

# Report of the London Clinical Senate Forum 5<sup>th</sup> March 2020

**Environmentally Sustainable London Healthcare – Time for Action** 



## Introduction

The London Clinical Senate Forum held on 5<sup>th</sup> March 2020 brought together a diverse range of stakeholders to consider, generate and prioritise ideas and actions to make London's healthcare more environmentally sustainable.

This report provides an introduction as to why environmental sustainability became a topic of the London Clinical Senate Forum, gives an account of the day, outlines recommendations and actions, and concludes with an evaluation of the day.

The outputs are designed to support the London Clinical Senate and the London Region transform thinking into action, thus enabling and contributing to improving environmental sustainability.

The report is intended for all parties with an interest in environmental sustainability including:

- Forum attendees and those unable to attend the Forum
- Trust sustainability leads
- London Clinical Senate Council
- London regional sustainability programme
- Sustainable Development Unit with submission of ideas and case studies to the NHS Net Zero Call for Evidence



# London Clinical Senate Forum 05/03/20 Environmentally Sustainable London Healthcare

Time for Action



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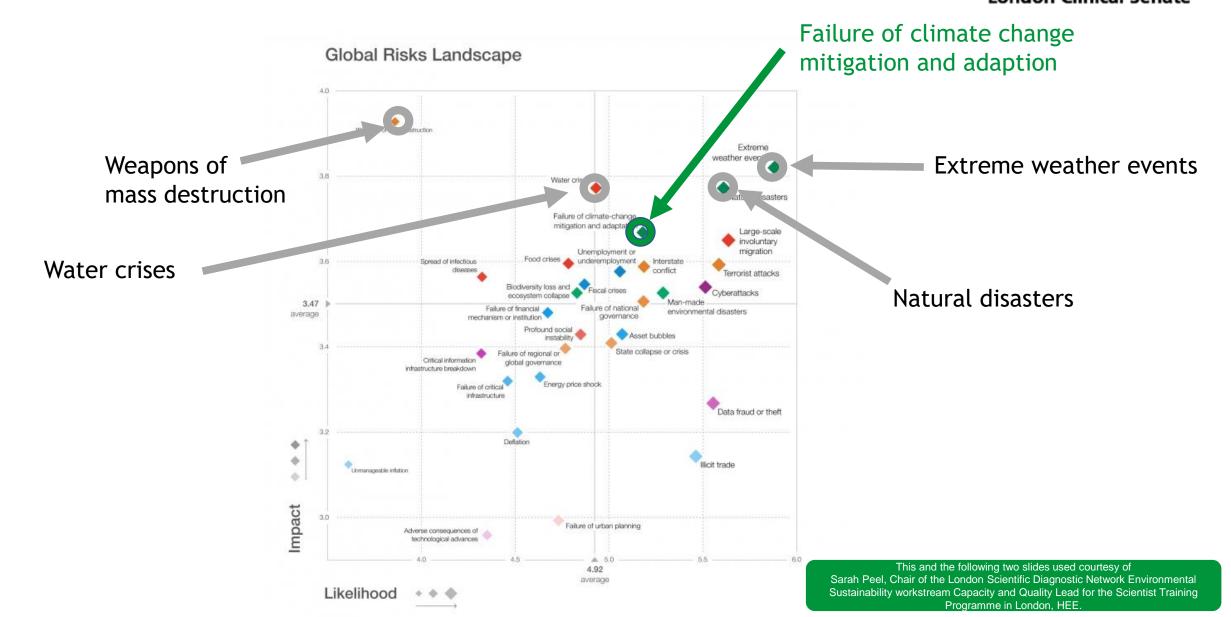


## 1. Introduction

Poor air quality and rising temperatures due to climate change are already having a significant impact on health now and in future decades. The NHS produces millions of tonnes of waste and contributes to a significant proportion of England's total carbon emissions. The impact of these are starting to be seen on the health of our population. For this Forum, the London Clinical Senate joined with Public Health England to hear the latest information and evidence on the sustainability challenges we face and to collaborate on addressing these.

# 2. Why environmental sustainability in healthcare?







# 2. Why environmental sustainability in healthcare?

#### Carbon footprint of healthcare

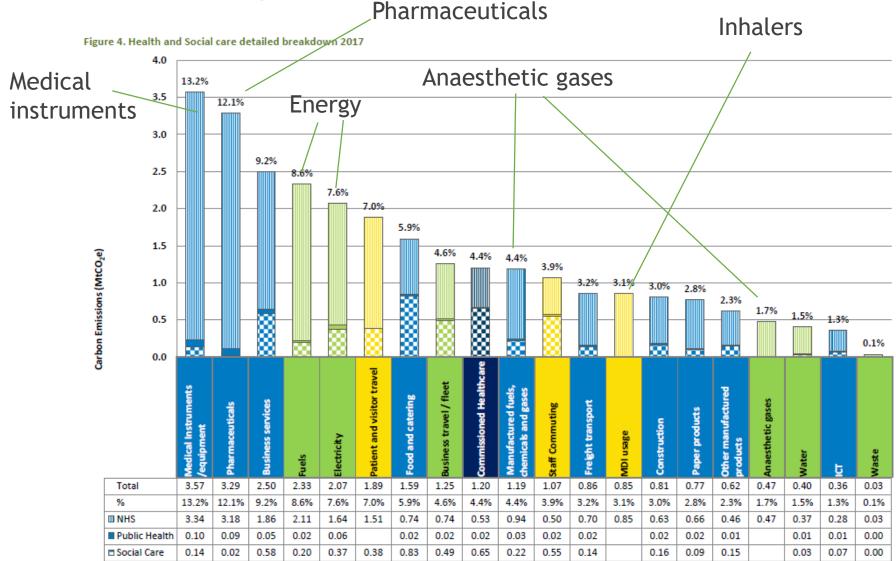
- Globally, healthcare's carbon footprint accounts for 4.4% of the world's net CO<sub>2</sub> emissions.
- If healthcare were a country it would be the fifth largest emitter on the planet.
- The NHS has higher emissions than the global average for healthcare and is responsible for 5.4% of the UK's total carbon emissions:
  - Equivalent to 11 coal-fired power stations
  - Not much lower than those for both aviation, and agriculture, forestry and land use in the UK (each 6.5%)

https://noharm-global.org/articles/news/global/webinar-health-care's-climate-footprint-report-findings-and-opportunities

2. Why environmental sustainability in healthcare?

NHS
London Clinical Senate

Carbon hotspots



SDU 2018. Reducing the use of natural resources in health and social care 2018 report



# 3. Policy context

### NHS Long Term Plan

#### Chapter 6

• vii. The NHS will improve the way it uses its land, buildings and equipment. This will mean we improve quality and productivity, energy efficiency and dispose of unnecessary land to enable reinvestment while supporting the government's target to build new homes for NHS staff. We will work with all providers to reduce the amount of non-clinical space by a further 5%, freeing up over one million square metres of space for clinical or other activity. By 2020, we aim to reduce the NHS' carbon footprint by a third from 2007 levels including by improving energy efficiency through widespread implementation of LED lighting and smart energy management. We will also improve the way we manage our estate and modernise and standardise our ambulance fleet to help to reduce emissions and to improve air quality (see the Appendix).

#### Appendix

• 17. The NHS is leading by example in sustainable development and reducing use of natural resource in line with government commitments. In 2016/17 NHS providers generated nearly 590,000 tonnes of waste. Of this only 15% goes directly to landfill, with 23% of waste recycled190. Between 2010 and 2017 the health and care sector reduced water consumption by 21%, equivalent to around 243,000 Olympic swimming pools. The carbon footprint of health and social care has reduced by 19% since 2007, despite a 27% increase in activity. This leaves a significant challenge to deliver the Climate Change Act target of 34% by 2020 and 51% by 2025. A shift to lower carbon inhalers will deliver a reduction of 4%,with a further 2% delivered through transforming anaesthetic practices. Additional progress in reducing waste, water and carbon will be delivered by ensuring all trusts adhere to best practice efficiency standards and adoption of new innovations. Key to this will be delivering improvements, including reductions in single use plastics, throughout the NHS supply chain.



# 3. Policy context London Vision

#### **Our Ambition**

• Every Londoner breathes safe air

#### **Our Commitment**

• We work together to reach legal concentration limits of Nitrogen Dioxide (NO2) and working towards WHO limits for particulate matter 2.5 concentrations by 2030.

#### Plan

• "Our plans to reduce outpatient appointments in London by 30% have the potential to avoid up to 50,000,000 miles of journeys. We estimate, that this could lead to a 30,000 kg reduction in traffic-related nitrogen dioxide emissions and a 2,500 kg reduction in traffic-related PM10 emissions each year in London (based on 2015 average fleet emissions)."

#### **Actions**

- Agreed across the NHS, local and national government
- Developing an action plan to meet this
- London Health Conference air pollution sessions with London trusts presenting- Sustainable Hospital Framework

# 4. Forum outline - Programme



08:45-09:15	Registration and refreshments		
Session 1: Evi	dence and impact of reducing our carbon footprint - international, national and London perspectives		
09:15-09:25	Chair's welcome and introduction		
09:15-09:25	Vin Diwakar, Regional Medical Director and CCIO, SRO for Sustainability, London Region		
	International perspective and evidence base for reducing carbon footprint		
09:25-09:45	Sarah Peel, Chair of the London Scientific Diagnostic Network Environmental Sustainability workstream Capacity and Qua		
	Lead for the Scientist Training Programme in London, HEE		
09:45-10:00	National perspective - Sustainable Development Unit on greener NHS and commitments in the NHS Long Term Plan Sonia Roschnik, Director, Sustainable Development Unit		
10:00-10:15	London perspective - sustainable development and the mayoral strategy		
10.00-10.13	Paul Pilkington, Public Health Specialist, Transport Planning and Strategy, Transport for London		
10:15-10:30	Generating culture change and prioritising sustainability		
10:15-10:50	Steve Shaw, Medical Director Outpatient Transformation and Sustainable Development, London Region		
10:30-10:45	Panel discussion		
10:30-10:45	Sarah Peel, Sonia Roschnik, Paul Pilkington and Steve Shaw		
10:45-11:15	Refreshment break		
Session 2: Ide	ntifying best practice and opportunities aligned to the sustainability ambitions in the Long-Term Plan and London Vision		
11:15-11:30	World café introduction Introduction to world café tables (see details of world café tables below)		
	World café		
	3 rounds of 20-minute discussion at each table to consider how clinical and non-clinical staff in the NHS can improve		
11:30-12:45	environmental sustainability through:		
	Improving air quality		
	Reducing carbon, waste and water		
40.45.40.00	Reducing the use of plastics		
12:45-13:30	Lunch and networking		

	World café	٦	
	2 rounds of 20-minute discussion at each table to consider how clinical and non-clinical staff in the NHS can improve		
12.20 14.15	environmental sustainability through:		
13:30-14:15	Improving air quality		
	Reducing carbon, waste and water		
	Reducing the use of plastics		
Session 3: Lo	ndon NHS call to action 2020 - what are the key actions that the NHS in London should lead and collaborate on to make a		
more enviror	mentally sustainable NHS?		
14:15-14:45	World café feedback - what are the most impactful and achievable actions that we could scale-up in London?		
14:45-15:00	Refreshment break		
15:00-15:10	O Prioritising the actions to scale-up in London: slido poll		
Session 4: Ta	king action - what further support, and structures are needed to enable change at the local, regional and national level?		
	Next steps for the London region and London Clinical Senate		
15:10-15:20	Steve Shaw, Medical Director Outpatient Transformation and Sustainable Development, London Region		
	Mike Gill, London Clinical Senate Council Chair		
	Table discussions in STP/ICS areas or pan-London to debate:		
	<ul> <li>What can you do as an individual? What support/enablers would you need? How can we measure and track</li> </ul>		
15:20-15.50	progress?		
13.20 13.30	<ul> <li>What can you do in your organisation? What support/enablers would you need? How can we measure and track</li> </ul>		
	progress?		
	What can your ICS/ STP do? What support/enablers would you need? How can we measure and track progress?		
15:50-16:00	Chair's close		











## 4. Forum outline - world café

World café discussions formed a key part of the day. The topics and table hosts are detailed in the table below. Delegates rotated 5 times, after which hosts fed-back their highest priority action to all delegates in the room, these were voted on to generate a priority list which is detailed in the next slide.

	Topic	Table host
1	Clean air hospital framework	Nick Martin, Head of Sustainability & Environmental Management, Great Ormond Street Hospital Catherine Kenyon, Senior Programme Manager, Great Ormond Street Hospital
2	Sustainability in labs (LEAF)	Martin Farley, Sustainable Laboratory Advisor, UCL Environmental Sustainability
3	Improving air quality in London – case studies and social prescribing of active travel	Paul Pilkington, Public Health Specialist, Transport Planning and Strategy, Transport for London
4	Workforce education on sustainability and medicines optimisation with inhalers	Natasha Callender, Chief Pharmaceutical Officer's Clinical Fellow, Hospital Pharmacy & Medicines Optimisation Team, NHS England and NHS Improvement
5	Decontamination and sustainability	Sylvia Chegra, Decontamination Lead, Great Ormond Street Hospital
6	Sustainability quality improvement – good practice examples from the green ward programme	Ingeborg Steinbach, Project Manager, Carbon Modelling, Centre for Sustainable Health Care, Oxford
7	Generating movement and culture change within the NHS – making the most of what is fantastic about London	Mark Harber, Honorary Senior Lecturer and Consultant Nephrologist, Royal Free NHS Foundation Trust Rebecca Griffiths, Senior Project Manager, London Diabetes Clinical Network
8	'Gloves off' campaign	Nicola Wilson, Lead Practice Educator, Great Ormond Street Hospital
9	Plastics pledge	Kim Croasdale, Strategy Advisor, Sustainable Development Unit
10	Collaboration for sustainability	Matthew Cruice, Team Leader, Adult Screening Programme Kathie Binysh, Head of Screening, NHS England and Improvement
11	The role of clinical staff in awareness raising	Kristen Guida, Manager, London Climate Change Partnership, Greater London Authority
12	Patient and public expectations and culture change	Steve Shaw, Medical Director Outpatient Transformation and Sustainability, London Region

# 5. Feedback to NHS Net Zero– Call for Evidence



The twelve priorities emerging from the world café discussions are listed below in the order that they were prioritised by delegates in the room. The clinical senate feels that these all represent an excellent synthesis of the thinking that emerged from the day, and will share these ideas as part of the NHS net zero call for evidence:

- Scale-up the clean air hospital framework
- Develop a shared knowledge/project/learning platform
- Clear, strong decision making from senior leadership to describe the 'what' so that clinicians/other staff can work on the 'how'
- Education on sustainability to enable staff to make the right decisions
- Community of practice for sustainability leads to include problem solving
- Co-design with patient community to transform the way we deliver outpatient services
- Encouraging active travel among staff and patients
- Procurement information to include the cost of devices and ability to use as well as the carbon footprint
- Set targets for use of less than 50% of single-use consumables
- Pre-packaged tools for projects
- Gather data on decontamination risks and process
- LEAF (laboratory efficiency assessment framework) programme to improve sustainability that tracks progress

NHS Net Zero call for evidence-Evidence may include data, information, case studies, ideas and research, from within or outside a healthcare setting, nationally or internationally, that can be applied to the NHS. All ideas, case studies, emerging research, disruptive innovations, technologies, transformative programmes and more are welcomed and encouraged.



## 5. NHS Net Zero – Call for Evidence

A range of other ideas and case studies gathered from the Senate forum which support the call for evidence are detailed below:

#### Improving air quality

 Scale up the clean air hospital framework: currently being supported at Whipps Cross, Royal London, UCLH, Royal Free and Whittington

#### Reducing carbon, waste and water

- Decontamination:
  - Great Ormond Street Hospital: recycling tray wraps generate revenue only done at 4 Trusts
  - Develop information and evidence on carbon footprint of the costs of disposable compared to reusable products
  - Case study in Denmark reduce plastic with manufacturers joining forces
- Sustainability in laboratories:
  - Laboratory Efficiency Assessment Framework (LEAF) 46 institutions, set of criteria for good practice

#### Reducing the use of plastics:

- Great Ormond Street: Gloves are off campaign, use 4 pint milk cartons instead of 1 pint milk cartons
- Royal Free: adopted gloves are off campaign, canteen switched to bio-degradable material
- North Devon: canular trial repeated and reduced usage
- Southampton Hospital: use of urometers patients didn't all need/not being used appropriately, staff re-education
- Central London Community Healthcare: Green plan

#### Workforce education on sustainability and medicines optimisation with inhalers:

- Camden and Islington: regular medicine reconciliation and train the trainer sessions for medicine reviews
- SEL: System in place to ensure GPs/clinical pharmacists/practice nurses give regular medicine checks to ensure appropriateness, app videos on inhaler usage via Right Breathe, clinical pharmacists upskilled in respiratory care
- NWL: Guidance on options and equivalents with cost to support in decision making



# 6. Next steps

The London Clinical Senate have taken the top 4 priority areas developed at the forum, and generated recommendations and possible actions/ responses which draw on the wider discussion, see below:

Recommendation	Possible response to be developed
Scale-up the clean air hospital framework developed by Global Action Plan and Great Ormond Street Hospital	<ul> <li>Further discussion with authors to consider how this might be resourced and scaled-up</li> <li>Consider wider application or expansion, including:         <ul> <li>other healthcare settings beyond hospitals</li> <li>potential to expand clean air hospital framework with a wider focus on carbon, plastics, etc.</li> </ul> </li> <li>Develop community of practice with AHSNs to support implementation</li> </ul>
Develop a shared knowledge/ project/learning platform	<ul> <li>Consider where and how a platform is best hosted, supporting existing platforms if applicable, such as: <a href="https://map.sustainablehealthcare.org.uk/projects">https://map.sustainablehealthcare.org.uk/projects</a> or FabNHStuff.net</li> <li>Help people develop ideas in their service; for example, through outreach support and coaching for staff with good ideas (QI)</li> <li>Undertake pathway mapping to reduce carbon footprint in partnership with clinical networks</li> <li>Consider how knowledge is also made available to patients and the public</li> <li>Engage specialist marketing teams to win hearts and minds</li> </ul>



# 6. Next steps

Recommendation	Possible response to be developed
Clear, strong decision making from senior leadership to describe the 'what' so that clinicians/other staff can work on the 'how'	<ul> <li>NHS Plan and London Vision metrics to be interpreted for London to develop the 'what', which is shared and agreed with senior clinical lead groups</li> <li>Peer-review of London providers' current position against the standards with clinicians and operational managers from the Senate programme board</li> <li>Develop toolkits drawing on international best practice, clinical evidence and local application for high impact healthcare interventions where change is proposed e.g. inhalers and anaesthetic gases</li> </ul>
Education on sustainability to enable staff to make the right decisions	<ul> <li>Work with partners to share the carbon footprint of clinical interventions on an online learning platform e.g. NHS Hub, platform to develop knowledge</li> <li>Patient, carer and public voice group to consider communication and culture change on commissioning and patient expectations</li> <li>Work with education providers to include sustainability as part of NHS workforce training and include as part of CPD/mandatory training</li> <li>Communication programme to develop carbon literacy</li> </ul>



# 6. Next steps

- The London Clinical Senate Council are discussing the priorities and structure for work to take forwards the key recommendations from the Forum
- The information will be used to develop a paper for consideration by the London Regional Executive Team to support in the establishment of the London regional sustainability programme



# 7. Evaluation of the Forum

The senate forum received positive evaluation from delegates. It was well attended by over 100 a quarter of these completing the evaluation. 55% rated the event excellent, with the other 45% rating it very good. Key comments received about the Forum included are below.

The London clinical senate would like to thank everyone who inputted to the day for contributing to its success, and enabling us to progress with securing more environmentally sustainable healthcare.

