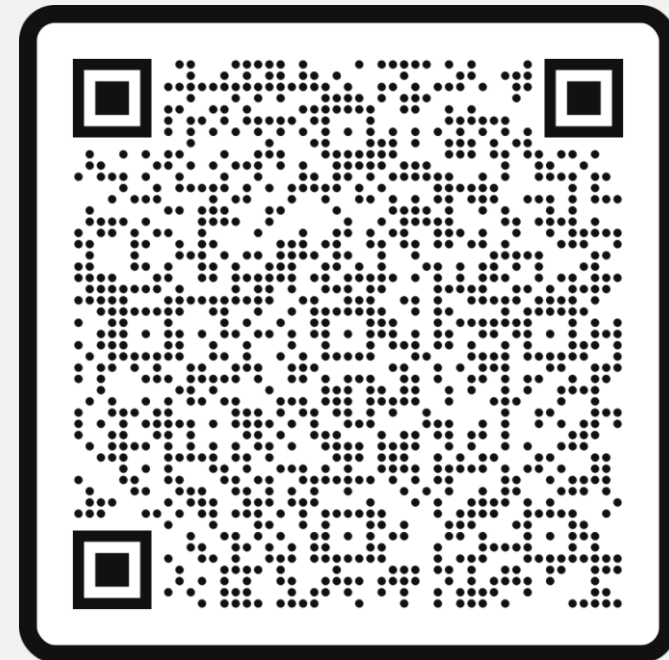




Welcome to the 2nd NHS Sustainable Solutions Conference: Building a Greener NHS



23rd September 2025
Leonardo Hotel, Milton Keynes,
Midsummer Boulevard, Milton Keynes,
MK9 2HP



Please scan the QR Code on the screen
below to register your interest for our
accredited training courses.

Register your Interest





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Join the Healthcare Engagement Society (HES)

- **What it is** – A secure, year-round platform bringing NHS professionals together across six specialist communities.
- **Why it matters** – Stay connected beyond today's event, share challenges, and learn from peers facing the same priorities.
- **Your benefits** – Exclusive access to interviews, insights, best practice, and real-time discussion threads with colleagues nationwide.
- **How to join** – Simply scan the QR code, choose your community, and start connecting today.



SCAN ME



Help us make this event carbon neutral, scan the QR code now

For example:

Train Journey Birmingham to London	112 miles
Train Journey Manchester to London	183 miles
Train Journey Leeds to London	188 miles
Train Journey Manchester to Birmingham	113 miles
Train Journey Leeds to Birmingham	81 miles





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Chair Opening Address



Dr Gurnak Singh Dosanjh

GP

LLR ICB



Keynote Presentation



Cath Cooksey
Medicines Safety Lead
Pharmacist
Medway Foundation
Hospital Trust



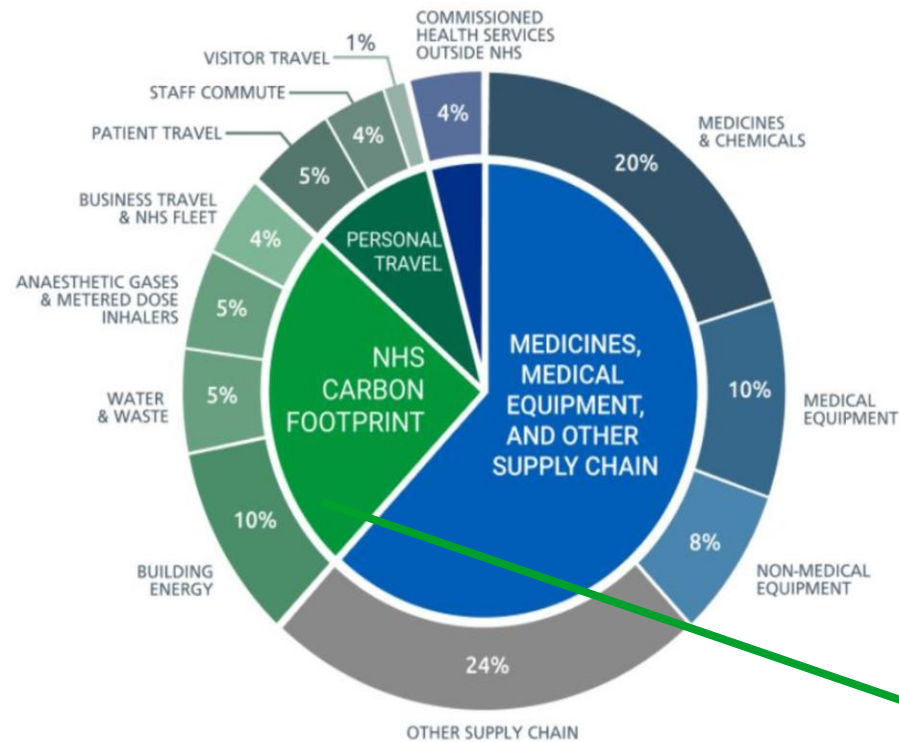
Sam Coombes
Lead Medicine Information
and Sustainability
Technician
East Kent Hospitals
University NHS Foundation
Trust



Re-Hale

Inhaler recycling

3% inhalers



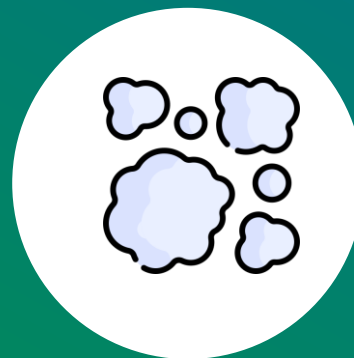
73 million inhalers



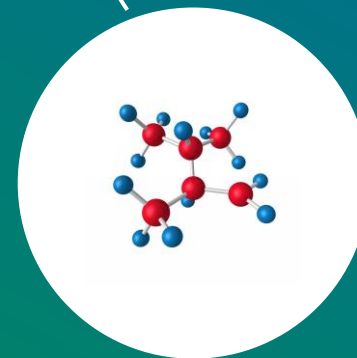
Plastics



Metals



Gases



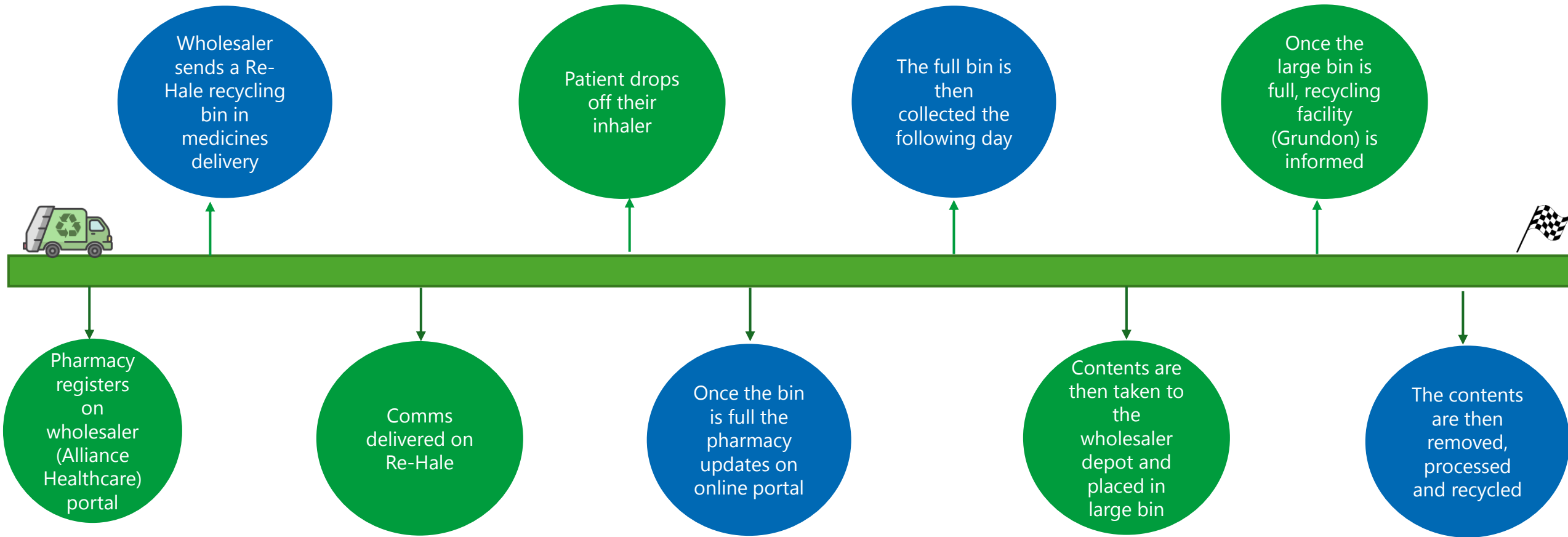
Medicines



Why is this a challenge in the UK?

What is Re-Hale?

How does it Work?



What have we achieved ?



Lessons Learnt

Challenges for the future



Questions?

Re-Hale was a collaborative working project between NHS Kent and Medway Integrated Care board and Chiesi Ltd which ran between November 2023 and October 2024 and is now complete. Kent and Medway Integrated Care Board and East Kent Hospitals Trust are now in the process of assessing opportunities for continued inhaler recycling in their region including the potential for Re-Hale to be adopted by the NHS





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Panel Discussion



Jonny Groome

Paediatric Anaesthetic Consultant
Barts Health NHS Trust and Nuffield Health



Simon Rowland

Sustainability Manager
NHS London Procurement Partnership



Dr Diana Shroff

Junior Clinical Fellow with Sustainability (in Critical Care)
Adult Critical Care, St George's Hospital, London



Nicole Fletcher

Head of Net Zero and Sustainable
Procurement, NHS England



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Case Study





Case Study

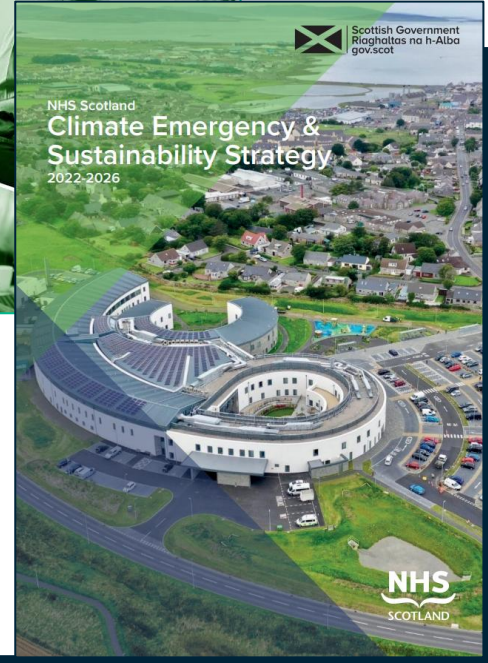
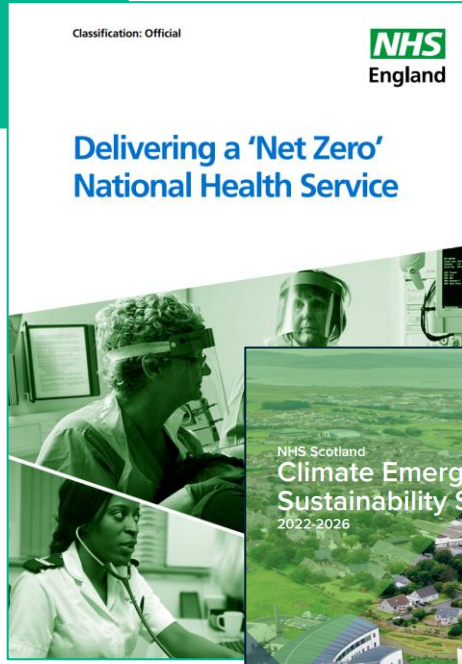


Simon Hayman
Regional Director
Equans UK & Ireland



Building a Greener NHS: Driving Decarbonisation and Climate Resilience through Smart Hospitals and Digital Innovation





NHS ENGLAND TARGET 2025

**NHS Carbon Footprint
(Scope 1 & 2)**

↓ 47% reduction
by 2032

**NHS Carbon Footprint
(Scope 3)**

↓ 73% reduction
by 2038

NHS SCOTLAND GOALS 2038

**Reduce Greenhouse Gas
Emissions by at least**

↓ 75% reduction
by 2030

Use Renewable Heating Systems by 2038

FM & Decarbonisation

5 stage strategy – what next?



Reduce our environmental impact (decarbonisation)



Electrification of heat remains the default - High / medium temp heat pumps. Shallow geo-thermal can help manage electricity cost through increased efficiency.



Thermal storage - allows you to run heat pumps at period of lower electricity tariffs and store heat to manage peaks in demand.



On-site renewables + Battery Energy Storage Systems (BESS) - ability to generate, store and dispatch power to grid to generate revenues.



Low Carbon Heat Networks - where practical or present, connect to existing networks.



Hydrogen is not the answer (today) for hospitals. It remains a nascent technology, and the cost of Hydrogen is prohibitive. Storage requirements for larger Hospitals could well trigger lower tier COMAH status

Key challenges - capital funding

- **PSDS (now stopped)**
 - 100% success with PSDS this time
- **Grants**
 - Upfront accounting recognition of any loan liability has to be matched by upfront capital budget allocation
- **NEEF**
 - Detailed business cases off the shelf with ROI
 - Be prepared for a quick turnaround and delivery
- **Lifecycle**

Capital Departmental Expenditure Limit (CDEL) refers to the maximum amount of capital expenditure that a government department is authorised to incur within a specific period.

This limit is set to ensure fiscal responsibility and budget adherence.

District heating networks -

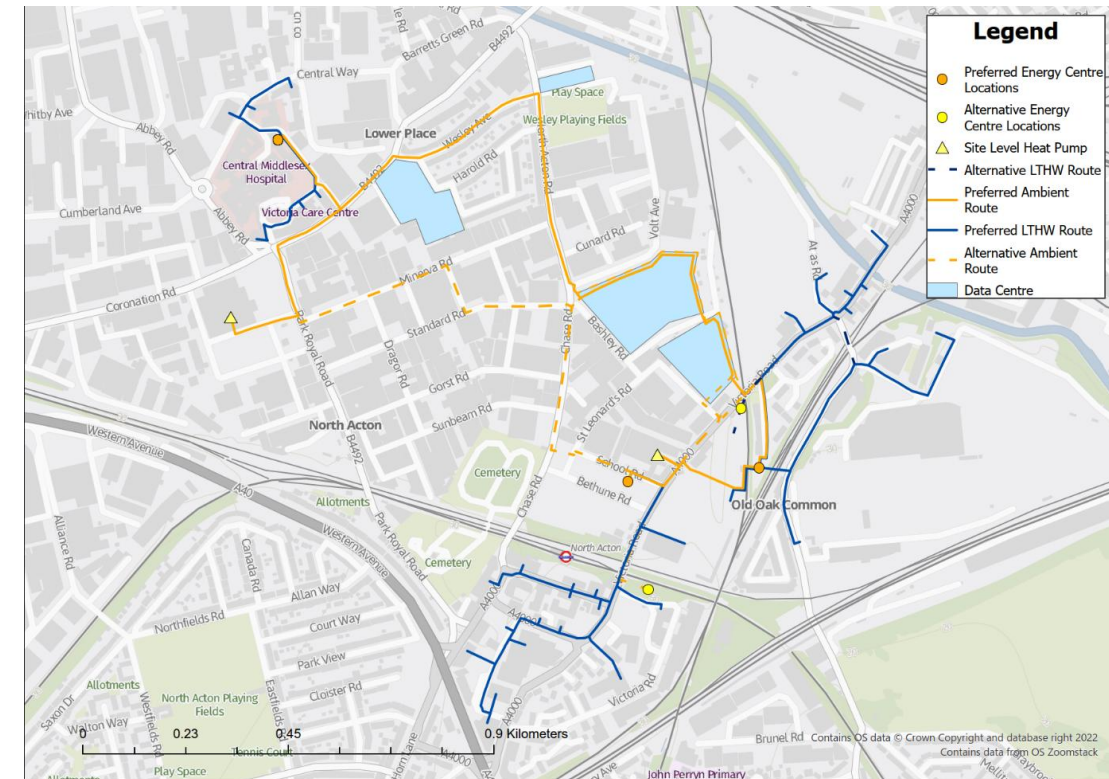
Funding challenges following the cancellation of the PSDS scheme

Green Heat Network Fund (GHNF)

- Operator will apply and receive the GHNF funding and will be responsible for any match funding obligations under the grant terms
- No impact on Capital Departmental Expenditure Limit (CDEL)
- This funding reduces connection cost to the hospital by around 90%

Heat Network Efficiency Scheme (HNES)

- Capital Grant based on the outputs of a detailed decarbonisation plan
- Covering 50% of the costs for the hospital's network upgrade





“Air pollution disproportionately affects those from more deprived or vulnerable backgrounds.”

Put simply, there is no safe level of air pollution, and increasingly ambitious action needs to be taken to improve air quality across the country to reduce avoidable deaths and improve the health of our population.”

The Royal College of Physicians
A breath of fresh air

Reduce our environmental impact (air quality emissions)

100%

All-electric
hospitals

3

New - Oriel & ADC
Retrofit – Pontefract PFI

1,413

vehicles now
fully electric

43%

our target was 30%
electric fleet by 2026

80%

electric by 2031

15

e-cargo bikes,
across healthcare

**Decarbonisation
& improved air
quality are
interlinked**

**>80% of Equans'
emissions (Your
Scope 3) are
fleet.**



Smart hospitals – NHS league tables

Metrics used in developing the league tables include:



Finance such as reducing energy costs



Productivity, room usage, effective flow and discharge of patients



Patient experience

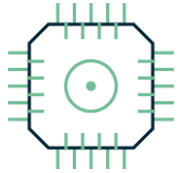


Retention of staff

All of which will be to some extent improved by the way in which the facilities are managed

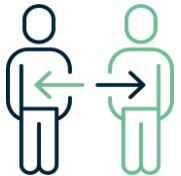
The metrics on which the NHS England rankings have been based will be influenced by the quality of the buildings in which they are operating.

Smart hospitals delivery



Client Digital Vision

“What can a smart hospital do for me”



Designated Local Representative

Supporting on site the design, fit-out and managing the Soft Landing



Smart Hospital ≠ Smart Building

Smart Hospitals are specialised, requiring tailored approaches.



Smart Ready Infrastructure

Ensure the building is “Smart Ready” at handover

Smart Hospitals improve efficiency, which unlock energy savings and result in lower carbon emissions.

They improve space utilisation; they automate patient flow processes so these can be monitored and optimised.

Smart hospital ≠ smart building



KPIs for patient care, experience and overall satisfaction

- Overall patient satisfaction
- Waiting time
- Staff responsiveness



KPIs medical staff

- Bed turnover rate
- Nursing staff productivity
- Equipment turnover rate



KPIs for hospital services

- Sustainability efficiency/carbon footprint rate
- Space occupancy rate
- Maintenance budget







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Refreshments & Networking



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SCAN ME



Chair Morning Reflection



Dr Gurnak Singh Dosanjh

GP

LLR ICB



Case Study





Case Study



Jos Lans
CEO
Medexs Group



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Case Study



**neutral
carbon
zone**



Case Study



Alan Stenson
CEO
Neutral Carbon Zone (NCZ)

A background image of a doctor in a white coat with a stethoscope, holding a tablet and a pen, set against a blurred clinical background.

From Compliance to Value: The NHS journey to Net zero

Alan Stenson | NCZ

Climate change is a health risk...



Climate risk shows up as health risk: heat, air quality, medicines supply, estates resilience.



If it improves patient outcomes or staff wellbeing, it belongs in your net-zero plan.

When we frame this as a health conversation, priorities snap into focus and decisions get easier.



The NHS mission and what it means for suppliers



The NHS has clear net-zero goals with procurement as a primary lever.



Suppliers: bring credible plans, measured reductions, and innovations that add genuine value.

This isn't "nice to have." It's integral/critical for how the NHS hits its targets. Appropriate and genuine target setting and monitoring enables credible plans to be implemented, and a successful net zero outcome to be achieved.

Opportunity, not restriction

The biggest wins cut carbon and costs: energy, products/tools, logistics, waste.

Less leakage, less waste, right product in the right pathway = clinical value.

If its accessible, value adding and cost/carbon saving, you're on the right track.

What “good” looks like right now

A **credible Carbon Reduction Plan**
(covering Scopes 1–3) with real
governance and year-on-year
progress.

Evergreen completed so buyers can
see maturity in one place.

Clear links between your actions and
clinical/operational benefits.

**Evidence beats adjectives.
Show it, don't say it.**



Make data useful (how to measure like a partner)

Pair tonnes of CO₂e with intensity metrics buyers care about: per bed-day, per theatre hour, per patient episode, per m², per hour of cleaning.

Track the drivers: kWh, m³, miles, kg of materials, product choice.

Use methods buyers recognise (GHG Protocol / ISO 14064, LCA for products/services).

At NCZ we focus on “metrics that move decisions.” If your metric can’t inform a clinical or estates choice, pick a better one.

FM & estates: practical wins you can action now

Energy & controls: BMS tuning, HVAC set-points, out-of-hours theatre air changes.

Lighting & digital: LED plus smart controls; remote monitoring to catch faults early.

Heat readiness: lower flow temps, zoning; prepare for heat-pump transitions.

Water & waste: leak detection, sterilisation heat recovery, theatre pack optimisation.

Logistics: route planning, back-haul, sensible EV deployment where appropriate.



Pick one hotspot, agree the baseline, run a safe pilot, measure three things: cost, quality, carbon.



Products and clinical pathways



Anaesthetics & inhalers: like-for-like clinical outcomes at far lower footprints when done with clinical leads.



Materials & chemistries: concentrates, microfibre re-use, verified lower-impact formulations.



Durability & repairability: fewer replacements, less waste, better uptime.

Reporting that adds value (and passes scrutiny)



Transparent baseline, sources, and factors; explain limits and what you're improving next.

CRP aligned to NHS needs and public procurement rules, plain English, no green gloss.

Service and product footprints built from **activity data** wherever possible; spend-based only where you truly lack primary data.

At NCZ we build reports you can hand to procurement and estates with confidence. Credibility every time.

Set targets the NHS can trust

Targets tied to the **drivers** (energy, gases, materials, miles), not wishful thinking.

Short-cycle reductions now; bigger structural shifts on a clear timeline.

Publish how you'll measure, who owns delivery, and when you'll report back.

How to work with NHS buyers (open, practical and collaborative)

"We've completed Evergreen and have a CRP, can we review your hotspots together?"

"We can safely pilot X on one ward/theatre/building for 8–12 weeks and report cost/quality/carbon."

"Here are our intensity metrics so you can compare across sites."

What success looks like



Fewer leaks and failures, smoother operations, happier staff.

A clearer line from procurement choice to patient benefit.

Lower bills and lower carbon, evidenced and repeatable.
Adding quantifiable value to the NHS journey

**At NCZ we build reports you can hand to procurement
and estates with confidence. Credible every time.**

**Measure credibly.
Share openly.
Innovate for value.**

If you do these three things, you'll help the NHS hit its goals, and you'll win the right kind of work.

Let's move from compliance to value, together.

Any Questions?



Alan Stenson

alan@neutralcarbonzone.com



CARBON
ACCOUNTING
ALLIANCE



INTERNATIONAL
ORGANIZATION FOR
STANDARDIZATION



GREENHOUSE
GAS PROTOCOL





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Fireside Chat



Lyndsay Muirhead
Clinical Sustainability Project Lead
UCLH



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Case Study





Case Study



Greg DelBene

Global Product Marketing Manager for Vacuum and
Abatement Technology Innovation Manager
BeaconMedaes



Inhaled Fluorinated Gases - A Sustainable Solution for the NHS

Greg DelBene

23rd September 2025

Atlas Copco
Group





BeaconMedaes UK

Questions / Discussion





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Lunch & Networking



Chair Afternoon Reflection



Dr Gurnak Singh Dosanjh

GP

LLR ICB



Keynote Presentation



Raj Mankotia
Consultant Surgeon
MMUH Birmingham



Smart Theatres & Smart Hospital



Mr Raj Mankotia

M.S, FRCS(Ed), PGCertME

Consultant Surgeon General and Colorectal,





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Keynote Presentation



Laura Fish
Sustainable Travel Manager
Sheffield Teaching Hospitals
NHS Trust



Jack Windle
Chief Sustainable
Transport Officer
BetterPoints



Sheffield Teaching Hospitals
NHS Foundation Trust



BetterPoints

Sheffield Teaching Hospitals & BetterPoints: partnership for behaviour change

Laura Fish and Jack Windle



Today, we will tell you...

Who we are

What is BetterPoints

Our partnership

BetterPoints Sheffield

Next Steps

Who we are



- Purpose-driven
- 15 years old
- Behaviour change pioneer for transport, health and climate



- Purpose built platform
- 40 behaviour change techniques (BCTs)
- Empower, reward and measure behaviour change



We work with:

- Local Authorities
- Strategic employers
- Stakeholders who share our aims

Who we are

Staff Travel Modes – Snapshot from 2025 Survey

 The majority of respondents travel to work by car as a driver **5+ days per week**, especially those living more than 10 miles from their workplace. This remains the dominant mode of transport.

 A significant number of staff cycle to work **at least annually**, with some cycling **3–5 days per week**. Many cited improved cycle routes, secure storage, and shower facilities as motivators.

 Usage is mixed. While some staff use buses or trams **3–4 days per week**, others report **never** using public transport due to unreliable services, long commute times, or poor connectivity.

 Walking is popular among staff living within 1–3 miles of their workplace, with several walking **3–5 days per week**. Safety, lighting, and improved pedestrian routes were common themes in feedback.

As we all know the NHS set us a target of Net Zero by 2040. **Staff travel, along with patient, visitor, and supplier travel**, accounts for approximately **3.5% of all road travel in England**, totalling around **9.5 billion miles annually**. This travel contributes to **around 14% of the NHS's total carbon emissions**, making it a major component of the system's environmental footprint



What is BetterPoints



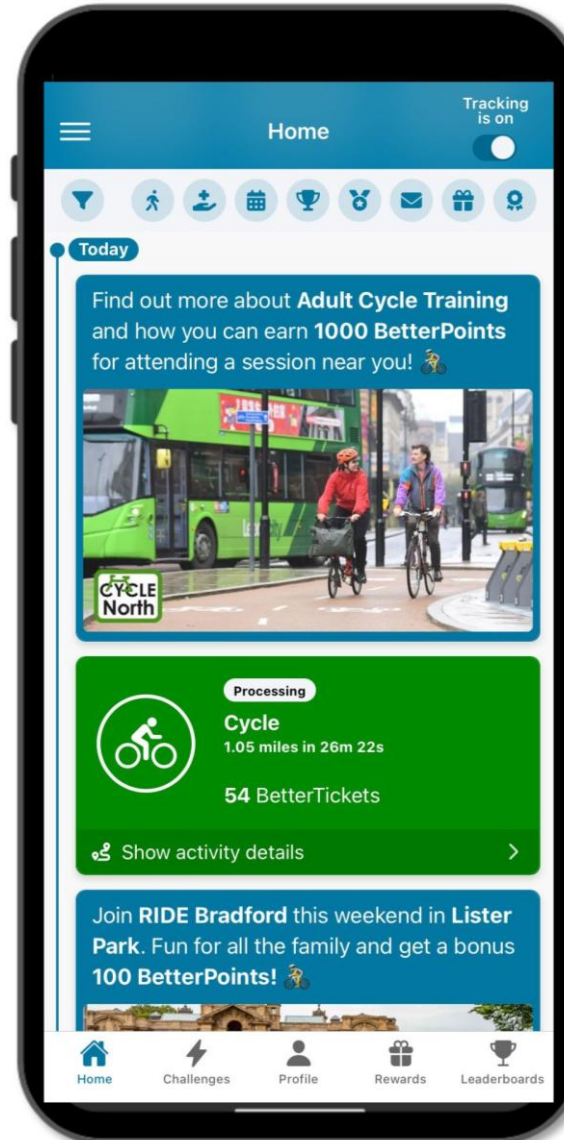
A behaviour change platform and app available to everyone who lives, works or studies in a client area.



Downloadable. Users sign up and complete baseline survey on their physical activity and lifestyle habits.



Members earn points – BetterPoints – for making sustainable journeys, answering surveys and attending eligible events.



Points can be redeemed for goods and services with reward partners.



Includes national chains as well local businesses.



Points can also be donated to national and local charities.



BetterPoints Sheffield

Sheffield – Population 685,000

BetterPoints Members: 25,486

In its first year, BetterPoints achieved:



1,960 people driving on fewer days per week



1 Kiloton of carbon savings, worth £277,000
(Government valuations)



2.5 million car trips switched to active transport



2/3 of inactive registrants recorded at least 12 weeks of CMO's recommended 150 minutes of Physical Activity



**“BetterPoints has been
transformative for Sheffield”**

Councillor Ben Miskell, Chair of
Transport, Regeneration and
Climate Committee

sheffield.betterpoints.uk



Our Partnership

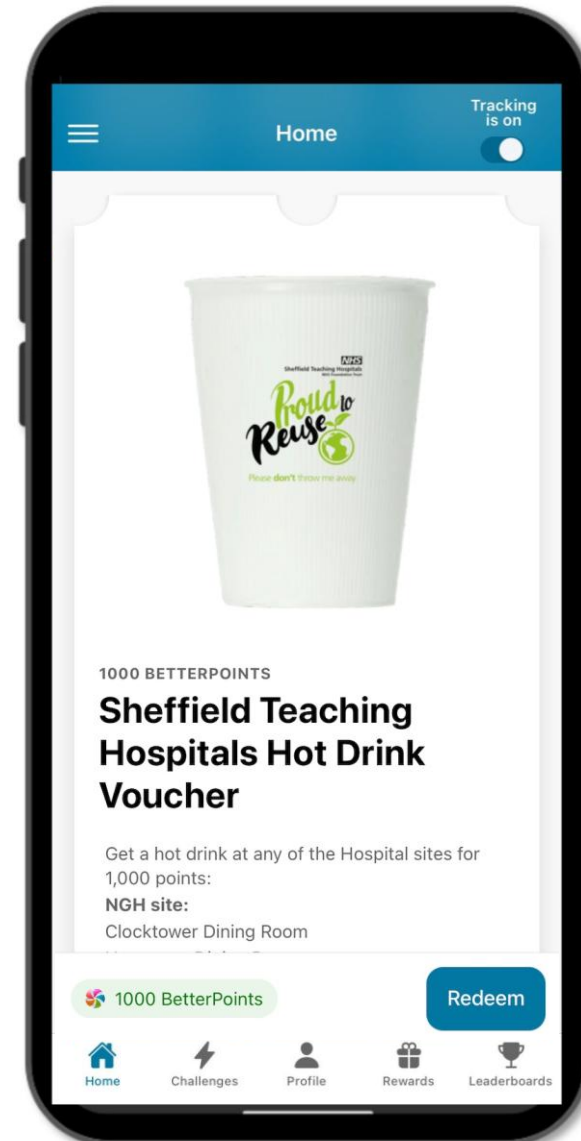
☕ We listed a hot drink voucher for all STH cafes aligning with their Proud to Reuse campaign – redeemed 120 times so far. Attended an engagement event to launch the voucher.

📍 Geolocated STH sites so we could see how BetterPoints Sheffield members arrive at the hospitals – data shared with STH regularly and recently shared with Footways and Living Streets to inform their Walking Pilot, which aims to improve walking routes to the Northern General Hospital.

📋 Shared a referral code on the last page of the Staff Travel Survey 2024 with a call-to-action to register and enter the code to go into the draw for a range of prizes – this was entered by 320 colleagues.

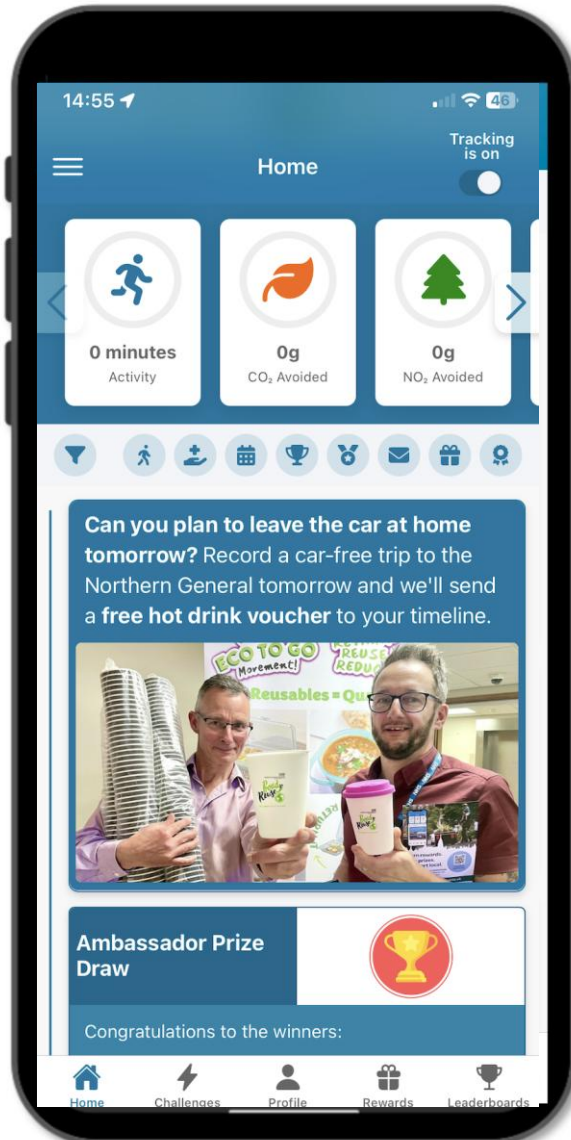
🚲 Delivered Urban Cycle Skills webinars twice this year with the aim of encouraging colleagues to book a 1-2-1 session with a local instructor to build their confidence to ride to work.

✅ Staff Travel Survey 2025 we did the same as the previous year but had a lower return: 125 colleagues entered the code.





Our partnership: what's next



Contribute to active travel strategy to be launched 2027



Closer collaboration with other NHS Trusts in the city and wider networking (and 'netwalking'!)



Use the voucher as an incentive – 'Leave the Car for Coffee'



More engagement events and new ways to communicate to colleagues

Get in touch



Jack Windle

**Chief Sustainable Transport
Officer**

Email: jack.windle@betterpoints.uk

Laura Fish

Sustainable Travel Manager

Email: laura.fish1@nhs.net



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Panel Discussion



Janet Smith

Head of Sustainability
Royal Wolverhampton NHS Trust and Walsall
Healthcare NHS Trust



Dr Gurnak Singh Dosanjh

GP
LLR ICB



Richard Charter

Founder & Managing Director CHLOE
Healthcare Advisory Group, Senior Advisor to
Vamstar, CHLOE Healthcare Advisory



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Food, Drinks & Networking