Derbyshire Support and Facilities Services Limited Directors' Report for the Year Ended 31 March 2021

The directors present their report and the audited financial statements for the year ended 31 March 2021.

Directors of the company

The directors who held office during the year were as follows:

S A Ellis

I F Hazel

D G Kentrop

C Tann

Principal activity

The company commenced trading on 1 April 2019. The principal activity of the company is to provide support services and facilities management services under an Operated Healthcare Facilities Management contact to its parent undertaking Chesterfield Royal Hospital NHS Foundation Trust. The services include management of the hospital's estate and facilities, provision of patient portering services, provision of domestic / catering services, capital projects, clinical engineering services for medical equipment, IT and digital services for the hospital's IT infrastructure, procurement services, financial services on behalf of the hospital and management of patient's medical records as well as the running of the hospital's catering and retail outlets.

Streamlined Energy & Carbon Reporting

The Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2018 introduced requirements for large unquoted companies to disclose their annual energy use and greenhouse gas (GHG) emissions, and related information for years ending on or after 1 April 2019.

DSFS is responsible for managing the estate and facilities of Chesterfield Royal Hospital NHS Foundation Trust. The Annual Report of the Group includes a Sustainability Report which is a requirement under the Public Services (Social Value) Act (2012). As 100% wholly owned subsidiary of a NHS organisation, and as a spender of public funds, we have an obligation to work in a way that has a positive effect on the communities we serve. Sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs. By making the most of social, environmental and economic assets we can improve health both in the immediate and long term even in the context of rising cost of natural resources.

We acknowledge this responsibility to our patients, local communities and the environment by working hard and committing to minimise our carbon footprint.

Net Zero

On 1st October 2020, the NHS published a report "Delivering a Net Zero NHS". This document sets out two ambitions for the NHS, namely.

- for the emmissions we control directly (the NHS Carbon Footprint), net zero by 2040, with an ambition to reach an 80% reduction by 2028 to 2032.
- for the emissions we can influence (our NHS Carbon Footprint Plus), net zero by 2045, with an ambition to reach an 80% reduction by 2036 to 2039.

Working in partnership, DSFS's and the hospital Trust's joint Environmental Sustainability Group has developed a Green Plan to achieve the ambitions laid out in the Net Zero document to help decarbonise the NHS in line with the above timescales. We are committed to working to the plans set out by the 'Greener NHS' programme.

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The table below shows the actual greenhouse gas emissions for the company for the year ended 31 March 2021 and year ended 31 March 2020. Note that the emissions for gas, electricity and oil relate to the whole of the hospital's estate not just that consumed by DSFS as it is not possible to disaggregate the figures.

, , , , , , , , , , , , , , , , , , , ,	2020-21		2019-20		
	Energy		Energy		Emissions Scope
	consumption	Emissions	consumption	Emissions	(see table for
	(kWh)	(tCO2e)	(KWh)	(tCO2e)	definition below)
Energy consumption used to calculate emissions:					
• Gas	29,198,527	6,057	27,568,098	5,728	Scope 1
Electricity	11,054,747	3,185	11,116,456	3,513	Scope 2
• Oil	190,821	60	43,067	14	Scope 1
• Transport fuel*	nJa	4	n/a	5	Scope 1
Business travel**	n/a	n/a	n/a	n/a	Scope 3
NB: Gas, electricity and Oil energy					
consumption relates to the whole of the		• •			
hospital's estate, not just that consumed by			·		,
DSFS.					
Total gross tCO2e based on above		9,306		9,260	
Floor space (m2) - whole hospital estate		98,036		98,036	<u>.</u>
Intensity ratio:			ı		
Tonnes of CO2e (tCO2e) per square metre of	* .'	-			
hospital estate (tCO2e/m2)		0.09		0.09	
Methodology.					
The above data (except transport emissions) has been collated using the CRC Energy Efficiency Scheme which the hospit					
Trust has to report under					

All the data in the above table relates to UK only - DSFS does not have any global operations

^{*} Emissions from combustion of fuel for transport purposes (Scope 1) - this includes company vehicles and fuel for which the company reimburses its employees. Note that this relates to DSFS staff only.

^{**} Electric is supplied from renewable source and is REGO certificate backed (Scope 2).

^{***} Emissions from business travel in rental cars or employee-owned vehicles where company is responsible for purchasing the fuel (Scope 3).

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Scope 1: Direct GHG emissions	Scope 2: Energy indirect GHG emissions	Scope 3: Other indirect GHG emissions
These include emissions from activities	These include emissions released into	Emissions that are a consequence of
owned or controlled by the organisation	the atmosphere associated with your	your actions, which occur at sources
that release emissions into the	consumption of purchased electricity,	which you do not own or control and
atmosphere. They are direct emissions.	heat, steam and cooling. These are	which are not classed as Scope 2
Examples of Scope 1 emissions include	indirect emissions that are a	emissions. Examples of Scope 3
emissions from combustion in owned or	consequence of your organisation's	emissions are business travel by means
controlled boilers, furnaces, vehicles;	activities, but which occur at sources you	not owned or controlled by your
emissions from chemical production in	do not own or control.	organisation, waste disposal which is not
owned or controlled process equipment.		owned or controlled, or purchased
		materials.
Mandatory for large unquoted	Mandatory for large unquoted	Mandatory for large unquoted
companies and LLPs to report UK Scope 1	companies and LLPs to report UK Scope 2	companies and LLPs to disclose energy
Emissions as they relate to their UK	emissions as far as they relate to their	use and related emissions from business
energy (as a minimum electricity, gas	UK energy use (as a minimum grid-	travel in rental cars or employee-owned
and transport fuels).	sourced electricity, gas and electricity	vehicles where they are responsible for
	consumption relating to transport).	purchasing the fuel. Other Scope 3
		emissions voluntary, but strongly
		encouraged where this is a material
		source of emissions.
		

Energy Efficiency Action

Energy efficiency

The continued management of energy and implementation of energy saving schemes has seen our energy associated carbon emissions (tCO2e) reduce. The Trust's electric supply is now from 100% renewable generation backed by the Renewable Energy Guarantees of Origin (REGO) scheme. This equates to a saving of around 3,100 tCO2e per year. However when calculating our actual Carbon Baseline we are required to use average electrical National Grid renewable percentages.

Sustainable travel

There are several measures in place to encourage staff to use more sustainable methods of travel including car share, cycling, walking, using buses and motorcycling. The company has a cycle to work salary sacrifice scheme. There is a discounted car share scheme available to staff and there are discounts available with local bus companies for staff to travel to and from the hospital site.

In addition, there are two electric vehicle charging points which were installed to encourage the use of electric vehicles with plans to install more points in 2021/22. During 2019/20, the company bought two electric vans to support the business.

Waste reduction

To reduce food waste, an aerobic food waste digester, the Garbage Guzzler, was installed for the patient meals food waste. The machines were installed during 2020.

The methodology for Trust wide recycling of plastic bottles and cans was agreed during 2020. This method was implemented on top floor wards in March 2021. The Trust wide roll out is planned for 2021/22.

Clinical waste increased considerably during the Covid-19 pandemic bringing with it the challenges of waste disposal. Education materials were produced to enable staff to segregate the waste correctly, ahead of collection.