Use public transport in preference to a car
- Lobby politicians to do more to reduce the impacts of climate change
- Talk about sustainability to your family and friends

. . .and as a patient/service user:
- Ask your caregiver if different treatments have different environmental impacts
- Make a will, advance directive, and powers of attorney in order to reduce unrequired intervention

. . .and as non-clinical staff:
- Ensure that windows/heating/water are used appropriately
- Use resources such as stationery as sparingly and as efficiently as possible
- Embrace the transition to digital

. . .and as middle management:
- Introduce sustainability in all PDR/annual review/appraisals
- Assess the environmental impact of procurement decisions
- When designing pathways, minimise travel/repeat appointments

. . .and as clinical staff/carers:
- Inform your patients about the environmental impact of their treatment
- Ensure good waste segregation
- Lobby your organisation to do more to reduce its environmental impact
- Prioritise oral over intravenous medication

. . .and as a senior leader:
- Consider sustainability in every board meeting agenda item
- Ensure that your organisation is no longer buying virgin paper
- Ensure that your organisation only buys electricity from renewable sources
- Ensure your organisation has an adaptation plan so that it can function during the disruption ahead
- Ensure funds/pensions are invested sustainably
- Phase out payment for air travel/short car journeys in your organisation
- Establish quarterly updates on progress towards net zero
- Fund sustainability teams to help ensure that everyone is playing their part
- Talk about sustainability frequently in order to normalise the conversation
- Lobby other leaders and politicians to ensure that climate change is in the forefront of their minds
- Put yourself forward as a Board Level Net Zero Lead

# What could my organisation do?

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Dimension: **Leadership** | | | | |
| Governance and leadership to deliver the Climate Change Strategy are developed and functioning<br><br>The ICP has an agreed climate and sustainability action plan, evaluation and monitoring plan, and funding approach<br><br>Sustainability is embedded in every board paper, strategy, and decision.<br><br>We start decommissioning on grounds of impact to the environment<br><br>We implement the ICP 'doughnut' as a decision-making tool<br><br>Sustainability is incorporated into every impact assessment tool | Each organisation understands its own contribution (through e.g., carbon foot printing) and has a plan to reduce it by 50% by 2030 and zero by 2038.<br><br>First annual interim evaluation report informs refinement of timeline and future action<br><br>First biennial climate and sustainability strategy refresh<br><br>More decisions are made with our communities<br><br>We identify and implement ways of influencing upward and outward on climate and sustainability<br><br>We develop models of inclusive, shared leadership among and within Places | Sustainability (social, environmental, and financial) is the prime discriminator when commissioning<br><br>Carbon emissions are reduced by 50% across the partnership (per benchmarked figures)<br><br>We regularly influence regional and national policy to support our ambitions<br><br>We foster transformational leadership, including making difficult decisions about the last unsustainable practices.<br><br>People most affected by climate change have key leadership roles on this agenda<br><br>We act as leading national influencers on climate and sustainability policy | Decisions are made collaboratively with stakeholders including our populations by default | Life-of-strategy summative evaluation report informs next round of strategy and action planning<br><br>We act as credible international influencers on climate and sustainability policy |

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Dimension: **Networks and Connections** | | | | |
| We establish networks e.g., communities of practice to support key areas of this work | We have active networks to support learning and action in all areas of this work across the ICP<br><br>We establish a citizen's jury to guide climate and sustainability work<br><br>We hold an annual ICP summit on climate and sustainability progress | Our ICP climate and sustainability networks enable and collaborate with community networks by default | We support resilient and dense local networks to withstand climate displacement | |
| Dimension: **Water, Food / Local Procurement** | | | | |
| Organisations introduce plant-based diet at least one day a week<br><br>Organisations benchmark food and water waste and develop zero food and water waste plans | Food and catering, etc. are 80% plant-based and animal-free<br><br>Obesogenic advertising is no longer tolerated in West Yorkshire<br><br>Food waste is reduced 50% from baseline<br><br>Water waste is reduced 50% from baseline<br><br>New buildings have grey water capture/recycling | Food we buy and serve is in line with the EAT-Lancet's Planetary Health Diet[1].<br><br>We achieve food waste zero.<br><br>All food and 80% of equipment are sourced from within the UK<br><br>We achieve water waste zero<br><br>All buildings (retro)fitted with grey water capture/recycling | We have an evidence-based tool to ensure food is sourced to get the best balance of low harm and as local as possible<br><br>Food poverty is eliminated in West Yorkshire | All our people can access sustainable, healthy, affordable diets and clean water<br><br>Our settings have a week's worth of water-independence capability |

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[1] https://eatforum.org/content/uploads/2019/01/EAT-Lancet_Commission_Summary_Report.pdf

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| **Dimension: Air quality** | | | | |
| We implement a robust plan to reduce our known air pollution emissions | We understand exactly how/where we emit **all** of our air pollution<br><br>We have robust air quality improvement plans in line with WHO air quality guidelines for indoor and outdoor air | Air quality public health indicators in our Places improve 50% against 2022 baseline<br><br>Our settings and Places meet indoor and outdoor WHO air quality targets | We beat WHO air quality targets | |
| **Dimension: Natural capital / biodiversity** | | | | |
| Natural capital investment is understood to be a core intervention for public good | We scale up funding greenspace projects in areas of high social deprivation | Funding for natural capital/greenspace/ biodiversity projects account for 1% of ICP spend<br><br>Green and blue spaces are linked into active travel routes | Biodiversity and greenspace are increasing across all our sites from a 2022 baseline | Biodiversity and green and blue spaces reach levels that evidence shows are necessary to protect human health |
| **Dimension: Travel / Transport / NHS supply chain / logistics** | | | | |
| WYCA and Local Authorities continue to invest further in active travel infrastructure and community engagement initiatives to support active travel behaviour change<br><br>Organisations move away from internal combustion engines in their fleets | Parking permits are not issued to people who live less than 3 miles from their place of work except in cases of disability/accessibility<br><br>No new internal combustion engines in fleets | Parking permits cost 10% of your salary except in cases of disability/accessibility<br><br>First and last mile logistics are almost completely achieved by e-cargo bikes<br><br>Car journeys reduce to 30% of their 2022 baseline | Road traffic has reduced by 60% from a 2022 baseline. Car ownership is rare<br><br>100% of our travel and transport is electric and/or pedal powered – no more legacy internal combustion engines | 100% of our supply chain/logistics are electric and/or pedal powered |

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| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Fleets begin to incorporate pedal power, including e-cargo bikes | Subsidised public transport for all, with expanded coverage across our Places<br><br>New pathways and models reduce need for travel/transport<br><br>Suppliers must provide evidence of sustainable practices | Suppliers are willing and active partners in ensuring environmental impact is minimised | | |
| **Dimension: Waste / single use plastic / reusable equipment / infection prevention** | | | | |
| Waste streams are standardised across the ICP<br><br>Zero waste is sent to landfill<br><br>Research translation on reusable equipment begins/accelerates | Heat/energy from waste is introduced with exhaust scrubbing<br><br>Waste reduces in volume due to reduced variation, 3D printing on site, and increased use of reusable equipment where possible | Biodegradable single use items become mainstream with biodigesters on site to create compost and heat<br><br>Proportion of reusable versus disposable equipment increases 40% from 2022 | Zero single use plastic items are purchased by health and social care<br><br>Proportion of reusable versus disposable/ recyclable equipment increases 60% from 2022 baseline | All 'waste' is re-used in some way, most as raw material for new manufacture of products. Circularity is the norm |
| **Dimension: Dentistry / medicines** | | | | |
| Desflurane free by 2023<br><br>Focus on deprescribing opioids and reducing | Nitrous oxide is no longer used without cracking technology<br><br>Intravenous medicines | Patients/service users refuse to accept polluting chemicals in their care and treatment | Pharmaceutical companies publish extensive information about the environmental impact | Medicines are grown in labs using plants and fungi rather than industrial chemistry |

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| polypharmacy is enhanced by systematic incentives | are replaced by oral alternatives<br><br>Deprescribing is widespread and normalised | Metered dose inhaler use is less than 10% | of their products through their whole lifecycle, enabling us true transparency in all our supply chains | |
| **Dimension: Adaptation / risk / resilience** | | | | |
| Organisations have risk and resilience plans in place to help them to deal with climate disruption through reduced vulnerability and increased resilience | Large health and social care organisations are the first port of call as community anchors during extreme weather events (which are now happening at least once a year)<br><br>Inequalities in Places reduce, reducing vulnerability | Organisations can function in a self-sufficient manor for several days during the worst climate events<br><br>Health and wellbeing of Places are increasingly resilient through improved population health/prevention | Public buildings are used as "cool refuges" during summer and regularly house flood victims<br><br>Productivity lost through extreme events is minimised | Risk and resilience are much more dynamic than 2022 baseline<br><br>Change and uncertainty are the norm but can be weathered more comfortably |
| **Dimension: Heat decarbonisation / energy management / construction** | | | | |
| No further purchasing of fossil fuel technologies (including vehicles or heating) | Retrofitting of insulation and heat pumps to all buildings | No further purchasing of fossil fuels<br><br>Traditional cement and other carbon-intensive materials no longer used in construction | Plan for atmospheric carbon removal agreed | Carbon removal to be deployed |

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Dimension: **Urban design/housing/public spaces/planning** | | | | |
| Planning laws change to ensure net biodiversity gain from all projects<br><br>Healthy Places is a core work strand of the ICB | All building is now net carbon zero throughout its full lifecycle | Retrofit of housing stock to ensure thermal stability in both warm and cold is now complete | Retrofit of public spaces to prioritise active travel and 20-minute communities is now complete<br><br>Buildings and spaces are climate positive (e.g., sequester carbon, eliminate water waste) | Everyone in West Yorkshire has a healthy, sustainable, safe home |
| Dimension: **Social care /VCSE** | | | | |
| Social care and the VCSE are welcomed as true partners with healthcare | Integration is now seamless with healthcare providing expertise/funding to allow retrofit and transition to zero carbon travel and a sustainable and continued shift of investments into prevention and decision making within communities with the VCSE sector at its heart | Demand for social care falls as communities become closer knit and resilient<br><br>Sustainable, resilient, innovative, and vibrant VCSE sector with longer term funding arrangements providing a holistic offer to our diverse communities going beyond green social prescribing to a community powered NHS approach | Public expectation of chronic care and end of life is dramatically different as resources are constrained but communities are more supportive<br><br>Volunteering becomes the norm, helping Places increase climate resilience | |

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| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Dimension: **Mental health/green social prescribing/ communities** | | | | |
| Focus on building strong communities that are resilient and local<br><br>Work with the VCSE sector in rolling out green social prescribing practices which are known to have huge return on investment | People are choosing to live and work in regions that have strong 20-minute communities<br><br>Green social prescribing is the default therapy for increasing numbers of conditions<br><br>We implement a trauma-informed model to address climate anxiety and grief<br><br>Climate anxiety/grief, other mental health care, and Green Social Prescribing are linked to activate positive community climate action | 20-minute communities are the norm, incorporating green and blue spaces<br><br>Green/blue space access and quality are equitable regardless of e.g., deprivation | | Demand for mental healthcare starts to fall because people are leading lives which are more fulfilling |
| Dimension: **Our teams** | | | | |
| All organisations have a sustainability training package for staff and volunteers, and all complete mandated sustainability training e.g., Building a Net Zero NHS | Role descriptions empower staff to make climate and sustainability their business in ways relevant to their work | All role descriptions incorporate an element of climate and sustainability competency<br><br>We influence professional bodies to develop their training to incorporate climate | | |

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| More staff and volunteers are encouraged to become climate and sustainability champions | | and sustainability competencies | | |
| Dimension: **Publications / communication** | | | | |
| We engage all stakeholders including our communities on this Strategy and Menu of Actions | Environmental impact is communicated internally and externally at regular intervals (quarterly)<br><br>Sustainability metrics are standardised across West Yorkshire and nationally to allow direct comparison | Standardised, comparable annual reports are published in the public domain | Sustainability training and consideration are given the same weight as finance is in 2022 | |
| Dimension: **Technology/ digitisation/ data management** | | | | |
| Electronic patient notes become the norm<br><br>Digital design prioritises sustainability and adaptability | 3D printing of equipment is the norm<br><br>All Places close their digital divides to enable equitable digital-by-default | Data centres and hardware are now demonstrably net carbon zero | Data allows us to see the remaining areas of environmental impact and prioritise changes | |

| 2022-2024 | 2025-2027 | 2028-2030 | 2031-2035 | 2036-2038 |
|---|---|---|---|---|
| Dimension: **Finance/ professional services** | | | | |
| Environmental sustainability is considered in every capital decision<br><br>Organisations develop sustainable procurement/spending policies and procedures<br><br>We accelerate divestment from climate harm (e.g., banks, suppliers) | Sustainability is the prime consideration when deciding how to allocate resource<br><br>80% of contracts and investments comply with sustainable procurement strategy and policy | West Yorkshire is an established hub for green med-tech and local and national financial disparities are diminishing<br><br>100% of expenditure and investment comply with sustainable procurement strategy and policy | All our financial activity is climate positive | We influence for a just transition so every job in West Yorkshire is a good, green job<br><br>West Yorkshire has a wellbeing economy |

## Incorporating sustainability in impact assessment tools

Different organisations have different impact assessment tools and different priorities when it comes to mitigating impact. It is therefore not possible for the climate team to mandate a single impact assessment tool. On the website are a couple of sustainability impact assessments to demonstrate different approaches (Climate change :: West Yorkshire Health & Care Partnership). These should not be stand-alone documents but embedded in the rest of the decision-making process.

## Published plans

Climate Change Plans that are already published are available from organisations or on the climate team's website (Climate change :: West Yorkshire Health & Care Partnership). As examples, summaries of the pharmacy and medicines optimisation plan, primary care plan and ICP green plan are also included on the website with their action points mapped to the Menu of Actions. Again, this is not intended to be definitive but to give a flavour of the work and ambition which is already happening in West Yorkshire.

## Conclusion

In such a large, complex system as health and social care in West Yorkshire, it is not possible to capture all the nuance of what needs to be done to move us towards sustainability. This action menu is therefore not an exhaustive list but, if we do everything here, we'll be much closer to where we need to be than we are at the time of writing. With regular updates and planned strategy revision every two years, we can refine and enhance our ambitions and achievements in sustainability over the life of the strategy.