

Report to:	BSW ICB Board – Meeting in Public	Agenda item:	9b
Date of Meeting:	20 November 2025		

Title of Report:	BSW Green Plan 2025-2028
Report Author:	Hannah Massey, Estates Change Manager
Board / Director Sponsor:	Gary Heneage, Chief Finance Officer
Appendices:	1. BSW Green Plan 2025-2028 2. Stakeholder engagement record

Report classification	Please indicate to which body/collection of organisations this report is relevant. <i>Only one of the below should be selected (x)</i>
ICB body corporate	
ICS NHS organisations only	
Wider system	X

Purpose:	Description	Select (x)
Decision	To formally receive a report and approve its recommendations	X
Discussion	To discuss, in depth, a report noting its implications	
Assurance	To assure the Board that systems and processes are in place, or to advise a gap along with a remedy	
Noting	For noting without the need for discussion	

BSW Integrated Care Strategy Objective(s) this supports:	Select (x)
1. Focus on prevention and early intervention	X
2. Fairer health and wellbeing outcomes	X
3. Excellent health and care services	X

Previous consideration by:	Date	Please clarify the purpose
Various Stakeholders	Aug – Sept 2025	Draft plan shared with a wide range of stakeholders to receive feedback to support its finalisation.
Formal Executive Management Meeting	15 Oct 2025	Executive colleagues endorsed the draft plan going to Finance & Infrastructure Committee and ICB Board for approval.
Finance & Infrastructure Committee (FIC)	05 Nov 2025	Plan was scrutinised and approved by FIC with recommendation given for approval at the November ICB Board.

1	Purpose of this paper
	<ul style="list-style-type: none"> Share the updated BSW Green Plan with the ICB Board. Provide an overview of the plan including stakeholder engagement. Obtain ICB Board approval for the BSW Green Plan.

2	Summary of recommendations and any additional actions required
	<p>The refreshed Green Plan is written in line with NHS England (NHSE) guidance. As well as providing an overview of our achievements to date and case studies from our partners, the plan also focuses on key delivery areas over the next three years. These include:</p> <ul style="list-style-type: none"> • Workforce & Leadership • Digital Transformation • Medicines & Medical Gases • Travel & Transport • Estates & Facilities • Supply Chain & Procurement • Food & Nutrition • Adaptation • Green Spaces for Health <p>Approach</p> <p>A stocktake exercise was undertaken with stakeholders to understand progress made to date against our original plan, identifying areas that worked well and areas that required strengthening. Local Authorities were engaged to understand where the plan could support delivery of Local Authority and Combined Authority plans and the project team worked closely with Trust leads to ensure their organisational Green Plans are aligned with our system ambitions. An extensive amount of engagement was undertaken to ensure the refreshed plan is recognised and owned by system partners, and colleagues within the ICB. This was completed through a series of 1:1 meetings with key individuals across health and local authority organisations and an in-person planning workshop with system sustainability leads, who have all helped shape the plan.</p> <p>Key Areas for Strengthening</p> <p>To maximise delivery, the refreshed plan identifies several areas for strengthening:</p> <ul style="list-style-type: none"> • System & ICB Ownership Engagement with stakeholders indicated that environmental sustainability is not well understood across organisations. Environmental sustainability needs to be owned and embedded into all areas of business across our system, and within the ICB, if we are to be successful in achieving the desired carbon reductions. • Commissioning Requirements The plan outlines the need to review existing business documentation to ensure environmental sustainability is featured and seek to make support tools (i.e. training) available to colleagues. • Governance / Reporting

ICB governance and reporting on environmental sustainability needs to be strengthened to ensure oversight and assurance. The Green Plan proposes that a new reporting schedule is implemented whereby a six monthly and annual performance report are shared to review progress (see recommendation below).

Recommendations

1. ICB Board approves the BSW Green Plan.
2. Implement reporting schedule to provide oversight and assurance - six monthly basis to FIC and an annual basis to ICB Board.
3. Compliance with Taskforce on Climate-related Financial Disclosures requirements (as set out in sections 3 and 6).

3 | Legal/regulatory implications

NHSE Green Plan Guidance March 2025

This guidance requires all ICBs and NHS Trusts to update their Green Plans with ICBs leading on the refresh of system green plans. This is a mandated requirement with NHSE expecting all refreshed system Green Plans to be approved by ICB Boards and published by December 2025.

Task Force on Climate-related Financial Disclosures (TCFD)

The Department of Health and Social Care (DHSC) requires NHS bodies to incorporate the recommended TCFD, into their Group Accounting Manual. This requires a multiorganizational response with input from various ICB directorates including finance, contracting, corporate and EPRR. This requirement is reflected in the plan with the expectation that these directorates will support its completion as part of annual ICB reporting.

4 | Procurement

The BSW Green Plan is not seeking to procure any services.

Procurement sign off	ICS Procurement Team, SFT
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5 | Risks

There are no risks relating to environmental sustainability / climate adaptation within our BAF or Corporate Risk Register.

6 | Quality and resources impact

The plan outlines key actions that the ICB, and system partners, should seek to undertake over the next three years to reduce our carbon footprint. Completion of

these actions will require colleagues from across the ICB, and broader system, to work collaboratively to achieve them. The delivery of this plan will have an impact on resources across the organisation and wider system as we look to embed environmental sustainability into our BAU practices.

The DHSC Group Accounting Manual mandates that ICBs integrate TCFD obligations and demonstrates how net zero ambitions are embedded into its financial statements. ICBs and NHS Trusts must also ensure that environmental sustainability considerations are reflected within Joint Capital Resource Use Plans as part of the NHS planning cycle. Where funding opportunities become available, the ICB will endeavour to collaborate with partners to apply for funding to support green initiatives that benefit the system (i.e. NHSE green capital funding).

Finance sign-off

Gary Heneage, Chief Finance Officer

7 Implementation Plan Alignment

Environmental sustainability is a far-reaching area that impacts all parts of our business. The plan recognises this and outlines key actions that the ICB, and system partners, should seek to undertake over the next three years to provide better health outcomes for our population aligned to the Implementation Plan.

8 Confirmation of completion of Equalities and Quality Impact Assessment

An EQIA has been completed as part of this project.

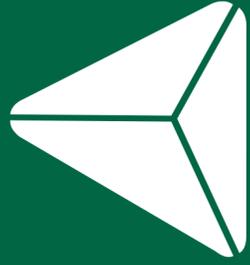
9 Communications and Engagement Considerations

The project team has undertaken extensive engagement with a range of stakeholders. A record of engagement activities is included as a separate appendix. Key engagements to note:

- Local Authority Sustainability Leads (BaNES, Swindon and Wiltshire) meeting on 03 September. The plan makes a commitment to extend an invite to our existing Greener BSW health meeting to local authority colleagues to strengthen information sharing, learning and collaboration around our respective plans.
- System Sustainability Leads engaged throughout the development of the plan. Leads have been asked to update their organisations on the plan.
- 1:1 sessions held with ICB colleagues who will be key to enabling delivery of the plan. This also includes the completion of the TCFD.
- Draft plan shared with Tobin Savage, NHSE Sustainability Delivery Lead for the South West, who provided positive verbal feedback, indicating that the plan meets the requirements outlined in the guidance.
- BSW ICB Comms Team engaged with arrangements in place to publish the plan on our website and promote it post Board approval.

10 Statement on confidentiality of report

This paper does not contain any confidential information.



Bath and North East Somerset,
Swindon and Wiltshire Together



Bath and North East Somerset, Swindon and Wiltshire Integrated Care System

BSW Together Green Plan 2025-2028



Introduction

- Foreword
- Executive summary
- Introduction – Why do we need a Green Plan?
- About us

Our aims

- What are we trying to achieve?
- Where are we now?

How we will get there

- Workforce & System Leadership
- Digital Transformation
- Care Model Transformation
- Medicines and Medical gases
- Travel & Transport

- Estates and Facilities
- Supply chain and procurement
- Food and nutrition
- Adaptation
- Green space and biodiversity
- Roadmap

How we will track progress

- Governance and Accountability
- Data and metrics
- Reporting

How you can help to inform our strategy

- Get in Touch

Appendices

- Appendix 1 – Glossary
- Appendix 2 – Abbreviations
- Appendix 3 – Key metrics
- Appendix 4 – Key national and local strategies

Foreword

In an era where the urgency of addressing climate change has never been more pressing, the development and implementation of a comprehensive Green Plan is not just a statutory requirement, but a necessity.

This document builds on our previous Bath and North East Somerset, Swindon and Wiltshire (BSW) Together Green Plan and the great progress made so far. This second iteration of our Green Plan represents a significant step forward in our collective efforts to create an environmentally sustainable and climate resilient BSW health service.

Achieving environmental sustainability is a complex task that requires collective action. At the same time, we are facing a very challenging financial climate and need to do more with less. Spending within our means is one of our driving principles, guiding us to maximise available resources and deliver healthcare that is environmentally, socially, and financially sustainable in the long term.

This Green Plan outlines our strategic approach to reducing our environmental impact, enhancing our resource efficiency, and fostering a culture of environmental

responsibility within our NHS operations and beyond. Our vision is clear: to lead by example in the pursuit of environmental stewardship. This plan sets forth our goals, strategies, and actions that will guide us in achieving our sustainability objectives. From reducing emissions and pollution, to conserving water and minimising waste, every aspect of this plan is designed to contribute to a healthier planet and a healthier BSW population.

We recognise that the path to sustainability is a continuous journey, one that demands innovation, dedication, and a willingness to adapt. As we move forward, we are committed to regularly reviewing and updating this plan to ensure it remains relevant and effective in addressing the evolving environmental challenges we face.

I would like to extend my gratitude to all those who have contributed to the development of this Green Plan. Your expertise, passion, and hard work have been invaluable in shaping this document. Together, we can make a meaningful difference and pave the way for a sustainable future for generations to come.

Thank you for your commitment to our shared vision.

Gary Heneage

Chief Finance Officer and Net Zero Executive Lead,
BSW Integrated Care Board



Executive summary

The BSW Green Plan 2025–2028 sets out a comprehensive strategy to deliver sustainable healthcare and achieve net zero emissions in alignment with national NHS targets.

It builds on our previous BSW Green Plan and the great progress made so far. As leading anchor institutions in BSW we recognise our collective responsibility to reduce our environmental impact, build climate resilience, and improve population health through environmentally sustainable practices.

Our Green Plan outlines ten key areas of focus:

- **Workforce and Leadership** – Empowering and mobilising all colleagues and leaders to contribute to the delivery of more environmentally sustainable healthcare.
- **Digital Transformation** – Leveraging digital to enhance care delivery whilst reducing the impact of the technology we use.
- **Care Model Transformation** – Shifting to preventative, out-of-hospital, digitally enabled and environmentally sustainable care models.

- **Medicines and Medical Gases** – Reducing the impact of our prescribing and use of anaesthetic gases by prescribing alternatives and reducing waste.
- **Travel and Transport** – Making our journeys more environmentally sustainable by supporting a shift to active travel, public transport and electric vehicles.
- **Estates and Facilities** – Modernising the NHS estate, decarbonising buildings, improving energy efficiency, and embedding net zero design in new developments.
- **Supply Chain and Procurement** – Aligning with the [NHS Net Zero Supplier Roadmap](#) and promoting circular economy principles.
- **Food and Nutrition** – Promoting healthy, local, and seasonal food wherever possible, while reducing waste and reducing emissions.
- **Adaptation** – Making our healthcare system ready for climate change by planning ahead and investing in solutions which will help us adapt.
- **Green Space for Health** – Enhancing biodiversity and creating therapeutic environments for recovery and wellbeing.

Delivering our Green Plan

Significant changes are underway across the NHS, including reforms to the structure and function of Integrated Care Boards (ICBs). The ICB will cluster with neighbouring Somerset and Dorset ICBs under a single

management structure, with a formal merger expected in 2027.

Accordingly, this document is a ‘live’ plan that will be regularly reviewed to reflect evolving operating models and priorities. The Green Plan will be overseen by the ICB’s designated net zero board-level executive lead via the ICB Finance and Infrastructure Committee and the ICB Board, with governance adapted as needed to align with these ongoing changes.



Why do we need a Green Plan?

The climate emergency is a health emergency.

The climate and ecological emergency have serious direct and indirect consequences for health. Air pollution is estimated to contribute to [38,000 premature deaths](#) annually in the UK and best estimates suggest that over one-third of new asthma cases could be avoided if we tackle air pollution.

In the UK, climate change is expected to cause more severe and frequent extreme weather, with heat-related deaths projected to rise to around [11,000 per year](#) by the 2050s. Extreme cold snaps and increasingly frequent and severe rainfall leading to flooding, are also exacerbating existing health issues and making it harder to deliver essential healthcare services.

The climate emergency and air pollution also disproportionately affect disadvantaged and vulnerable populations and worsen health inequalities. For example, those living in more deprived areas are more likely to live in high traffic, more densely populated areas and be exposed to worse air quality. Likewise, low-income households including older people are more at risk of

‘fuel poverty’ and living in cold, damp homes; increasing the risk of respiratory illnesses, cardiovascular problems, and mental health issues.

The NHS feels the strain of these health implications; taking action on climate change not only helps the planet, it also helps strengthen the NHS resilience by protecting health and reducing avoidable demand on services.

In delivering healthcare services we use energy, travel and produce waste which has a negative impact on our planet through using up resources, creating pollution and damaging our natural ecosystems.

The NHS is responsible for around 5% of the UK’s carbon emissions and 3.5% of all road travel; we therefore have a unique responsibility and opportunity to lead the way in delivering more environmentally sustainable healthcare.

This is why the NHS is taking action to reduce the impact we have on the environment, ensuring we are part of the solution, not the problem. We need to reduce our contribution to climate change, so it helps protect people’s health in the long run.

We aim to do this by transforming healthcare services to deliver world class-care, whilst minimising the impact we have on the environment. By doing this we can ensure that the care we provide today protects the health of tomorrow.

A Net Zero NHS

In 2020, the NHS published [‘Delivering a Net Zero NHS’](#) strategy and committed to become the world’s first net zero health service. This ambition became enshrined in law through the Health and Social Care Act in 2022.

Achieving a net zero health service means delivering health and care services that don’t add ‘emissions’, in other words extra pollution from harmful gases, into the atmosphere and contribute to the climate emergency. There are two key national targets for the NHS to meet net zero:

- Reduce 80% of emissions it controls directly by 2028–2032 and reach net zero by 2040.
- Reduce 80% of emissions it can influence by 2036–2039 and reach net zero by 2045.

Figure 1 shows the major NHS sources of emissions that we need to reduce to achieve these goals. This is made up of:

Emissions the NHS controls directly (NHS Carbon Footprint) – from our buildings, vehicles, and some medicines (such as anaesthetic gases and inhalers).

Emissions the NHS can influence (NHS Carbon Footprint Plus) – from everything we buy, build or use and the way our colleagues and patients travel.

Figure 1: The NHS carbon footprint and carbon footprint plus emissions. Source: 'Delivering a Net Zero NHS'

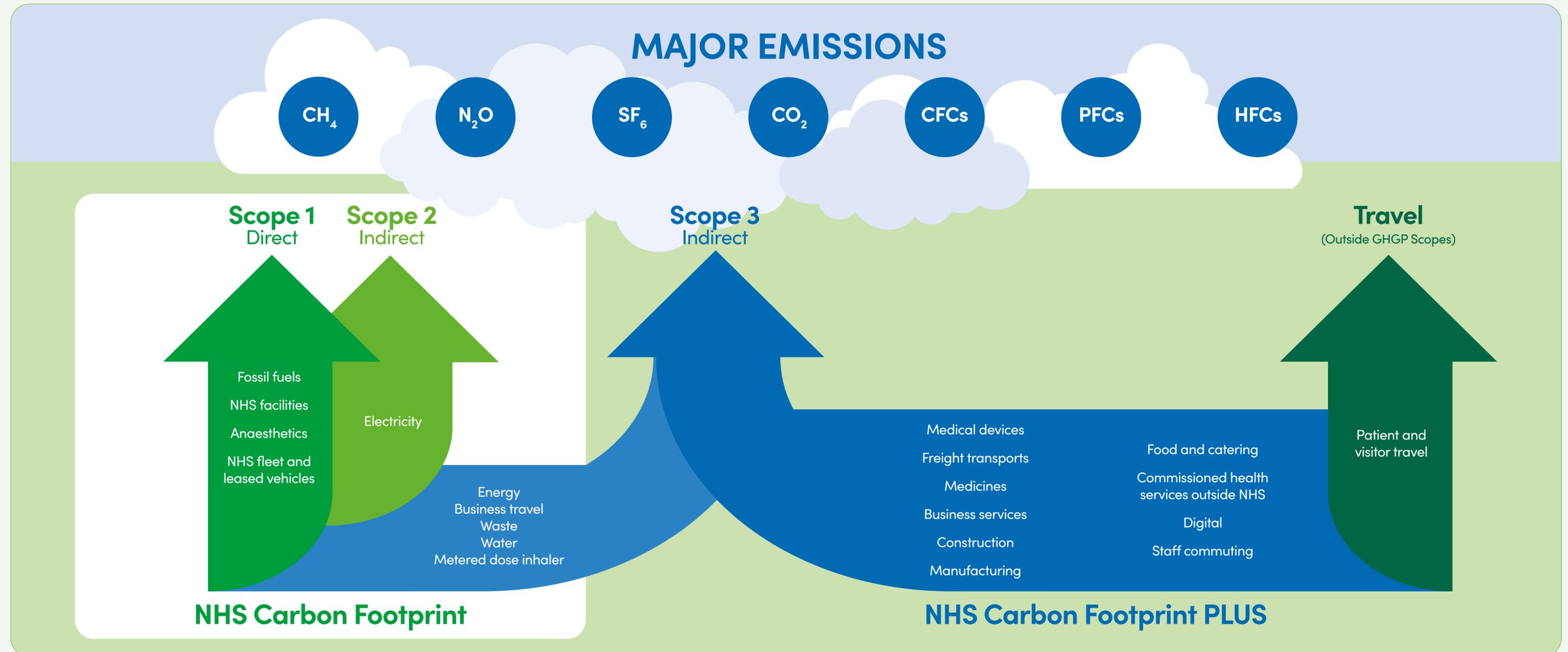
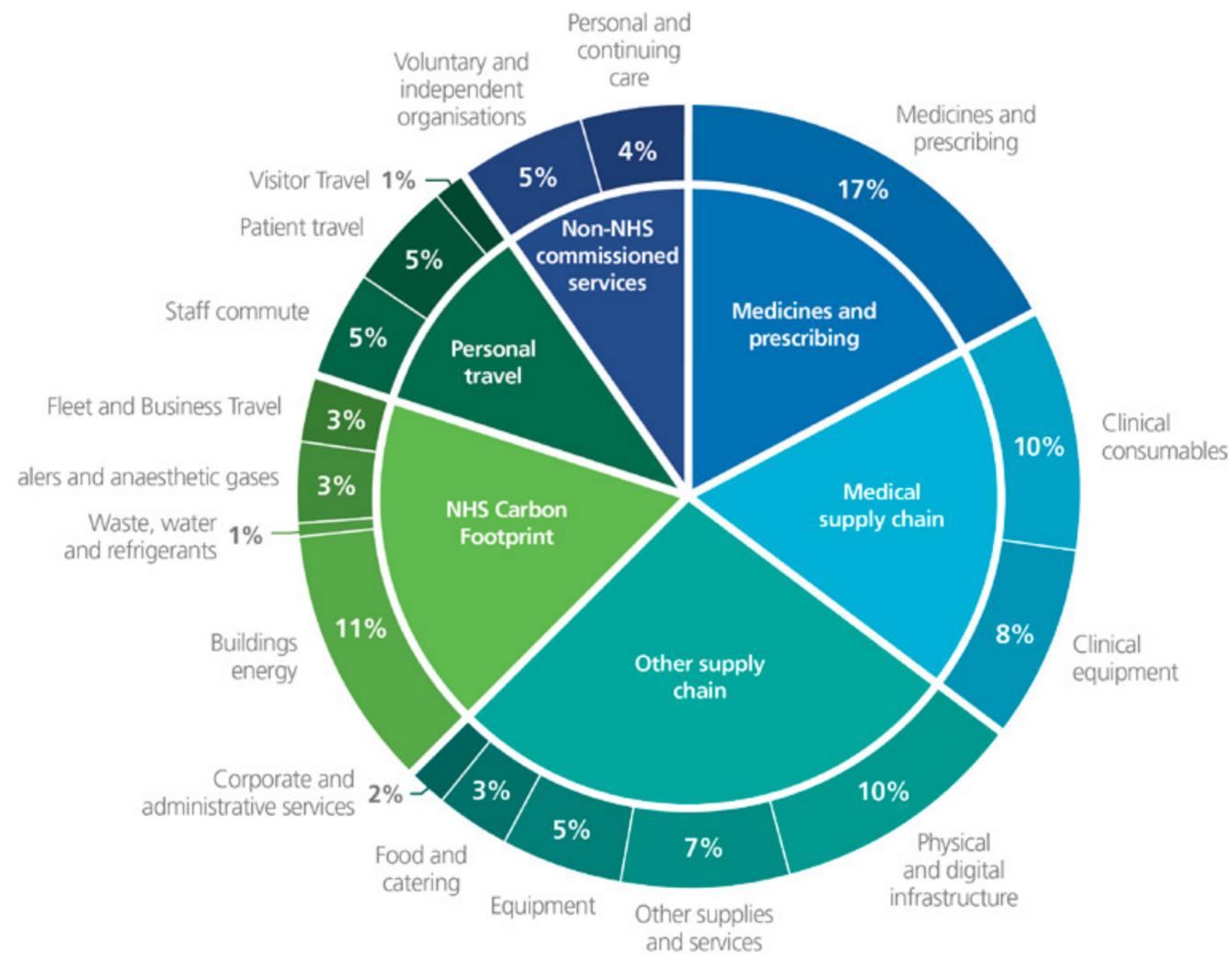


Figure 2 shows the estimated carbon footprint of the NHS and the areas where the biggest opportunities are. For example, over 62% of the overall carbon footprint is made up of the things we buy in delivering care (our supply chain and medicines).

Figure 2: a breakdown of emissions by proportion of the NHS Carbon Footprint Plus, represented as a pie chart

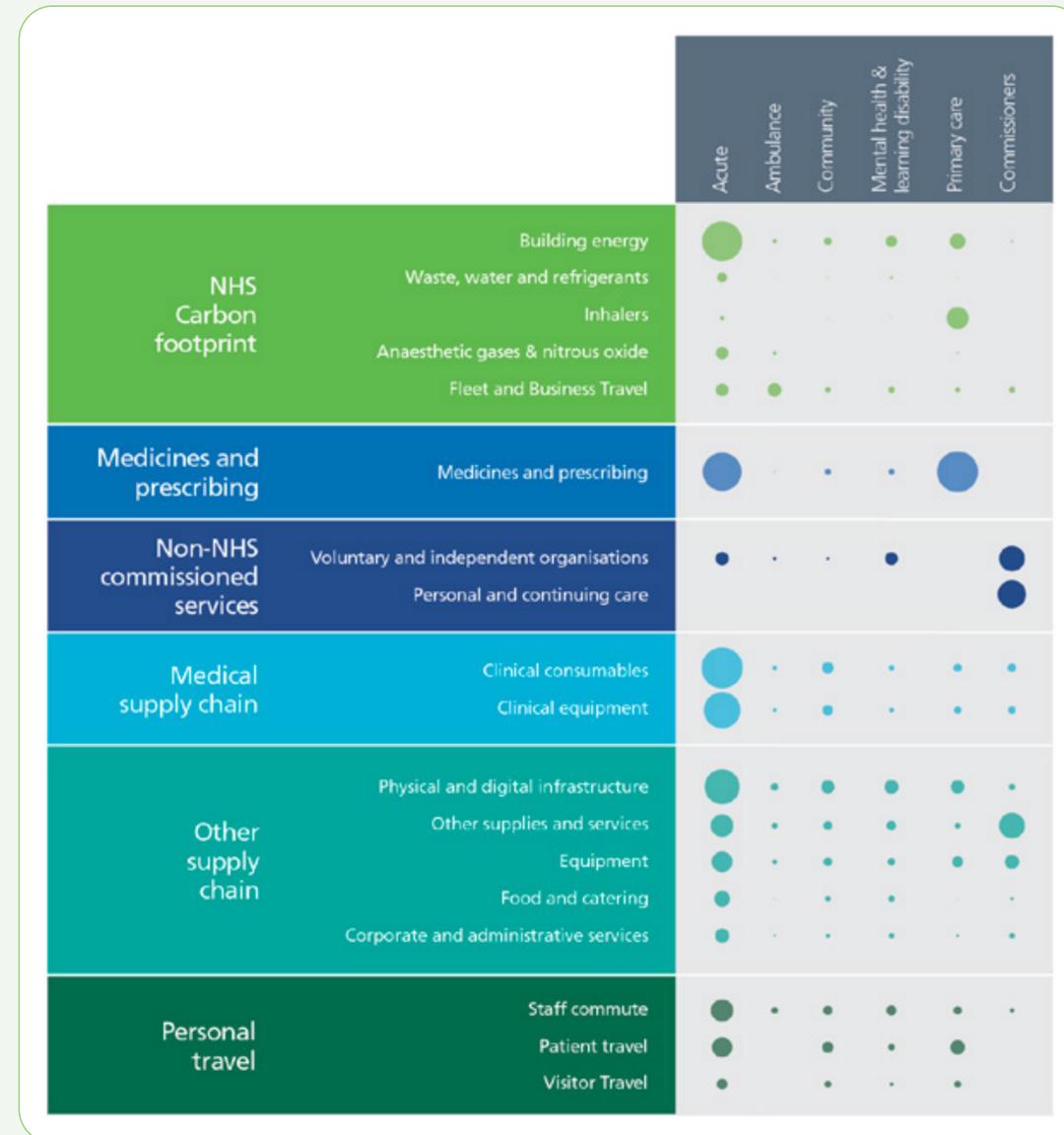


Source: [NHS England – Five years of a greener NHS: progress and forward look](#)

INTRODUCTION

Figure 3 shows how the opportunities for reducing our impact on the environment vary depending on the healthcare setting.

Figure 3: Carbon ‘hotspots’ per healthcare activity type



For example, our hospitals are the biggest source of emissions due to the acute nature of their operations requiring much more energy, medicines and medical equipment whilst another big area for action is the medicines we prescribe and use in 'Primary Care', particularly our GPs and pharmacies.

National strategic context and priorities

The recently released [10-Year Health Plan for the NHS](#) reconfirms the NHS's commitment to net zero, and describes three major shifts in the way we deliver care required to transform the NHS into a health service that is fit for the future:

From illness to prevention – focusing on preventing sickness, not just treating it and empowering people to make healthy choices.

From analogue to digital – making better use of technology, harnessing the digital revolution to create the most digitally accessible health system in the world.

From hospital to community – moving care from hospitals to communities, creating an integrated 'Neighbourhood Health Service', designed around our communities.

Maximising the opportunities to build a more sustainable healthcare through the three big shifts will achieve positive transformative change for health, health and care services, and the environment and is essential if we are going to maintain and improve patient care in the future.

These strategic transformation priorities form the corner stone of our local health and care strategies and our focus on healthcare transformation in this plan.

Local strategic context and priorities

In July 2023 BSW published its first '[Integrated Care Strategy](#)', setting out the ambitions of health and care partners to improve services for local people.

The strategy set out a vision for the next five years to 'listen and work effectively together to improve health and wellbeing and reduce inequalities', uniting partners behind three clear objectives.

These are:

1. Focus on prevention and early intervention – shift more resources to preventing ill health (prevention), enabling people to stay well, intervening earlier, and targeting the wider determinants of health.

2. Fairer health and wellbeing outcomes – reduce inequalities; ensure that services, resources and policy respond proportionately to the needs of different populations; implement the CORE20PLUS5 framework to target high-need groups.

3. Excellent health and care services – making sure that when people do need health or care services, they are high quality, timely, responsive, well-coordinated and mentally as well as physically supportive. Key themes also include

personalised care, joined up local teams, good specialist services, and mental health parity.

This strategy highlights the importance of addressing the wider determinants of health such as housing, employment, transport, and community safety to improve both physical and mental wellbeing across BSW. It emphasises the strong link between the environment we live in and our health, and the role of coordinated efforts across sectors like the NHS, local authorities, and community organisations.

The approach focuses on creating healthier communities with some key commitments to expand green spaces, promote cleaner transport, improve air quality and improve access to warm, decent homes.

One of the key enabling functions that underpins this strategy is therefore to improve our local environment, recognising that taking action to reduce emissions and limit our contribution to the climate emergency can help us address the wider challenges that the NHS is facing and vice-versa.

If we take action to protect our planet by reducing emissions and enhancing nature, we can reduce air pollution, improve our environment and keep people healthier for longer.

Overview of BSW Together

BSW Together is an integrated care system (ICS) made up of NHS, local authority and voluntary sector organisations working together to improve the health and wellbeing of local people, ensure that health and care services are high-quality and make the most efficient use of our resources.

Located in the South West of England, BSW Together serves a population of 940,000 across a large area of 1,511 square miles, with a complex and varied geography of cities, market towns and rural areas.

This includes the densely populated and growing town of Swindon to the north, the historic city of Bath, Salisbury plains to the south and the rolling Mendip Hills to the west.

BSW Together works at three levels:

- At a System level.
- Across three places each represented by place-based partnerships called Integrated Care Alliances (ICAs) to ensure our health and care services meet the needs of the different communities living across BSW. The ICAs are defined by the boundaries of the Local Authority areas for Bath and North East Somerset, Swindon and Wiltshire.
- At the heart of communities within neighbourhoods across twenty-eight Primary Care Networks (PCNs) covering local populations of 30,000 – 50,000.



Health and care provided by:

3 Local Authorities	84 GP Practices
3 Acute Trusts	268 Care Homes
1 Main Community Provider	1 Ambulance Service Provider
2 Mental Health Providers	127 Pharmacies, 184 Dental Practices, 110 Opticians

BSW Together – Our Partners

The partner organisations that make up BSW Together are working to improve the health and wellbeing of local people, tackle inequalities, achieve better outcomes and access for everyone, ensure that health and care services are of high quality, and make the most efficient use of our resources.

NHS Health and Care

NHS England
 NHS BSW Integrated Care Board
 Avon & Wiltshire Mental Health Partnership NHS Trust
 Great Western Hospital NHS Foundation Trust
 Royal United Bath NHS Foundation Trust
 Salisbury NHS Foundation Trust
 Oxford Health NHS Foundation Trust
 HCRG Care Group
 HealthHero Integrated Care
 General Practices
 Pharmacies, Opticians, Dental Practices
 Wessex Local Medical Committees

Emergency Services

Fire and Rescue Services
 South-Western Ambulance Service NHS Foundation Trust
 Wiltshire and Avon & Somerset Police

NHS Property Companies

NHS Property Services

Voluntary Sector

Healthwatch
 Voluntary, Community, Social Enterprise Sector

Local Authorities

Bath and NE Somerset Council
 Swindon Borough Council
 Wiltshire Council
 West of England Combined Authority

Education and Research

Health Innovation West of England
 Higher Education and Research
 Natural England

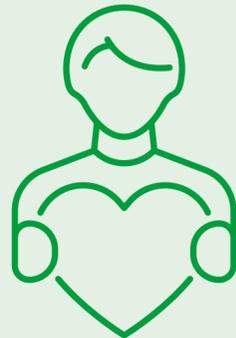
BSW Population Health

The health and care needs of people living in Bath and Northeast Somerset, Swindon and Wiltshire are changing, with more people living longer, often with multiple long-term conditions. The health needs of local people vary across our area. A case for change has been developed which aims to describe why we need to change the way we deliver healthcare to meet the expected future needs of the population and support better outcomes of our residents.

Here is a snapshot and some areas of concern:

3,000

children and young people live with 2 or more long-term conditions.



33%

of year 6 children are overweight or obese.



Under 18s

acute hospital admissions for mental health conditions consistently higher than national average.



6%

population growth in 15 years.



35%

growth in the over 60 population.



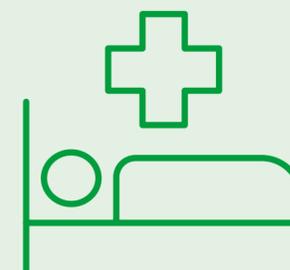
£5m

per year cost pressure on Acute Inpatient, Outpatient and A&E activity through demographics alone.



115

additional acute bed demand in 5 years driven by demographic changes.



57%

increase in adults over 65 requiring care in 15 years.



Developing our Green Plan

Purpose

In 2022, the first BSW Green Plan set the strategic direction for reducing the environmental impact of our healthcare services and achieving net zero, in line with NHS goals.

Following new national guidance from NHS England in February 2025, we are refreshing our Green Plan to reflect recent policy changes, our future focus and our progress to date. This refreshed plan builds on the excellent work delivered to date and sets out the strategic framework and key system-level actions for the next three years to reduce the environmental impact of our healthcare services.

Our key aim is to build a sustainable health system for future generations and enable everyone delivering health and care services across BSW to contribute effectively.

Scope

This plan is primarily intended for NHS statutory bodies such as the ICB and Trusts to deliver. However, we acknowledge that delivering a truly environmentally sustainable health system will require action and collaboration beyond NHS statutory bodies.

Where joint effort is required, we outline how we'll work with others across the health and care system, including primary care and private providers to achieve our ambitions. Trusts are also required to have their own Green

Plans; this BSW Green Plan doesn't replace them but it is intended to confirm collaborative actions and timelines. It builds on existing plans and focuses on where working together can add value, speed up progress to net zero, and support collaboration and best practice across the system.

Who was involved

The key focus areas for action outlined in this plan have been developed in partnership with organisations across BSW through engagement via existing collaboration arrangements as well as directly with the sustainability leads and other key stakeholders of our partner organisations.

This includes sustainability leads from our NHS trusts, representatives from our community services and out of hours providers, ICB leads for specific key focus areas such as digital, primary care and medicines, local authority sustainability leads and other key organisations such as Natural England.

A key aim throughout this process has been to ensure the work already being delivered across the region informs this Green Plan, BSW Together partners are signed up to the shared vision and high-level commitments set out in this plan and that we share learning and continually look for opportunities to improve.

Reviewing this plan

It is important to acknowledge the level of change currently underway within the wider NHS, with some extensive reforms being announced including a review of the form and function of the Integrated Care Board and other NHS bodies.

BSW ICB will be clustering under a single management structure with its neighbouring ICB's in Somerset and Dorset and is likely to formally merge organisations in 2027.

This document should therefore be treated as a 'live' document, that will need to be reviewed in line with any future proposed changes to operating models in the region.

Working together as a health and care system to deliver this plan

To achieve the net zero NHS ambitions, collaboration among all BSW Together partners is crucial.

This includes working with NHS service providers, local and combined authorities, local transport providers, the Voluntary, Community and Social Enterprise Sector (VCSE), and local communities. The approach will need to be underpinned by clear governance, system-wide assurance processes, and expanding existing collaboration networks.

The Integrated Care Board – Our role as strategic commissioners

The ICB is responsible for planning and arranging health and care services to meet the needs of the population. It aims to transform local health and care systems to be more joined-up, equitable, preventative, and environmentally sustainable.

The ICB will embed green plan and health priorities across BSW health services by planning and commissioning and contracting sustainable NHS services, aligning Green Plan priorities with broader system strategies which are shaped by key stakeholders including patients and colleagues.

Working with our Primary Care providers (including Out of Hours)

We aim to support primary care providers to contribute to system-wide emissions reductions. Workshops have been held with GP practices in BSW to raise awareness of environmental sustainability and to identify opportunities to reduce emissions.

All Primary Care Networks (PCNs) have been encouraged to sign up to the Green Impact for Health Toolkit. We hope to build on this by learning from other systems and working with PCNs to identify further opportunities to support. Opportunities to explore include improving energy efficiency, reducing overprescribing of medicines, and continuing to support low-carbon asthma care. Taking action in these areas will not only contribute to net zero, but will also reduce costs and improve patient outcomes.

Our out of hours services provider, HealthHero Integrated Care, is already contributing to the ambitions described in this plan through their Carbon Reduction Plan, for example, through increasing digitally-enabled care provision and delivering initiatives to reduce the impact of their estates and fleet.

We aim to continue to work collaboratively to further drive environmental sustainability in the delivery of their contract to support the ambitions set out in this plan.

Working with our NHS Trusts – our hospitals and mental health providers

NHS Trusts play a key role in delivering the Green Plan and have already made great strides in delivering key initiatives, examples of which you will find throughout this plan.

In BSW, three Trusts provide hospital services. These are, Great Western Hospital NHS Foundation Trust (GWH) in Swindon, Royal United Hospitals Bath NHS Foundation Trust (RUH) in Bath and Salisbury NHS Foundation Trust (SFT) in Salisbury. Mental health services are provided by Oxford Health NHS Foundation Trust (OHFT) and Avon and Wiltshire Mental Health Partnership NHS Trust (AWP).

The BSW Hospitals Group

In 2025 the three NHS hospital trusts in the Bath and North East Somerset, Swindon, and Wiltshire (BSW) formalised their partnership and formed the BSW Hospitals Group under a single Chief Executive. The BSW Hospitals Group collaborates to deliver coordinated acute hospital services and represents a big opportunity to drive environmental sustainability in hospital operations. The hospitals have already been working together with key partners to drive some key opportunities including through joint procurement activities, moving appropriate services including outpatients closer to where people live, and undertaking joint climate risk assessment and adaptation planning.

Working with our community services providers

HCRG Care Group provides our children, young people's and adults community services. HCRG is already contributing to the ambitions described in this plan through delivery of their Carbon Reduction Plan and key sustainability commitments in the community services contract.

Engagement with HCRG in the development of this plan highlighted that there are some specific challenges for community services to become more environmentally sustainable. For example, leasing arrangements for buildings mean they will need to work collaboratively with the ICB to influence landlords such as NHS Property Services.

However, there are some key areas where focused action and working collaboratively will support the ambitions set out in this plan. For example, reviewing how community care services are delivered, moving to digitally enabled access to services, care at home or closer to home where clinically appropriate, and exploring more environmentally sustainable travel options for community healthcare workers.

Working with our wider partners

Although most of the actions within this plan are for organisations providing NHS services, collaboration with wider partners, such as local and combined authorities, local transport providers, other ICBs and VCSE, is vital for

achieving our joint goals. We also recognise the role of the West of England Combined Authority (WECA) in supporting collaboration on transport, infrastructure, and climate initiatives across Bath and North East Somerset, Bristol and Somerset areas and will seek to align our efforts where appropriate.

Local authorities in BSW have been leading the way and taking action to reduce their environmental impact for some years now.

We aim to align with existing strategies such as the ['Swindon Plan'](#), Wiltshire Council's ['2022 Climate Strategy'](#), and BANES ['Climate Emergency Strategy'](#) to drive joint working opportunities and alignment.

Through engagement in the development of this plan with key sustainability leads across the three local authorities, we identified some key areas of opportunities.

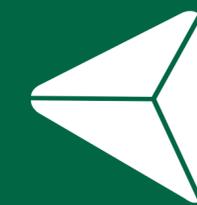
These included creating healthier communities via public health initiatives, aligning on infrastructure planning such as local energy and decarbonisation plans, electric vehicle charging infrastructure and public transport plans, improving green spaces in line with local nature recovery strategies and supporting local economic growth and community development as part of our role as anchor institutions.

We will also actively collaborate with local authorities to embed net zero principles into spatial planning and

policy frameworks, recognising the critical role of the built environment in shaping health outcomes.

This includes supporting the integration of NHS net zero targets into Local Plans, promoting sustainable development, low-carbon infrastructure, and healthy place-making.

Through joint working on planning policy, transport, housing, and retrofit strategies, we aim to ensure that future development contributes to climate resilience, reduces health inequalities, and supports the delivery of our Green Plan and Integrated Care Strategy.



Bath and North East Somerset,
Swindon and Wiltshire Together

What are we trying to achieve?

Our refreshed BSW net zero targets

In our previous Green Plan, we outlined our net zero goal for 60% of BSW Together partners to achieve net zero by 2030 for the emissions we control.

It is important to note that despite making significant progress we have collectively reviewed our commitments and have rephased our original 2030 target for some organisations to align to the wider NHS 2040 target.

Aligning towards a common target across the system will allow us to combine resources and maximise opportunities to achieve our joint goals.

Our new net zero targets as a system are now in line with the NHS net zero targets:

- For the emissions we control directly, reach net zero by 2040, with an 80% reduction by 2028–2032.
- For the emissions we can influence, reach net zero by 2045, with an 80% reduction by 2036–2039.

Wherever possible we will strive to meet reduction targets sooner.

Our Green Plan Vision – A greener more environmentally sustainable BSW health system

Our vision is to develop a healthcare system which protects our planet as well as our people. This is not just about reducing emissions, this is about protecting nature, limiting pollution and improving the lives of people in BSW now and for future generations.

This is our vision for delivering environmentally sustainable health and care services for our communities:

Prevention and health creation

People are supported to stay well for longer through early intervention and creating communities that support wellbeing e.g. through reducing air pollution, promoting active travel, warm homes, access to greenspaces. This reduces the environmental impact of unnecessary treatments and hospital admissions, whilst improving outcomes and reducing inequalities.

Digitally Enabled Services

Access to appointments, results and online consultations through the NHS app, video calls or remote monitoring, avoiding travel while still receiving high-quality care.

Holistic patient centred care

Services are easy to navigate and coordinated around the patient. People are supported to take an active role in managing their health through education and shared decision-making.

Integrated care closer to home

When people need support it can be delivered at home or in the local community with access to specialist facilities when required. This reduces the need to travel to get the care people need.

Environmentally Conscious Healthcare Facilities

Healthcare sites are energy efficient, powered by renewable energy, reduce waste and water consumption; and are easy to reach by greener transport options. Think solar panels, efficient lighting, public and active transport, green spaces that support health and wellbeing as well as local nature.

Sustainable healthcare practices

The medicines and equipment we use are kind to the environment. For example, by reducing reliance on single-use products and reusing, repurposing and recycling where possible.

Collaborative Workforce Focused on Sustainability

Healthcare colleagues are trained not only in clinical care but also in environmentally sustainable practices, embedding environmental responsibility into their day-to-day work.

Where are we now?

Our progress so far across the system

Since publishing our first BSW Green Plan, we have made significant progress in delivering environmental sustainability initiatives across BSW. Some key achievements against the commitments made in our previous Green Plan include:

Workforce and Leadership



- Hundreds of healthcare colleagues form part of green networks and working groups across BSW.
- NHS organisations have net zero board level leads.

Travel and transport



- Air quality monitoring installed at SFT and RUH to improve on-site air quality.

Supply Chain & Procurement



- 10% social value weighting is now mandatory in all NHS procurement tenders and suppliers are required to provide evidence to show they are aligned to our net zero goals.

Estates and Facilities



- Increased investment in renewable energy. 1.2 MW of solar capacity achieved at AWP, this is one of the highest energy outputs from solar among similar Trusts.
- Trusts are developing plans to move away from fossil fuel heating. RUH has secured £21 of grant funding for decarbonisation of buildings.
- Devizes Integrated Care Centre is the first net zero building with energy EPC rating of a+, which utilises green technology, such as heat pumps and solar panels, to generate energy and heat to serve the building, which opened in February 2023, and will soon be opening our next Net Zero Integrated Care Centre in Trowbridge in January 2026.

Medicines Management



- Trusts have successfully stopped using desflurane across BSW.
- Achieved target of benchmarking in the lowest 10% for metered dose inhaler prescriptions compared to other regions.

Digital Transformation



- Virtual outpatient appointments successfully rolled out where clinically appropriate. 21-23% outpatient appointments at SFT are delivered remotely.
- Reduced our paper use. 1/3 of printers have been decommissioned at GWH.

Adaptation



- Emergency plans are in place to continue to deliver essential healthcare services in the event of extreme weather events.
- BSW Hospitals Group have undertaken a climate risk assessment and are developing longer-term climate adaptation plans to increase climate resilience.

Key areas of focus over the next 3 years

The content in the following chapter outlines the key areas of focus for action in line with the latest Green Plan guidance published by the Greener NHS team.

GETTING THERE



Workforce and Leadership

Empowering and mobilising all colleagues and leaders to contribute to the delivery of more environmentally sustainable healthcare.



Digital Transformation

Leveraging digital to enhance care delivery whilst reducing the impact of the technology we use.



Care Model Transformation

Shifting to preventative, out-of-hospital, digitally enabled and environmentally sustainable care models.



Medicines and Medical Gases

Reducing the impact of our prescribing and use of anaesthetic gases by prescribing alternatives and reducing waste.



Travel and Transport

Making our journeys more environmentally sustainable by supporting a shift to active travel, public transport and electric vehicles.



Estates and Facilities

Modernising the NHS estate, decarbonising buildings, improving energy efficiency, and embedding net zero design in new developments.



Supply Chain and Procurement

Aligning with the [NHS Net Zero Supplier Roadmap](#) and promoting circular economy principles.



Food and Nutrition

Promoting healthy, local, and seasonal food wherever possible, while reducing waste and reducing emissions.



Adaptation

Making our healthcare system ready for climate change by planning ahead and investing in solutions which will help us adapt.



Green Space for Health

Enhancing biodiversity and creating therapeutic environments for recovery and wellbeing.

Workforce and System Leadership

Why it matters?

We know that to deliver the ambitions set out in this plan we will need to engage everyone delivering health and care services across BSW. Strong leadership, an empowered workforce and a culture of environmental stewardship are fundamental and critical to the success of this plan.

We want all colleagues and leaders to understand how our health services affect the environment and how taking action supports our health goals.

Our aim is for everyone to include this awareness in daily care planning and delivery. We also want considerations on environmental sustainability of healthcare to become a normal part of how BSW organisations operate and make decisions, ensuring the care we provide today protects future generations.

Where are we now?

Leadership – All our NHS organisations across BSW have a designated board-level executive lead with the responsibility of overseeing Green Plans for their respective organisations. We also have a board-level executive lead responsible for the delivery of this system level plan.

Training and inductions – Most NHS organisations already include references to the NHS net zero goals and environmental sustainability in new starter inductions, with some offering further net zero training to all colleagues, as well as some specialist training for key colleague groups that underpin the delivery of Green Plans. This includes most Trusts making the Net Zero ESR module available to colleagues with SFT making this mandatory training.

Colleague engagement and networks – Most NHS organisations have existing organisational green champion networks and groups focused on driving environmental sustainability within their organisations.

Where do we want to be?

- Delivering environmentally sustainable healthcare is a strategic priority that is executive-led and embedded into all our decision making.
- Achieving net zero is the responsibility of all colleagues and is embedded into all healthcare roles.
- Everyone working in health and care in BSW has the knowledge and skills to take action in their own area of work to help us to meet our vision.
- We proactively collaborate, share learning and broaden our impact by working with key partners across the ICS and will look to further expand our environmental sustainability networks (e.g. green champion networks) to drive sustainability.



How will we get there?

Key actions 2025–28	Measuring success
Ensure we have appointed board-level leads at the ICB and Trusts that actively support the delivery of our Green Plan and promote environmental sustainability as a strategic priority at executive level.	Board-level leads identified, and responsibilities outlined in Green Plan governance with an agreed process in place for oversight and assurance monitoring.
Review our governance processes and develop tools and templates that ensure colleagues are supported to consider environmental sustainability implications as part of all governance, policies, business case development and project planning.	Environmental Sustainability Impact Assessment embedded as part of governance and project processes.
Review and refresh our BSW Green Plan governance and reporting structure.	Refreshed BSW Green plan governance and reporting in place.
Deliver board-level training on environmental sustainability and net zero to board level leads.	Net zero board development sessions to be held.
Integrate environmental sustainability and net zero into all new starter inductions.	Include environmental sustainability and net zero in new starter inductions by April 2026.
Promote, and consider setting uptake targets for, core training offers set out on the Greener NHS Training Hub at organisational level.	Training promoted and targets set and measured in line with organisational Green Plans.
Assess workforce capacity and skill requirements for delivering the green plan and make training, tools and resources available to support upskilling of key colleague groups that underpin delivery, for example procurement, digital and service change leads.	Review key colleague groups and target upskilling one group per year.
Embed general environmental sustainability and net zero responsibilities into all relevant job descriptions.	Job description templates updated.
Incorporate discussions on environmental sustainability and net zero objectives into appraisal processes.	Objective and appraisal guidance and templates updated.
Promote and engage with local, regional and national environmental sustainability networks.	An increase in external collaborations to strengthen joint initiatives or funding opportunities to be reviewed regularly and reported annually.
Develop and share communications campaigns, materials, and case studies across organisations in BSW.	Develop annual communication plan with key campaign actions to promote sustainability to all colleagues in regular comms to staff / intranet / news / screensavers.

Workforce & System Leadership Case Study

Salisbury NHS Foundation Trust: Championing Environmental Sustainability Across the Trust

A cornerstone of SFT's environmental sustainability journey has been strong colleague engagement.



The Trust established a Sustainability Champions network and clinical working groups to harness colleague enthusiasm and ideas, and has effective engagement strategies, for example, through delivering regular communications campaigns and events such as Sustainability Week, Green Week, and Sustainability Seminars.

The Trust has built instantly recognisable branding which also plays a crucial role in ensuring the visibility of green initiatives and building successful engagement across the Trust.



Digital Transformation

Why it matters?

The NHS 10-Year Health Plan puts digital technology at the heart of healthcare, aiming to make the NHS a digital-first service where most people begin their care journey online or through digital tools. A key part of the plan is providing a 'digital front door' for managing care through the NHS app, replacing paper records with digital ones, creating single, shared patient records, and the use of AI to support better decision-making and increases productivity and the use of resources.

Digital transformation is essential to improving care quality, empowering patients, and creating a more modern and efficient NHS. However, digital services can also have a negative impact on the environment through increasing emissions, creating waste and using up resources. For example, data centres used to power our applications, systems and to host our data require a lot of energy and water. As a system we want to harness the opportunities of digitalisation to improve the way we deliver care, whilst aiming to reduce the overall environmental impact of the technology required to do this where provides value-for money.

Where are we now?

Across BSW we have been working hard to maximise the benefits of digital transformation to improve patient care, whilst also reducing emissions.

Some examples of recent digital transformation projects delivered or underway include:

Agile and flexible working through digital technology – We have been working to support effective remote and home working by providing digital tools and technology such as flexible Gov Wi-Fi connectivity, enabling healthcare workers to work across sites to maximise agility and flexibility, whilst reducing unnecessary travel.

Digitising records and processes – We have been digitising paper records and processes across BSW for example through implementation of digital patient administration and electronic patient record systems (PAS and EPR).

Digital Outpatient Transformation – We have been transforming our hospitals outpatient appointments and providing more virtual appointments and remote video and telephone consultations.

Digital Community Services – Our community services are planning to introduce a single digital 'front door' to access community-based care, help, and support which will include an information website and online referral portal. They are also expanding the use of virtual clinics and the Hospital at Home service which provides hospital-level care, assessment, and monitoring to patients in their own homes across BSW, supported by remote monitoring technologies like wearables.

Electronic prescriptions – We have been working to digitise patient prescribing within our Trusts, GPs and pharmacies, with patients increasingly able to order prescriptions with end-to-end tracking directly through the NHS App reducing the need for appointments and travel.

Digitising communications – The 'Wayfinder' programme is supporting the digitalisation of appointments letters, rollout of text message reminders and integration with NHS app to keep people up to date on their appointments.

Integrated Care Record (ICR) – The BSW ICR provides a shared record of information curated from a variety of healthcare systems. This enables clinicians to access have better access to healthcare information across organisations, reduces paper use, duplication of data and volumes of data transfer.

Making digital technology sustainable

IT hardware procurement – We are currently in the process of contracting a single supplier across the system for some of our IT hardware, such as laptops to support GPs.

As part of the 10% social value and sustainability requirements within the procurement process, we have specified environmental sustainability considerations which include reducing packaging of shipments, providing higher specifications for equipment which will enable the devices to last longer, and an option to return waste to the supplier.

Circular economy and asset lifecycle – Where possible we are reviewing opportunities to make devices last longer and ensure responsible end of life management through opportunities for reuse and recycling in our IT waste contracts.

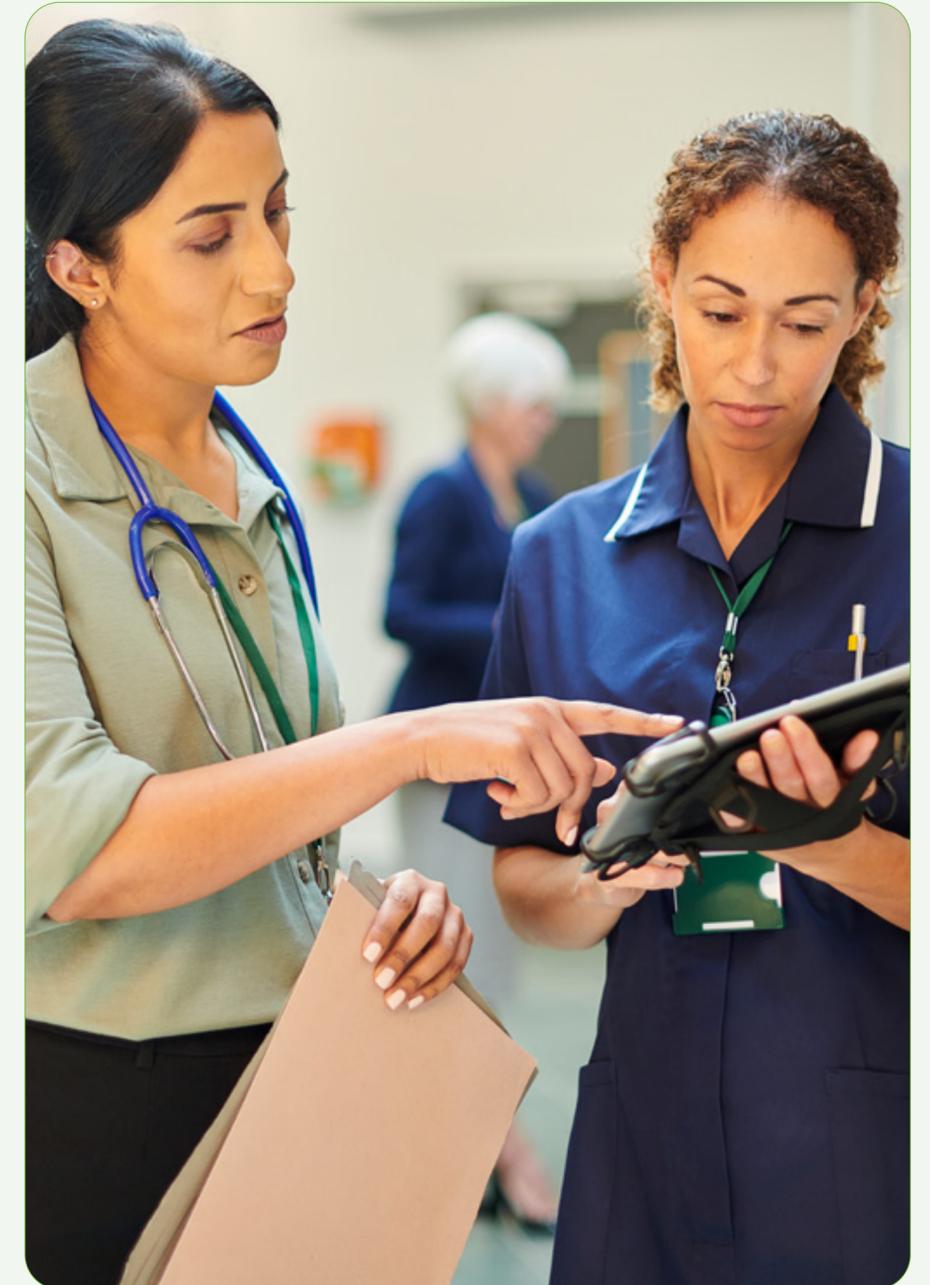
Power management and efficiency – We are investigating tools to optimise use of our cloud IT infrastructure to select options which reduce our carbon emissions.

Device rationalisation – Many of organisations have policies in place to ensure we are making best use of devices. For example, HealthHero Integrated Care ensures devices are shared and assigned per shift or vehicle, not individually, to minimise asset count.

Cloud-first strategy – In line with the [NHS 'cloud-first'](#) strategy, wherever possible and where funding models allow, we are moving away from using physical on-site data centres to using cloud providers of digital storage and services. This improves efficiency, energy-consumption and climate risk resilience. We have removed all servers from ICB and GP practices sites and moved these to the cloud.

Where do we want to be?

- Digital transformation opportunities described in the NHS 10-Year Health Plan are maximised to improve patient care and reduce emissions.
- The digital technology we use is as environmentally sustainable as possible and our suppliers are working with us to meet our net zero goals.
- Our digital infrastructure is resilient to the impacts of climate change.
- Digital services are accessible and inclusive for all.



How will we get there?

Key actions 2025–28	Measuring success
Continue to support front-line digitisation of clinical processes e.g. clinical records, Lloyd George GP records, clinical and operational workflow and communications, appointment letters and patient forms.	Digital tools are adopted and embedded into workflows, leading to improved efficiency, reduced reliance on paper, and enhanced data quality.
Continue to develop care models that make use of digital technology and reduce travel e.g. Hospital at home, virtual wards, remote appointments and consultations, remote patient monitoring.	Digital care models delivered that reduce unnecessary travel and improve patient access, particularly for patients with complex or long term conditions.
Ensure digital suppliers are maximising opportunities to reduce their environmental impact and support the drive to net zero.	Digital suppliers demonstrate tangible actions to reduce their environmental impact, such as adopting energy-efficient technologies, minimising carbon emissions in hosting and data services, and aligning with NHS net zero goals.
Ensure we are maximising opportunities in our IT procurement processes to introduce additional environmental sustainability standards and requirements from our suppliers and driving meaningful social value and sustainability locally.	Environmental sustainability requirements and social value commitments in contracts and benefits delivered.
Supported by the Digital Maturity Assessment, consider opportunities to further embed sustainability in our digital services, such as using circular approaches for IT hardware management, extending device lifetimes and reviewing our IT waste contracts for opportunities to improve recycling and reuse.	IT policies, contracts and processes reviewed for opportunities as they come up for renewal.
Explore how we can improve the energy efficiency and management of our digital infrastructure e.g. PC power down configuration.	Improvements in key metrics measured annually e.g. (decrease in power usage).
Continue to apply a cloud-first strategy wherever possible, prioritising low carbon hosting and using existing data cloud carbon reporting to improve monitoring and optimise usage. Where on-site data centres are still in use, drive energy efficiency and ensure climate risks are understood and mitigated.	Improvements in key metrics measured annually e.g. (increase in data centres migrated to cloud and low carbon cloud hosting, decrease in energy usage, risks in risk registers with appropriate mitigations).
Ensure responsible use of Artificial Intelligence and minimise the associated environmental and social impacts.	AI is deployed ethically, transparently, safely and sustainably within clinical and operational settings.

Digital Transformation Case Study

HCRG Care Group – Use of wearable technology in our Hospital at Home Service

The Hospital at Home service provides high-quality care, assessment, monitoring, and treatment to suitable patients in the comfort of their own homes across BSW.

This service ensures patients receive the same level of care as they would in a hospital ward. By delivering specialist care at home, the service helps to prevent hospital admissions and supports early discharge, allowing patients to recover in familiar surroundings.

How does Hospital at Home work?

Hospital at Home supports people wherever they live, including private homes and care homes. Patients receive a tailored care plan designed to meet their individual needs.

The service includes, where clinically appropriate, remote monitoring through wearable technology

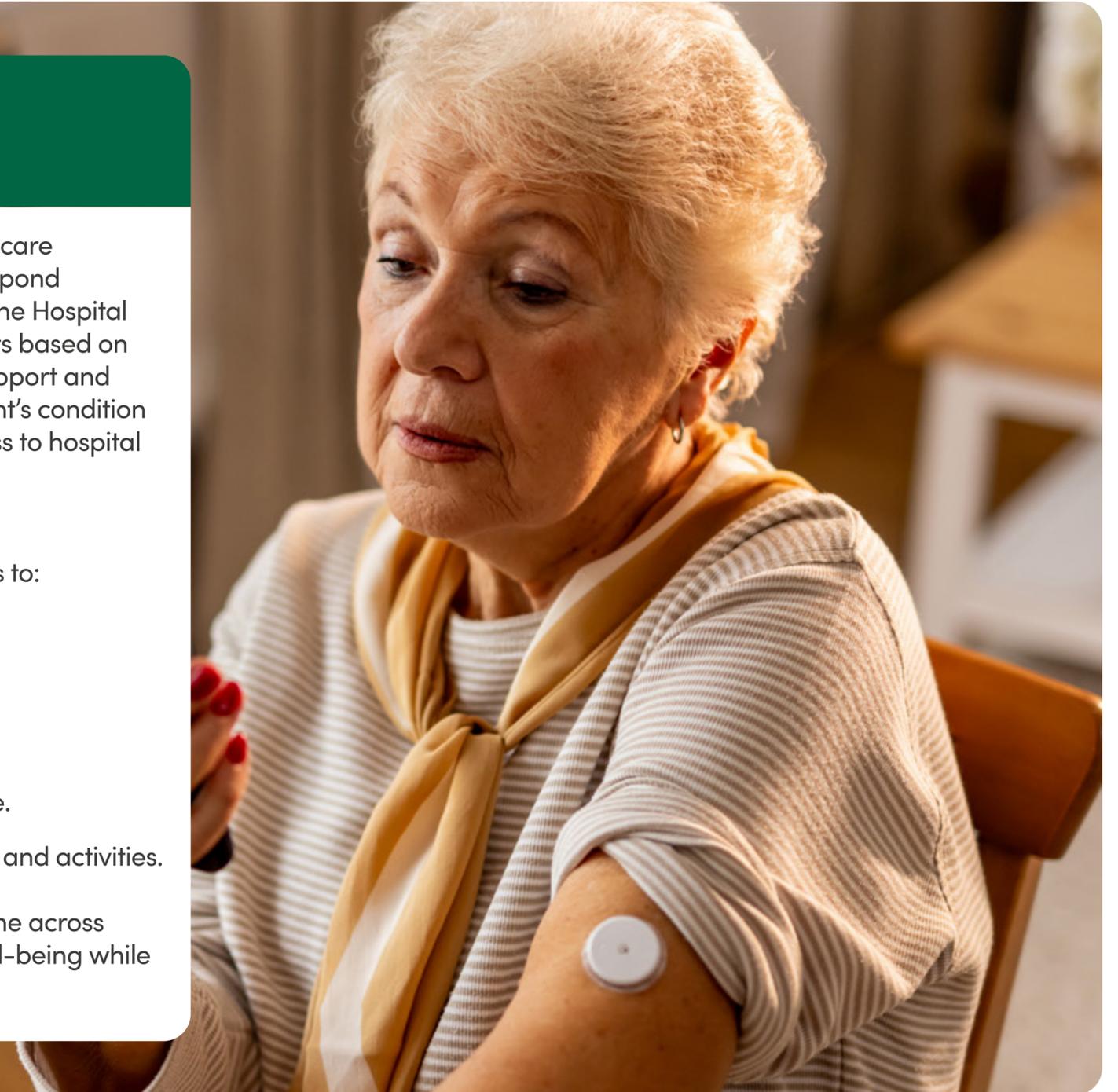
or mobile applications, allowing healthcare professionals to track progress and respond proactively to any changes in health. The Hospital at Home team provides scheduled visits based on patient needs and offers additional support and advice outside of these visits. If a patient's condition worsens, the team ensures rapid access to hospital care when necessary.

Benefits of Hospital at Home

Receiving care at home allows patients to:

- Stay close to family and loved ones.
- Remain in familiar surroundings.
- Continue with daily routines.
- Maintain comfort and independence.
- Make choices about meals, clothing, and activities.

By providing hospital-level care at home across BSW, this service enhances patient well-being while reducing unnecessary hospital stays.



Care Model Transformation

Why it matters?

Our aim is to transform healthcare delivery by developing patient-centred, sustainable models of care that prioritise prevention, out-of-hospital and digitally supported care, and reduce our environmental impact. Our care models and clinical transformation will be rooted in these three strategic shifts described in the 10 year plan, as well as the [principles of sustainable healthcare](#).

1. Prevention

Promoting health and preventing disease by tackling the causes of illnesses and inequalities.

2. Patient self-care

Empowering patients to take a greater role in managing their own health and healthcare.

3. Lean service delivery

Streamlining care systems to minimise wasteful activities.

4. Low carbon alternatives

Prioritising treatments and technologies with a lower environmental impact.

These principles help shift healthcare from a reactive, high-resource model to one that is proactive, efficient,

and environmentally responsible. Embedding these principles into our service change, pathway redesign and clinical quality improvement programmes will be key to successfully delivering more environmentally healthcare across BSW.

Where are we now?

In BSW, transforming our care models is central to both improving patient outcomes and achieving our environmental sustainability goals.

Key areas of recent focus that support our net zero ambitions include:

Delivering our BSW Integrated Care Strategy

The BSW Integrated Care Strategy and the BSW Green Plan are closely aligned and mutually reinforcing. Some key areas of alignment include:

Prevention – Delivering more preventative models of care that tackle the sources of ill-health and inequalities. This includes taking action to address wider determinants of health including access to green space and the impact that our transport has on air quality.

Community-based care and Integrated Neighbourhood Teams (INTs) – Redesigning services to reduce reliance on hospital-based care and support a shift to more care delivered in community settings via neighbourhood teams. Through the development of INTs, people will be able to receive more of their care closer to home, enabled

through multi-disciplinary team working across our Trusts, community health and primary care. Linked to this is the continued expansion of virtual wards and hospital at home services and the development of purpose-built facilities such as our Integrated Health Centres.

Net Zero Clinical Transformation

Clinical leadership – GWH and OHFT have already appointed net zero clinical transformation leads to work closely with board-level leadership and governance to support green plan delivery.

Clinical engagement – Trusts have strong clinical involvement to drive environmental sustainability initiatives. For example, through green champions networks and working groups with a particular focus on prioritising action in departments which are considered high impact such as in Emergency Departments, Theatres, intensive care and endoscopy.

Quality Improvement approaches – Trusts have been working to embed Sustainability and Quality Improvement (SusQI) into wider quality improvement practice. Supporting colleagues with the tools and training to deliver low-carbon clinical improvements using SusQI methodology.

Projects focused on **clinical environmentally sustainable practices** – We have been delivering projects to transform clinical practice across primary and secondary care with quantifiable environmental benefits, including campaigns to reduce unnecessary glove use, adoption of reusable clinical items, switching to more eco-friendly cleaning solutions, optimising antibiotic use and reducing waste in clinical practices.

BSW ICS Infection Prevention Strategy – Sustainability is one of the core pillars of both the BSW ICS and Southwest region Infection Prevention and Management Strategy 2024–2027.

Where do we want to be?

- Our communities in BSW are supported to stay healthy, reducing demand on healthcare and the environmental impact of delivering care.
- Expand our clinical leadership to champion environmental sustainability.
- Clinical projects with a focus on environmentally sustainable quality improvement (SusQI) are delivered and scaled across the system, delivering cost savings and reducing environmental impact of care.
- Environmentally sustainable healthcare principles are considered in all service change, reconfiguration programmes, pathway redesign.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

How will we get there?

Key actions 2025–28	Measuring success
Continue to deliver the three shifts in the 10-Year Health Plan and our integrated care strategic priorities to support reductions in emissions across patient pathways, spanning primary, secondary and community care and VCSE.	Reductions in patient and staff travel, increased use of low-carbon care models (e.g. virtual care, community-based services), and measurable decreases in carbon emissions across targeted pathways.
Develop tools or templates that will support consideration of environmentally sustainable care principles in service change, reconfiguration programmes and pathway redesign.	Environmentally Sustainability Impact Assessments as part of standard templates in service change and redesign.
ICB to review quality schedules as part of contract management processes with Trusts for opportunities to further embed sustainability.	Review quality schedules annually through contract management to ensure environmental criteria has been embedded into quality measures with evidence to support emissions reduction in clinical care delivery and measurable improvements in sustainability performance.
All Trusts to identify clinical lead(s) with oversight of net zero clinical transformation, with formal links into board-level leadership and governance.	Clinical leads identified, and responsibilities outlined in Green Plan governance.
Continue to use the Sustainability in Quality Improvement (SusQI) Framework and embed this approach across the system through the 'Improving Together' programme and system-wide Quality and Service Improvement and Redesign (QSIR) methodologies.	SusQI principles are embedded in routine Quality Improvement project design, templates, processes and training.
Continue to deliver clinical quality improvement projects with a focus on sustainability, particularly in key focus areas due to carbon-intensity or volume: <ul style="list-style-type: none"> • Critical and perioperative care • Mental health • Urgent and emergency care • Diagnostic tests and procedures • Medical pathways, with a focus on acute or long-term conditions such as renal disease, diabetes or cardiovascular disease. 	Projects delivered with measurable benefits e.g. emissions reduced, cost saved, improved patient outcomes, efficiency and reduced health inequalities.
Share outcomes, learnings and best practice across partner organisations through clinical networks, forums, clinical governance and conferences.	Case studies and learning shared. Projects replicated across the system.

Care Model Transformation Case Study

Great Western Hospital's Net Zero Clinical Transformation

Great Western Hospital (GWH) is leading the way in sustainable healthcare through its ambitious clinical transformation programme aimed at achieving net zero emissions. With a dedicated Clinical Sustainability Lead, GWH has embedded sustainability at the heart of clinical practice, ensuring board-level leadership and robust governance.

Central to this transformation is the Clinical Sustainability Group (CSG), which convenes bi-monthly to coordinate projects, celebrate successes, and ensure ongoing progress. The group brings together key representatives from infection prevention and control (IPC), sustainability, quality improvement, facilities, pharmacy, procurement, and various clinical departments.

GWH's portfolio of projects includes:

- Achieving Green ED accreditation for sustainable emergency care, including reducing unnecessary cannulations.

- Implementing the 'Gloves Off' campaign, which has reduced glove use and cut 27.4 tonnes of carbon emissions.
- Switching to reusable tourniquets and theatre caps (in the maternity department), optimising waste systems, rolling out recycling bins and non-alcohol hand sanitisers.
- Trialling sustainable innovations such as recyclable curtains and non-alcohol hand sanitisers.
- Formalising collaborative working between IPC and Sustainability Teams, with new initiatives in linen reduction, skin preparation, and PPE use.

Recognition of GWH's leadership extends nationally, with the Trust being selected as the first NHS England exemplar for sustainable infection prevention and control. Its innovative practices and learnings are being shared across the NHS to inspire similar action.

This joined-up, clinically-led approach is driving tangible reductions in GWH's carbon footprint, embedding sustainability in patient care, and setting a standard for hospitals aiming to transform their operations for a greener future.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

Medicines and Medical Gases

Why it matters?

A few medicines account for a large portion of these emissions, for example, anaesthetic gases represent and inhalers represent 3% of NHS emissions. Metered Dose Inhalers (MDIs) are particularly harmful to the environment because of the gases they use as propellants to administer the medication. Each one is equivalent to driving 175 miles in a standard family car. A dry powder inhaler (DPI) is clinically equivalent but is equal to driving only 4 miles.

To help protect the environment, we need to think about the environmental impact of medicines when prescribing and help patients to choose low-carbon alternatives like dry powder inhalers. By avoiding unnecessary prescriptions and offering options like social prescribing, we can cut waste and help people stay well through community activities, exercise, and 'green' projects that connect them with nature.

Where are we now?

We have made significant progress in reducing the environmental impact of medicines.

Various initiatives have been implemented to address our areas of highest impact, including:

Low-carbon inhaler prescribing – We have best-practice clinical guidelines for asthma care and is already in the lowest 10th percentile for MDI inhaler prescriptions compared to national averages.

Inhaler recycling – SFT and GWH have introduced collection points to enable safe disposal of inhalers whilst others such as OHFT are planning to pilot recycling schemes.

Phasing out Desflurane – Our hospital trusts have stopped using desflurane.

Reducing Nitrous Oxide Waste – RUH and GWH have taken steps to reduce Nitrous Oxide use and waste through decommissioning where not required and changing the way this is supplied in wards where still needed.

Reducing the impact of Entonox – GWH became only the second NHS organisation in the country, and the first in the South West to introduce a Central Destruction Unit (CDU) to lower the impact of their use of Entonox (Gas and air) by breaking down the nitrous oxide into oxygen and nitrogen, both naturally occurring components.

Reducing medicines waste – Trusts are taking steps to reduce medicines waste, for example, SFT and RUH have initiatives in place to ensure unused medicines are returned to stock and redistributed where possible. OHFT has introduced a recycling scheme for blister foil packaging.

Medicines Optimisation – A key priority in our system medicines optimisation strategy is to reduce unnecessary prescribing this includes supporting projects and initiatives to reduce inappropriate prescriptions, polypharmacy and overmedication with particular focus on at risk groups. For example, GPs conducting structured medication reviews with patients.

Where do we want to be?

- Deliver high-quality care whilst reducing the impact of the medicines we prescribe.
- Switch high-impact medicines to alternatives that are less harmful to the environment where clinically appropriate.
- Reduce waste and pollution from medicines by addressing overprescribing and prescribing alternatives when safe to do so, such as social prescribing.

How will we get there?

Key actions 2025–28	Measuring success
<p>Continue to work with primary care and Trusts to support high-quality, lower-carbon respiratory care in line with clinical guidelines for asthma and chronic obstructive pulmonary disease, including:</p> <ul style="list-style-type: none"> • Optimising inhaler choice (considering clinical appropriateness, the environmental impact of inhalers and patient preference) • Improving inhaler use and adherence • Encouraging patients to return their used or expired inhalers to recycling schemes, where available, for appropriate disposal • Work as a system to deliver projects that increase prescription of Dry Powdered Inhalers (DPI) and reduce prescription of Metered Dose Inhalers (MDI) 	Aim to maintain or improve on current national benchmarking (\leq 10th percentile) for MDI prescriptions.
Continue to work in collaboration with ICS system partners (acute, mental health, Primary Care) and Health Innovation West of England to improve safety and quality of prescribing within BSW in line with our medicines optimisation priorities, requirements of the MHRA, CQC and following safety culture principles.	Measurable reductions in prescribing errors, adverse drug events, and inappropriate or high-risk prescribing.
Trusts to continue to deliver projects that reduce the impacts of medical anaesthetic gases.	Reductions in emissions from anaesthetic gases, measured annually.
ICB to review opportunities to enable a more proactive and coordinated approach to structured medication reviews e.g. through more regular monitoring and reporting.	Increase in SMRs leading to reductions in medicines prescribed, measured annually.
ICB to review formularies to ensure low-carbon options are available and prioritised e.g. making carbon impact visible within structured medication reviews and asthma reviews as part of shared decision-making conversations.	Formularies reviewed for opportunities annually.
ICB to incorporate review of greener alternatives as part of ongoing guideline and pathway reviews.	Guidelines incorporating greener alternatives.
ICB to support the Green Social Prescribing offer for each Primary Care Network.	Number of green social prescribing offers available.

Medicines and Medical Gases Case Study

RUH Bath Green Team Competition 2025

In September 2024, RUH Bath commenced a [Green Team Competition](#) in partnership with the Centre for Sustainable Healthcare (CSH). The competition has brought anticipated annual savings to the Trust of £41,000 and 50,000kg CO₂e. This is the carbon footprint equivalent of driving over 147,000 miles in an average car (or 640 return trips between Bath and London).

Through the Green Team Competition, five teams from RUH Bath were selected to participate in a Sustainability in Quality Improvement (SusQI) programme. Teams received support to drive healthcare transformation by developing, implementing, and measuring the impact of projects through the lens of the sustainable value equation.

Top Project Outcomes:

- Anaesthetics: Switching off unused gas scavenging systems in day surgery theatre when not in use → estimated potential £30k saved, 42 tonnes CO₂e reduced annually.
- Catering: Reusable food containers → estimated potential 3.6 tonnes waste avoided, 1.5 tonnes CO₂e saved.
- Radiotherapy: Reduced micro-enema waste → estimated potential £1.3k saved, 0.8 tonnes CO₂e saved.
- Endoscopy: Linen/PPE reduction → estimated potential £2.1k saved, 1.7 tonnes CO₂e saved.
- Pharmacy: Reduced infliximab waste → estimated potential £6.6k saved, 3.8 tonnes CO₂e saved.



Travel and Transport

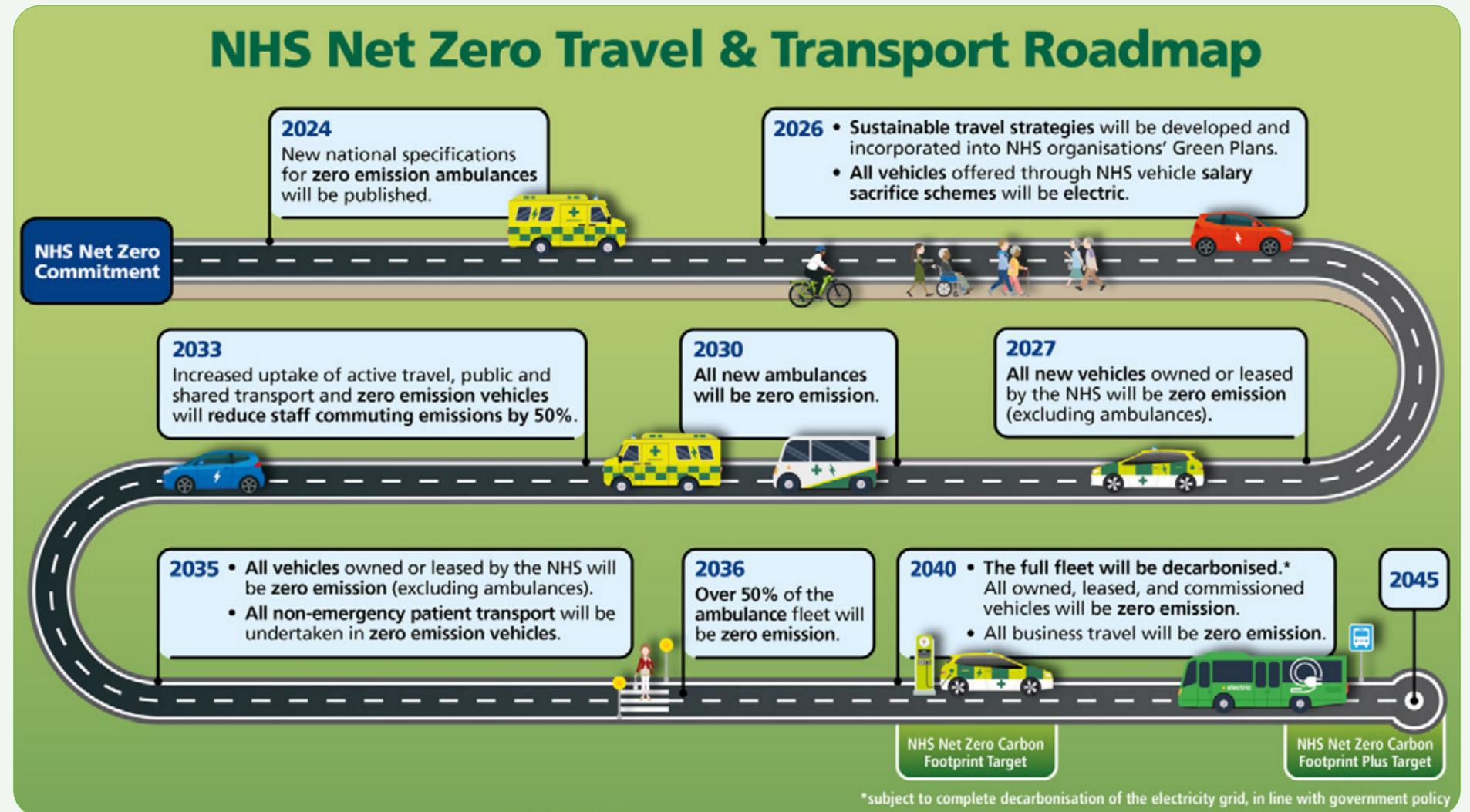
Why it matters?

The NHS fleet is the second largest in the country, consisting of over 20,000 vehicles. It directly contributes to harmful air pollution and emissions. Delivering healthcare in BSW involves many types of travel and transport. From ambulances, home visits and patients attending appointments to workplace commuting, deliveries and moving supplies or equipment between sites.

The '[Net Zero Travel and Transport Strategy](#)' sets out the key actions we will need to deliver as a system and the [roadmap](#) we need to follow to reduce the environmental impact of our travel and transport, while also providing cost-saving and health benefits.

This includes a transition to zero emissions vehicles, developing sustainable travel strategies and educating people about the most sustainable modes of travel.

Figure 4: NHS Net Zero Travel and Transport Roadmap



Transitioning to zero-emission vehicles in healthcare will require identifying investment for electric vehicle (EV) charging infrastructure and working with local authorities and the National Grid to address local electricity grid challenges. We will also need to support behaviour change among our colleagues, patients, and visitors.

Encouraging colleagues, patients and visitors to travel more actively such as cycling or walking where possible, will have the added benefit of contributing to better health. To achieve this, our policies and infrastructure must make the sustainable travel the easiest choice with tailored local travel plans based on our varied geography and travel needs. We will work collaboratively with local authorities, transport providers, and VCSE groups to improve access, especially at rural sites and where shift patterns don't currently align with public transport.

Where are we now?

BSW is actively working to reduce the environmental impact of travel and transport. This is an area of significant progress and achievement. Various initiatives have been implemented to promote sustainable travel options and reduce emissions including:

Travel surveys and plans – We are working to develop a better understanding of our current fleet of vehicles, travel patterns and needs across the system through surveys and data collection. We are using this information to set out strategies to address challenges and maximise opportunities.

Transition to low and zero emissions vehicles – The majority of our NHS fleet is already low-emissions vehicles such as hybrid and many organisations have already started to transition their fleet to zero emissions electric vehicles. For example, HealthHero Integrated Care has reduced its overall fleet by over 50% and switched to hybrid vehicles, SFT has added two electric vehicles and RUH has added three electric vans to their fleets.

EV charging – Efforts are being made across the system to invest in electric vehicle charging infrastructure with numbers of chargers available increasing across BSW.

Salary Sacrifice Leasing Schemes – Our salary sacrifice schemes are already encouraging a shift to electric vehicle leasing in colleagues. For example, at the RUH 34 electric vehicles were delivered to colleagues in 2024/25, with a further 7 on order.

Supporting a shift to public transport and active travel – We have made significant strides in promoting active travel and enhancing public transport options for colleagues, patients and visitors. This includes improving active travel infrastructure such as secure bike storage, changing facilities including showers and lockers, incentivising sustainable workplace travel through Cycle to Work schemes, car sharing initiatives, discounted ticket schemes and providing access to e-bikes.

Some notable examples of achievements include:

- GWH has achieved Modeshift stars silver accreditation and is working towards gold accreditation.
- SFT have earned Cycling UK Gold Accreditation and created a Public Transport User Group to boost discounted bus ticket sales.
- RUH has seen over 500 colleagues use their Cycle to Work scheme since 2018 and provides e-bikes for trial hire. Additionally, a car sharing programme, Join My Journey, was launched in 2022 to encourage shared commuting.
- OHFT have delivered a discounted bus scheme for colleagues which has supported over 16,000 journeys.
- The ICB only offers electric vehicles on lease scheme.

Improving air quality

Working collaboratively with communities, local authorities are seeking to maintain good air quality and work to deliver improvements in areas where air quality fails national objectives in order to protect public health and the environment.

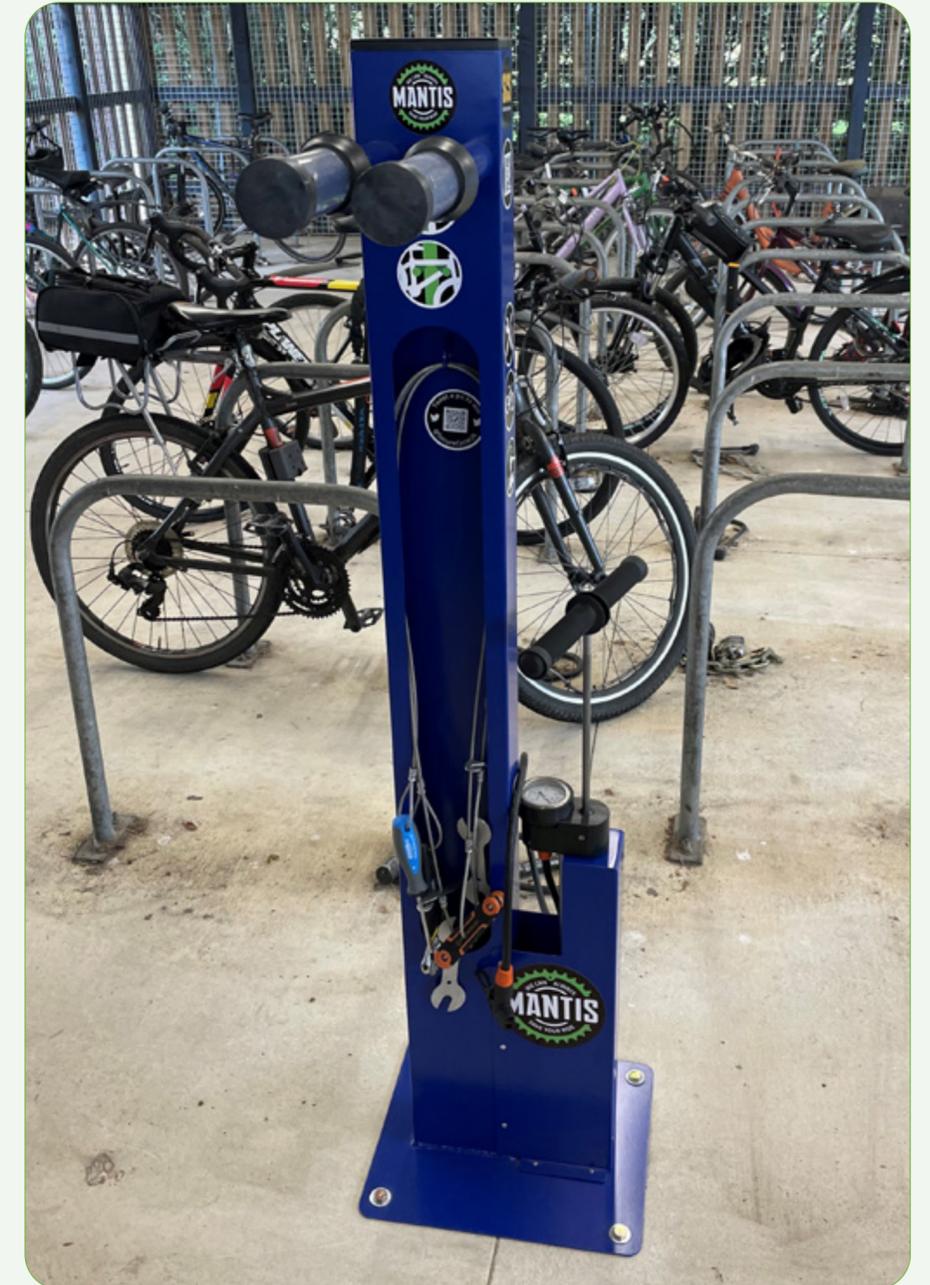
This includes through proactive measuring and monitoring across Swindon, Wiltshire and BANES and establishing measures such as a clean air zone (CAZ) in Bath and Air Quality Management Areas across BSW.

Two of our hospital Trusts (RUH and SFT) have air quality monitoring onsite. Data collated will be used to support the development of business cases to promote air quality improvements onsite and in discussions with local transport providers and local authorities on improving public transport access.

Where do we want to be?

- Services and workforce policies prioritise digital, local delivery and sustainable travel wherever possible.
- Our fleet vehicles are zero emissions in line with Net Zero Travel and Transport milestones.
- Colleagues, patients and visitors are supported to travel to our sites via more environmentally sustainable options such as public transport, cycling and walking.

- Decisions on where to base services in future take into consideration travel and transport routes and have environmentally sustainable travel plans.
- Strong partnerships with local authorities, local and combined authorities, local transport providers and VCSE partners enable us to maximise funding and infrastructure opportunities on behalf of the ICS member organisations.



How will we get there?

Key actions 2025–28	Measuring success
Review travel and workforce policies to ensure sustainable travel is prioritised across the ICS, aligning with wider changes in operating models where possible.	Key travel and workforce policies and processes reviewed for opportunities to embed sustainable travel considerations as they come up for renewal.
Share best practice and learning across the system to support collective achievement of the NHS Net Zero Travel and Transport milestones.	NHS Net Zero Travel and Transport milestones achieved in line with roadmap.
Sustainable travel strategies developed and incorporated into organisational Green Plans.	Sustainable travel strategies in Green Plans by December 2026.
Review salary sacrifice schemes and ensure only zero emissions vehicles (ZEVs) are available.	Only ZEVs available in salary sacrifice schemes by December 2026.
Ensure plans in place to transition all new owned and leased vehicles to zero emissions.	All new vehicles owned or leased ZEVs from January 2027.
Ensure all NHS organisations are submitting annual fleet data returns to the Greener NHS team and utilising existing data tools to support an accurate overview of system fleet position.	Fleet data returns submitted annually by all NHS organisations.
Review travel strategies and data to establish actionable opportunities for collaborative working e.g. opportunities to optimise the deployment and usage of the EV fleet or EV infrastructure across the system.	Review conducted and opportunities identified.
Explore opportunities to adopt a unified back-office system provider for EV management to ensure consistency and ease of use across our health system.	Review of EV infrastructure approaches and strategies conducted.
Identify and pursue joint bids for funding to advance high-priority transport projects e.g. electric vehicle infrastructure grants.	Increased collaboration leading to successful joint funding bids enabling the delivery projects.
Integrate journey mapping into infrastructure decision-making to reduce travel wherever possible.	Environmental Sustainability Impact Assessments in business cases to include travel impacts.
Collaborate proactively with local authorities, transport authorities and VCSE on joint travel and transport priorities to secure funding and expand infrastructure for sustainable travel. Areas of focus include working with our Trusts to help strengthen existing partnerships to drive joint initiatives and changes required.	Increase in external collaborations leading to joint initiatives or funding opportunities.

Travel and Transport Case Study

Oxford Health's Sustainable Travel Initiatives: Reducing Emissions and Promoting Healthier Choices

Travel and transportation are essential to the Trust's operations but also represent a significant source of emissions. In 2024, OHFT reported that travel and transport accounted for 21% of its overall emissions, with colleagues covering 3.5 million miles and 44 fleet vehicles in use.

Key actions already implemented include:

- Investment in electric bikes and electric vehicles (EVs) for the community team.
- Installation of improved cycle storage facilities.
- Rollout of EV charging stations across Trust sites.
- Promotion of public transport and active travel options to reduce reliance on petrol and diesel vehicles (which currently comprise 72% of the OHFT fleet).

Oxford Health's initiatives in sustainable travel are integral to its Green Plan and net zero commitment. By transforming transport systems, the Trust is fostering healthier communities, supporting wellbeing, and reducing its environmental footprint for a more sustainable future.



Estates and Facilities

Why it matters?

Driving utilisation and sustainability within our estates and facilities is crucial to achieving a net zero NHS.

There are also significant opportunities across the NHS estate to reduce emissions whilst lowering costs and improving energy resilience and patient care. Key actions include reducing energy use, moving away from fossil fuel heating and investing in renewables.

Our evolving ICS 10 Year Infrastructure Strategy outlines our vision and objectives for reshaping and enhancing our infrastructure, working in partnership over the next ten years. One of the key priority areas identified within this strategy is 'Building a greener Future'. Within it we make a commitment to ensure that environmental sustainability forms a key part of our estates planning and decision making so we can make sustainable investments for the future. Our new integrated care centres are great examples of this in action, offering purpose-built facilities to meet the health and care needs of our local population, whilst considering future generations through sustainable and flexible design.

Meeting national net zero targets across all of our estates presents challenges. For example, we occupy many leased sites. This will require collaboration with NHS Property Services and other landlords to focus investment

on sites we deem core long-term assets to support our net zero goals. We will also need to secure funding and ensure sufficient electrical capacity locally to successfully decarbonise our Trust buildings.

We will continue to highlight this challenge nationally as essential work is required from the National Grid to support grid readiness to decarbonise our sites at a local level. A key aim in this strategy will be to continue to strengthen partnerships and collaboration with wider stakeholders to align plans and maximise funding opportunities.

Where are we now?

Energy efficiency – We have delivered energy efficiency improvements across our estates to reduce emissions and energy consumption, upgrading buildings with better insulation and double glazing, replacing traditional lighting with energy-efficient LED systems:

- GWH has reduced lighting energy demand by about 30% through LED installation.
- AWP's LED upgrades across multiple sites are projected to cut annual CO2 emissions by approximately 50 tonnes.
- OHFT and HealthHero Integrated Care have implemented comprehensive LED lighting programmes.

Reducing reliance on fossil fuel heating – We have made steps towards planning and delivering the changes required to phase out fossil-fuel heating in

our hospital trusts. For example, GWH and RUH have heat decarbonisation plans in place with the RUH plan supported with £21m of grant funding to deliver priority works and enabling infrastructure.

Increasing renewable energy – We have made significant advances in increasing renewable energy generation, particularly through the installation of solar panels:

- SFT has increased its solar panel capacity, boosting energy production to c.900,000 kWh per annum.
- AWP has reached 1.2 MW of solar capacity, one of the highest among similar trusts and plans further installations expected to reduce CO2 emissions by 12 tonnes annually.

Net Zero Principles and Design – We have increasingly integrated sustainability and net zero principles into new building and refurbishment projects:

- Our new Integrated Health Centres (IHC) are being designed to be environmentally sustainable, not only in the design of the building but also in the operational use of the building on completion. The centres utilise green technology, such as heat pumps and solar panels to generate power.

- SFT's Elizabeth Building, GWH's Urgent Treatment Centre and Integrated Front Door and RUH's Dyson Cancer Centre have achieved BREEAM Excellent ratings and combine high-performance building fabric, smart monitoring systems and renewable energy technologies like air source heat pumps and solar panels to reduce carbon footprints.

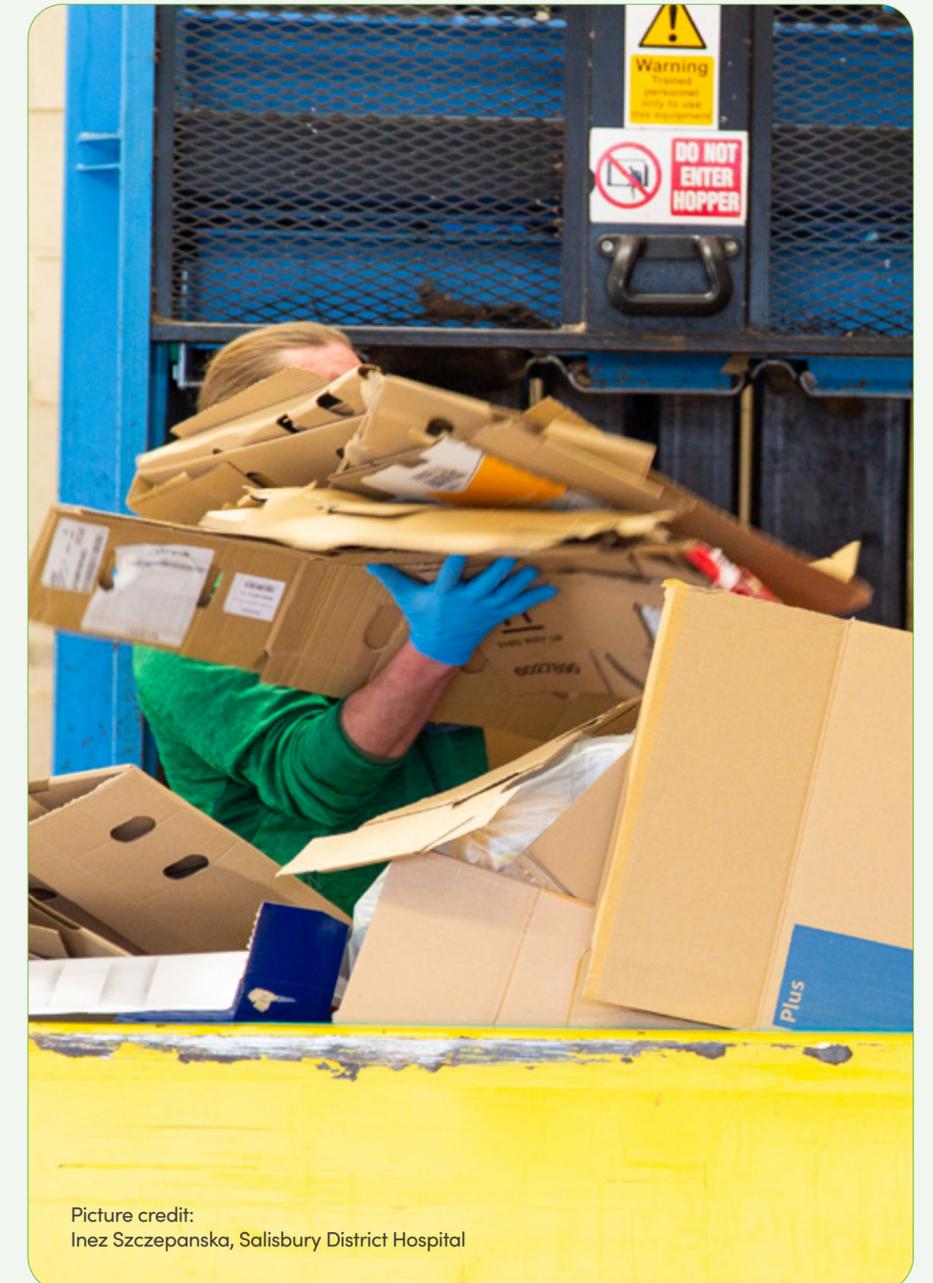
Reducing Water Consumption – We have been reviewing opportunities to better monitor and reduce our water consumption across our estates. One innovative example is SFT recycling pool water in its fitness centre through a UV treatment process.

Reducing Waste – Our Trusts are making great strides in reducing waste and increasing recycling and reuse including through delivering the latest [NHS clinical waste strategy](#). Implementing this strategy will improve waste segregation, increase reuse, and support more localised treatment reducing the environmental impact of our waste.

Where do we want to be?

- Our estates are fit-for-purpose, energy-efficient, powered by renewable energy and resilient to climate change.
- We work collaboratively to ensure we make best use of our existing estate across all organisations and align strategies to maximise funding and infrastructure opportunities on behalf of the ICS member organisations.

- Environmental sustainability is embedded in our NHS capital planning and decision making so we can make sustainable investments for the future.
- We minimise waste to landfill and increase reuse and recycling.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

How will we get there?

Key actions 2025–28	Measuring success
Continue to increase percentage of energy derived from renewables through increasing onsite renewable energy generation and renewable energy contracts. Working with landlords where required.	Increase in renewables generation and contracts, measured annually.
Continue to deliver energy efficiency and monitoring measures such as LED lighting, submetering and BMS, improving insulation across our estates. Working with landlords where required.	Increase in key metrics (e.g. LED lighting, energy use), measured annually.
Trusts to develop Heat decarbonisation plans for all sites which seek to remove all oil primary heating systems by 2028 and identify and prioritise the phasing out of all existing fossil-fuel primary heating systems by 2032.	Removal of all oil heating systems as a primary source in Trusts by 2028. Plans to decarbonise all heating systems by 2032 subject to funding.
Understand level and maturity of decarbonisation plans across the system to establish the size of the challenge across BSW and required funding to deliver.	Review completed.
Develop and maintain an ICS-wide decarbonisation project list to guide prioritisation efforts and identify and support funding opportunities and joint-bids.	Project list completed to increase our opportunities to secure additional funding.
Establish a central repository for sharing bid documents and business cases to share learning across the system.	Joint working space and repository in place.
Strengthen collaboration with local authorities to integrate decarbonisation planning with local energy plans and available funding opportunities.	Increase in external collaborations leading to joint initiatives or funding opportunities.
Where properties are leased or managed by NHS Property services, continue to strengthen collaborative working arrangements to deliver net zero ambitions at those sites.	Regular collaboration with NHS Property services, increased understanding of local plans.
Review learning from other systems and work with VCSE to identify opportunities to support primary care estates decarbonisation, such as through the boiler upgrade scheme .	Review opportunities to support Primary Care and promote successful projects and funding models to support Primary Care estate decarbonisation.
Support 'One Public Estate' approach through initiatives that maximise the shared use of facilities across the estate, for example, implementation of system booking tool for clinical and operational space to maximise utilisation.	Implementation of room booking tool for key estate to increase utilisation and productivity as set out in the BSW Infrastructure Strategy.

How will we get there?

Key actions 2025–28	Measuring success
Deliver ICS Infrastructure Strategy priorities including establishing capital prioritisation planning process which embeds environmental sustainability considerations into decision-making.	Capital prioritisation process in place across the system that includes Environmental Sustainability Impact Assessment.
Aim for BREEAM excellent for refurbishment and ' Net Zero Building Standard ' for new builds where applicable and as far as reasonably possible.	All new builds and refurbishments meet NHS standards.
Rationalisation of estate as part of ongoing reviews, consider opportunities as leases come to an end or opportunities to replace the estate as new premises become available (e.g. Trowbridge Integrated Health Centre).	Aim to reduce sub-optimal estate (tail) across the system
Continue to deliver strategies and projects that reduce waste and promote reuse and recycling.	Reductions in waste measured in ERIC data annually.



Estates and Facilities Case Study

Sustainability Achievements at Avon and Wiltshire Mental Health Partnership NHS Trust (AWP)

AWP has been successful in securing funding to undertake a series of ambitious sustainability initiatives in recent years.

Key Achievements:

Successful grant funding applications

The Trust secured £4.5 million from the Department for Business, Energy and Industrial Strategy (BEIS) for building-related emissions reduction. Major allocations include £2.1 million for LED lighting, £1.1 million for air source heat pumps and £1.2 million for solar PV systems.

LED Lighting Upgrades

In 2024, the Trust completed LED

lighting installations across nine sites, including Shearwater Lodge. This project is expected to reduce annual CO₂e emissions by around 50 tonnes.

Renewable Energy Investment

The Trust has significantly increased its use of solar photovoltaic (PV) technology, reaching 1.2 MW of installed capacity, the second highest among mental health and community trusts. In 2024/25, new solar PV installations at the Riverside Unit and Speedwell Centre are anticipated to cut a further 12 tonnes of CO₂e annually.

Income Generation for Sustainability

The Trust has begun leveraging the Smart Export Guarantee (SEG), generating an estimated £9,000 annually from exporting solar energy to the grid. This revenue is reinvested into sustainability projects, such as new recycling bins, cycle shelters, and EV charging infrastructure.



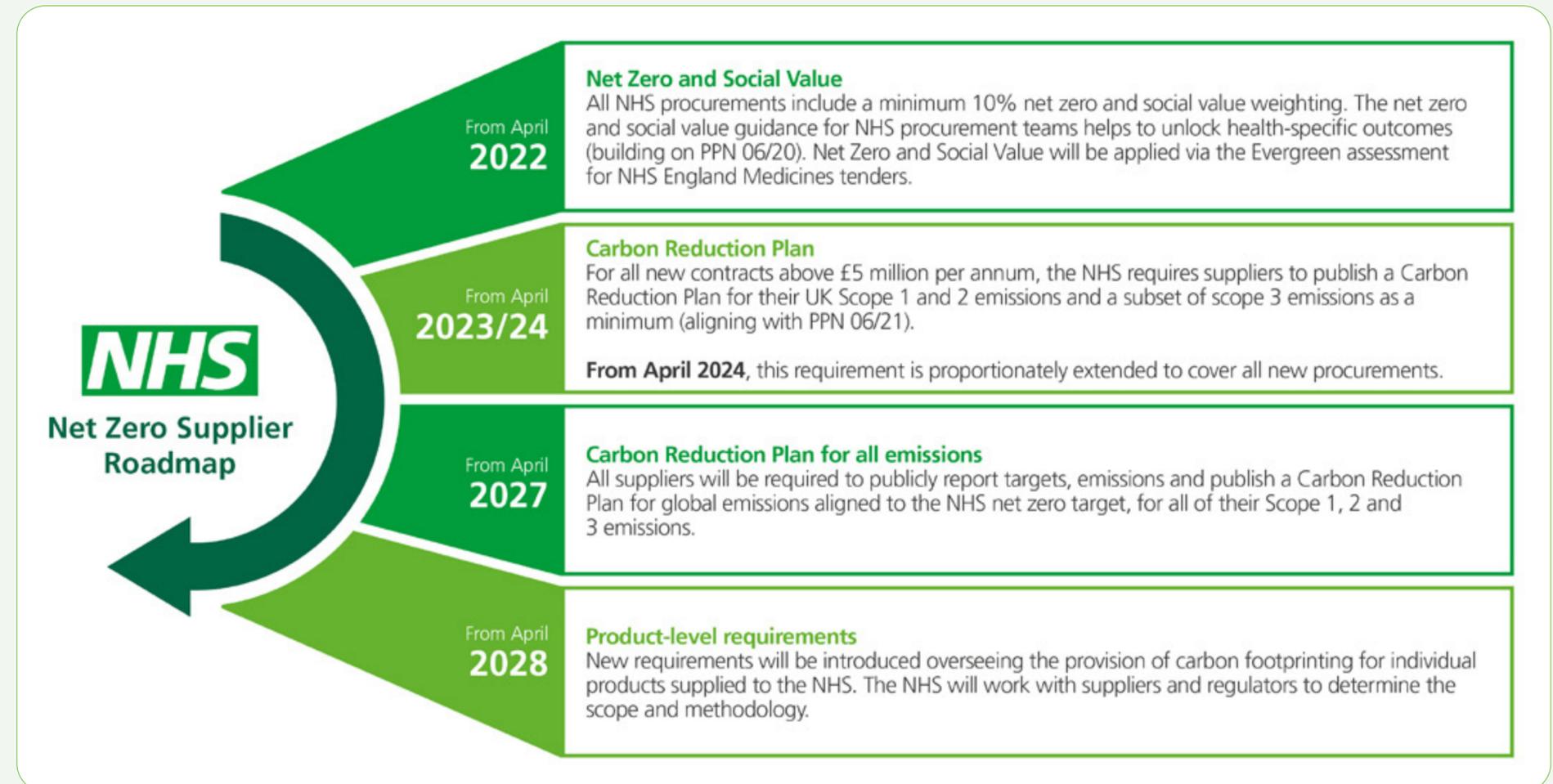
Supply Chain and Procurement

Why it matters?

Everything that we buy and use in the NHS creates pollution, uses resources and has an impact on our planet. Whether it's gloves, food, digital technology or services, it all contributes to our overall carbon footprint.

Whilst we do not control these emissions directly, we believe that we can and should use our considerable purchasing power to influence change. The NHS '[Net Zero Supplier Roadmap](#)' sets out the environmental guidelines and expectations from our NHS suppliers moving forward.

Figure 5: NHS Net Zero Supplier Roadmap



Within BSW we have a big opportunity to ensure our local suppliers are supporting our ambitions to reduce the impact of our healthcare services on the environment. The BSW Hospitals Group and the ICB share one procurement team. This means we can raise awareness and support implementation of best practice in environmental sustainability with the colleagues involved in procuring good and services on behalf of four key organisations.

We can also review our biggest contracts for opportunities to rationalise them and use our joint spending power to influence our biggest suppliers to deliver more environmentally sustainable contracts that provide better economic and social value locally.

Where are we now?

Social Value and Sustainability – Since April 2022, all above threshold NHS Procurements in BSW include a mandatory 10% social value and sustainability weighting. This means that suppliers need to evidence how they plan to contribute to our local priorities as part of delivery of contracts.

Carbon Reduction Plans (CRPs) – Since April 2024, all NHS Procurements above £5m per annum require suppliers to submit a Carbon Reduction Plan. From April 2026, all above threshold procurements will require suppliers to submit a Net Zero Commitment. Suppliers are being encouraged to register on the Evergreen Portal.

Circular Products – GWH and SFT are part of the Circular Health Economy Alliance and have a focus on minimising

single-use medical devices and consumables by promoting reusable alternatives where clinically feasible and appropriate.

Where do we want to be?

- Achieve emissions reductions in our supply chain by aligning with the NHS Net Zero Supplier Roadmap and Evergreen Supplier Assessment to ensure our suppliers are working towards our net zero goals.
- Make best use of our purchasing power across the system and strategically plan our spend to achieve value-for-money and influence environmentally sustainable practices.
- Ensure we use procurement opportunities to deliver meaningful social value initiatives which contribute to our local strategic priorities.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

How will we get there?

Key actions 2025–28	Measuring success
Meet all the national legal and regulatory requirements such as those set out in Public Procurement Policy Notices.	Procurements meet legal requirements.
Embed NHS Net Zero Supplier Roadmap requirements into all relevant procurements and ensure they are monitored via key performance indicators.	Net Zero Supplier requirements implemented in line with the roadmap.
Encourage suppliers to go beyond minimum requirement and engage with the Evergreen Sustainable Supplier Assessment.	Increase the number of top 100 BSW suppliers engaging with Evergreen Score measured annually.
All suppliers required to publish a Carbon Reduction Plan (CRP) or Net Zero Commitment aligned to our net zero targets in line with guidance.	Inclusion of Carbon Reduction Plan and Net Zero Commitment requirements in relevant procurements from April 2027.
Assess spend across BSW Hospitals Group to identify the biggest opportunities for driving environmental and value. Deliver tenders with ambitious innovative social value health benefit.	Tenders with innovative Social Value benefits delivered.
Create a social value investment project list that supports our health priorities across BSW that can be included in tenders to enable suppliers to fund or support specific projects aligned to our local priorities.	Number of tenders focusing on priority social value projects, the value and type of supplier contributions secured, and the delivery of funded projects that demonstrably support local health and wellbeing outcomes.
Explore and implement methodology to quantify social value delivered through tendering by the BSW Hospitals Group.	Social value benefits delivered as part of contracts.
Create a supplier information and engagement programme by the BSW Hospital Group with a focus on local SMEs and VCSEs.	Deliver a supplier Day for local SME suppliers across BSW.
Work with NHS Supply Chain to implement sustainable product choices across our Trusts.	Number of products moved to a more sustainable option measured annually.
Work collaboratively and share learning across the system.	Increase in number of shared learning sessions held, uptake of best practices across partner organisations, and feedback from stakeholders demonstrating improved coordination, innovation, and alignment with priorities through use of shared tools, case studies and resources.

Supply Chain and Procurement Case Study

GWH and SFT Circular Economy Alliance

Both Trusts already embrace circular economy principles by refurbishing walking aids as part of reuse initiatives and are part of the Circular Economy Alliance, which focuses on minimizing single-use medical devices and consumables by promoting reuse where clinically feasible and appropriate.

This approach will be integrated into product and supplier selection criteria during the procurement process, as well as in the development of skills, knowledge, and processes within the Trusts to support this transition.

This membership supports the vision to see an NHS with a net zero, fair, and transparent supply chain free of modern slavery through building a sustainable, ethical, and low-carbon supply chain that supports high-quality patient care while reducing environmental impact.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

Food and Nutrition

Why it matters?

Nutrition and quality of food plays a crucial role in the overall health and recovery process of people. Enhancing the quality of food provided in our healthcare settings can lead to improved patient experience, faster recovery times, and better health outcomes for both patients and colleagues.

Likewise, promoting good nutrition through healthy food choices will help to support our communities to stay well and prevent disease, reducing strain on our healthcare services.

In addition, a diet centred on whole, minimally processed foods, seasonal and local fruits and vegetables, not only supports individual well-being but can also contribute to environmental sustainability by reducing food miles and enhancing biodiversity.

In BSW supporting people to stay healthy is a key priority, this is why it is important for healthcare organisations to play an active role in promoting healthy, environmentally sustainable food wherever we can. This will directly help us to meet our goals of keeping people healthy for longer, improving outcomes and reducing our impact on the environment.

Where are we now?

Health Creation – Our [BSW Integrated Care Strategy](#) has a key focus on prevention and early intervention, aiming to reduce the prevalence of obesity and its associated health risks within the region. The strategy emphasises the importance of creating environments that support healthy lifestyles, including through healthier diets and exercise, aiming to prevent obesity before it develops.

Trust Food Strategies – Trusts across BSW are working closely with catering teams, dietitians, and suppliers to provide healthier, locally sourced meals for patients, colleagues, and visitors, whilst reducing food miles and waste.

Food Waste – We have taken significant steps to improve measuring and reducing of food waste at our Trusts.

Digital meal ordering – Trusts have implemented or are working towards implementing digital meal ordering systems. This enables patients to order food as close to mealtimes as possible which helps to reduce food waste.

Carbon labelling of menus – SFT have implemented ‘Foodsteps’ enabling visible carbon labelling to their retail menu options so people can make informed choices about the food they are eating.

Reductions in single use items – Trusts have introduced initiatives to reduce catering plastics, for example, through introducing a discount for using reusable cups and lunchboxes.

Where do we want to be?

- People in BSW are proactively supported to eat healthily, supporting wellbeing and preventing ill health.
- Food provided to colleagues and patients caters to individual needs and is healthy, seasonal and local wherever possible.
- Food waste is minimised.

How will we get there?

Key actions 2025–28	Measuring success
Continue to promote diets based on whole, minimally processed foods, seasonal and local fruits and vegetables and healthy eating across the ICS.	Food strategies and diet advice services support health creation and sustainability.
Continue to implement food and drink strategies in alignment with the National standards for healthcare food and drink where reasonably possible and cost-effective.	Organisations to have food and drink strategies align with National standards for healthcare food and drink where reasonably possible and cost-effective.
Trusts to consider opportunities to buy sustainably sourced ingredients.	Increase in sustainably sourced products.
Trusts to consider opportunities to make menus healthier and lower carbon by supporting the provision of seasonal menus high in fruits and vegetables and low in heavily processed foods.	Review of menus conducted annually.
Trusts to measure food waste in line with the Estates Returns Information Collection (ERIC) and set reduction targets.	Reduction in food waste improved annually.



Food and Nutrition Case Study

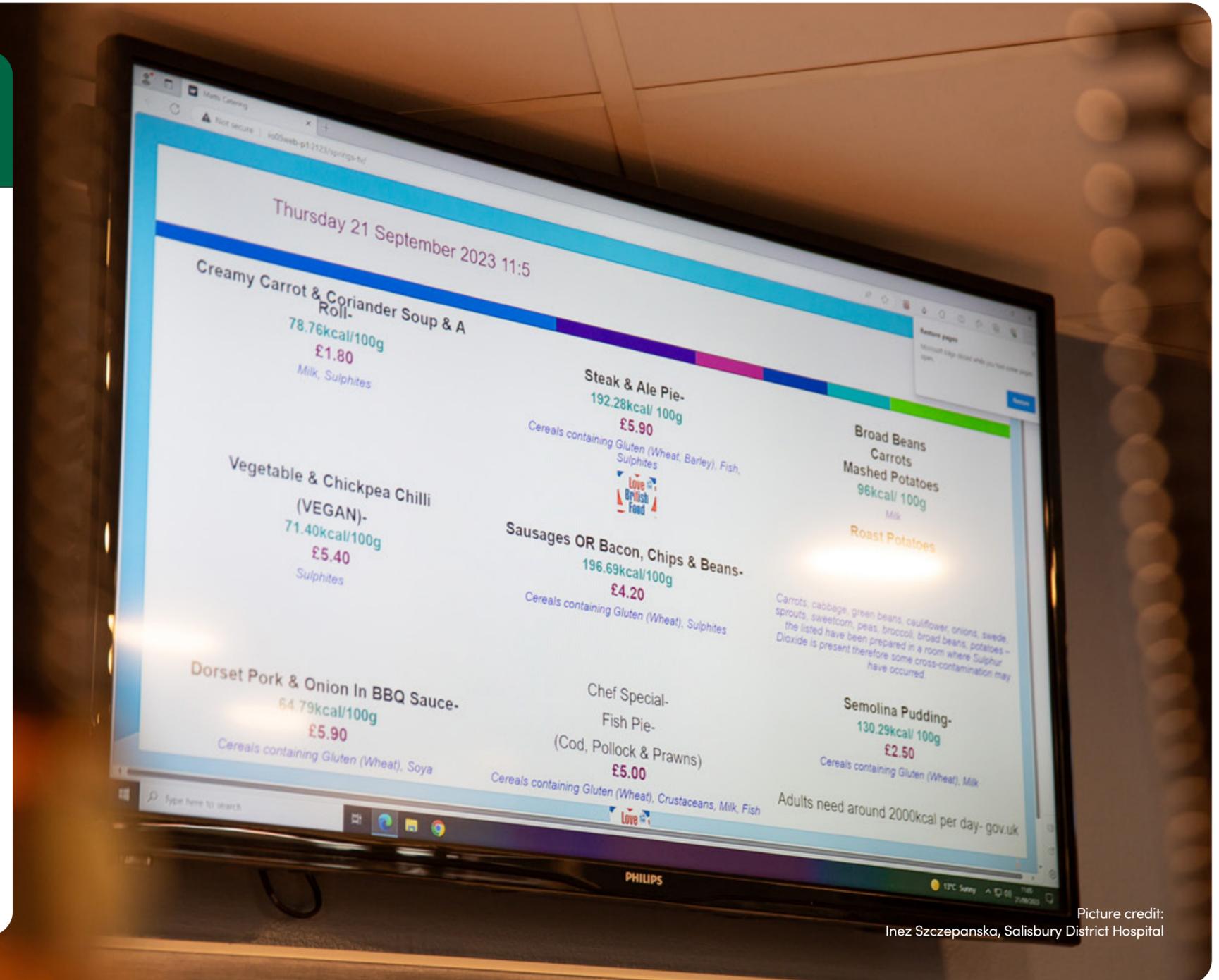
Foodsteps at Salisbury NHS Foundation Trust

Salisbury NHS Foundation Trust introduced 'Foodsteps' carbon labelling in its retail outlets, showing the environmental impact of menu items.

Impact:

- The labels raise awareness of food-related emissions.
- Encourages lower-carbon choices.
- Supports the Trust's net zero goals.

Combined with measures like food waste to anaerobic digestion and reusable containers, the initiative strengthens sustainable catering across the hospital.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

Adaptation

Why it matters?

We need to take collective action, as a system, to respond to climate change. We are already experiencing the impacts of a changing climate on our healthcare system.

[The Met office recently confirmed that 2025 has been the hottest summer on record in the UK](#). More extreme and frequent weather events such as heatwaves and storms will increasingly impact our ability to provide healthcare services.

We also know that climate change will affect the health of people in BSW a variety of ways, and those with existing vulnerabilities and deprivation are likely to be the worst affected.

In response to this, we commit to undertaking adaptation planning as a system so we can prepare for the worst of these impacts and work together to overcome the associated challenges. Successfully adapting to climate change will require funding to be identified and secured to deliver priority adaptation measures.

Where are we now?

Planning for immediate risks and our response to extreme weather events

Emergency Preparedness, Resilience and Response (EPRR) Standards – BSW ICB and all NHS-funded health and care organisations across the area are well-prepared for extreme weather events. We all follow NHS England’s EPRR standards, with clear action plans in place for different types of extreme weather events.

Partnership working with local resilience forums – BSW partners with local resilience forums (covering areas like Bath & North East Somerset, Wiltshire, and Swindon) to assess climate-related risks. These risks are reviewed regularly and escalated to senior leaders when needed, based on the National Risk Register and local Community Risk Registers, as required by the Civil Contingencies Act 2004.

Weather warning systems – We receive weather warnings from trusted sources like the Met Office and the UK Health Security Agency, and also work closely with local councils for guidance on things like gritting routes and flood risks.

Adverse weather plans – In the event of floods, snow, ice, heatwaves, or utility failures, multi-agency plans are ready to support essential services, such as providing 4x4 transport, reaching vulnerable people, and keeping the public informed. There are also plans for responding

to disruptions to roads and railways, to help stranded passengers and vulnerable patients and targeted communications to the public on how to be prepared to minimise risk to their health.

Cascading information to the public – Information is shared with the public through a coordinated approach involving all key emergency responders. The ICB has systems to notify the NHS if an incident occurs and helps ensure everyone gets the same, clear message.

Debriefs and lesson learnt – After every incident, training, or exercise, lessons are reviewed and used to improve future plans.



Planning for a changing climate in the longer term

BSW Hospitals Group Climate Risk Assessment and Adaptation Plan – Our BSW Hospitals Group has conducted a climate change risk assessment to identify healthcare vulnerabilities, evaluate risks, and recommend steps for resilience. The report includes local risk analysis, current adaptation examples, an action plan, and guidance to help our hospitals to respond to increasingly severe and frequent weather impacts on health & services.

Increased resilience through digitally enabled, community-based care – In line with the NHS 10-Year Health Plan, care is shifting closer to home through integrated neighbourhood services and expanded remote, digital options where clinically appropriate. This enhances resilience by reducing travel needs and enabling remote monitoring and delivery of care.

Where do we want to be?

- Climate change risks and adaptation planning is embedded into our business continuity and longer-term planning.
- Healthcare sites and services are resilient to climate change impacts and prepared for severe weather events.
- Impacts of climate change are embedded into future strategies and decisions in the design of new health and care services including infrastructure requirements.



How will we get there?

Key actions 2025–28	Measuring success
Continue to comply with the NHS Core Standards for emergency preparedness, resilience and response (EPRR) and the NHS Standard Contract to ensure we have plans and mutual-aid arrangements in place so can continue to provide essential healthcare services during adverse weather events.	Climate-risks in risk registers and business continuity plans in place. Plans reviewed in line with standards.
Adhere to best practice on governance and business planning for climate risks and opportunities as outlined in the governmental Task Force on Climate Related Financial Disclosures Guidance.	Annual reports compliant and published in line with Task Force on Climate Related Financial Disclosures requirements.
Undertake the NHS England: A climate adaptation framework for NHS organisations in England to identify current level of maturity, agree target maturity level across the system and develop timelines for progression through Climate Adaptation Framework.	Maturity level improved across the system to agreed level.
Review existing climate risk assessment and adaptation plans undertaken across BSW, as well as debriefs from relevant EPRR incidents, for learning that can be shared across the system to support more strategic healthcare system level resilience planning.	Review conducted.
Ensure any key adaptation actions required are taken forward into a system-level and organisational-level action plans with appropriate funding identified and monitoring mechanism for delivery.	Action plan and monitoring in place.
Ensure climate risks are embedded into all future ICS strategies and key decision making on how we deliver care. This includes our future ICS infrastructure strategy and capital prioritisation process.	All strategies to consider climate risks as standard. Assessment of climate risks required in business cases.
Continue to work in partnership to align adaptation planning with local resilience partners such as local authorities. Any existing plans are integrated into our emergency planning and climate adaptation planning.	Opportunities maximised for learning and delivery of joint initiatives to address climate risks.

Adaptation Case Study

Devizes Integrated Health Centre, Wiltshire

Opened in February 2023, Devizes Integrated Health Centre (IHC) is one of the country's first fully integrated healthcare centres, with GP appointments taking place alongside other health and care services such as outpatient and community clinics.

The modern facility is also leading the field in sustainable design. The centre is one of the NHS' first net zero buildings with an energy EPC rating of A+, which utilises green technology, such as heat pumps and solar panels, to generate electricity and heat to serve the building. Other features such as building fabric insulation and the adoption of natural ventilation contribute to making the building more energy efficient and resilient to a changing climate.

In preparation for the future, the building was also designed so that all internal partitions are independent of the structural columns, meaning their position can be adjusted with ease in the future as the use of the building or spatial requirements change, providing flexibility and resilience without the need for costly structural modifications. The facility was made possible following an £11 million investment from the NHS.

We recognise the value IHC brings to the Wiltshire community and want to build more IHCs across BSW to support the provision of joined-up care in sustainable, fit for purpose buildings.

Our ambition is to establish four more integrated health centres over the next 10 years, of which one (Trowbridge IHC) is already in progress and due to open early in 2026.



Green Spaces for Health

Why it matters?

Protecting nature and increasing biodiversity are not only good for our planet and natural environment, there are many proven health benefits to increased access to nature and green space.

Nature plays a vital role in supporting wellbeing and recovery within healthcare settings. Access to attractive, accessible green space offers places for rest and reflection for patients, visitors and colleagues, and can help during times of stress or illness.

The NHS has a growing role in supporting the recovery of nature and biodiversity across its estate, helping to restore natural ecosystems and enhancing green infrastructure, and contributing to a more climate-resilient, environmentally sustainable future.

Although taking action to improve green spaces isn't a key requirement in the Greener NHS Green Plan Guidance, organisations across BSW understand the importance and benefits this can bring to our healthcare delivery. For this reason, we are committed to maximising the quality of on-site green spaces for nature recovery and climate change mitigation and adaptation.

Where are we now?

Green space improvements are ongoing across our sites, some key examples of projects and initiatives delivered include:

Developing green spaces that support health and wellbeing

Improving access to green spaces – Mapping and signposting of green spaces, guided walks and nature-based activities are being delivered to promote nature connection and wellness for colleagues, patients, and visitors. For example, SFT have monthly nature walks organised in spring through to Autumn.

Improving the quality of green spaces – A number of projects have been delivered to improve the quality of green spaces provided for use by colleagues, patients and visitors for example, RUH have developed and enhanced their wellbeing gardens based on [forest garden principles](#).

Improving green spaces for nature

Increasing biodiversity – A number of our trusts have conducted surveys and have plans in place to improve biodiversity on their sites through delivering specific projects such as sowing wildflowers.

Tree planting – Tree planting programmes delivered in collaboration with The NHS Forest have supported the planting 100s of trees across our NHS estates.

Working with the local community – A number of projects have been delivered in collaboration with local authority and VCSE groups. For example, the RUH has been working collaboratively with local authorities arboriculturists and has seen a 10% increase in tree canopy cover since 2019.

Working with Local Authorities – We actively collaborate with Local Authorities on local planning to support the creation of spaces that promote wellbeing, recognising the critical role of the built environment in shaping health outcomes. This includes considerations on the role of greenspaces to support healthy place-making.

Where do we want to be?

- Colleagues, patients and visitors have access to green spaces that support health and wellbeing on our sites.
- Our greenspaces are ecologically rich, designed to enhance local biodiversity and climate resilience through regenerative practices that support nature recovery.
- Protecting nature is fully embraced as a core pillar of healthcare – central to prevention, recovery, and long-term wellbeing for people and the planet alike.

How will we get there?

Key actions 2025-28

Work with local partners including government and the voluntary sector to improve green spaces available across our estate so they encourage nature recovery and are better able to support the wellbeing of our colleagues, patients and visitors.

To continue to work closely with Local Authorities as part of the Local Planning Process to ensure we look to develop policies that support health and prevention.

Measuring success

Greenspace management that supports people and nature, key metrics measured annually (e.g. % greenspaces, biodiversity net gain, colleague, patient, visitor feedback, and case studies).

Integrating health and climate objectives into policy that ensures development contributes to a resilient, low-carbon, and healthy environment.

GETTING THERE



Green Spaces for Health Case Study

Green Spaces and Biodiversity: BioBlitz at Salisbury NHS Foundation Trust

Initiative

Since 2024, the Trust has conducted on-site BioBlitz events at Salisbury District Hospital. Colleagues and volunteers spend a day surveying the estate to record as many species as possible. Led by a Sustainability Champion, the events have identified around 190 species so far.

Impact

- Provides a baseline for hospital estate management.
- Engages colleagues and raises awareness of sustainability.
- Demonstrates the Trust's role as an "anchor institution" supporting community and environmental health.

Next Steps

Salisbury NHS plans to continue BioBlitz days annually, expand participation, and use the findings to guide greener landscaping and biodiversity enhancements.



Roadmap

Key national targets and milestones

GETTING THERE



How will we track progress?

Governance and Accountability

The delivery of this Green Plan will be overseen by BSW ICB's designated board-level Net Zero Lead via the Finance and Infrastructure Committee and the ICB Board, pending final confirmation under the revised ICB governance model.

Monthly 'Greener BSW' group meetings with key representatives of our partner organisations involved in the delivery of this plan will continue to promote cross-system collaboration, problem-solving, and shared learning.

Governance structures will be reviewed to ensure alignment with the ICB's evolving functions and sustainability priorities.

Reporting

We will review ongoing progress against the actions in this plan every quarter, supported by a performance tracker focused on the key priority areas for action and will report this progress into the Finance and Infrastructure Committee (or delegated committee) every six months.

Formal progress updates will also be shared with the ICB Board annually.

Each year, ICBs and Trusts will publish a summary of Green Plan progress in their annual reports. This will include actions taken and planned, supported by quantitative data.

Reporting will comply with HM Treasury requirements and include relevant disclosures aligned with the Task Force on Climate-related Financial Disclosures (TCFD) as part of NHS sustainability reporting.

Figure 6: BSW Green Plan Governance Overview



How will we track progress?

Data and metrics

The ICB and Trusts will continue to submit data quarterly and annually to NHS England on the Greener NHS metrics set out in Appendix 3 to enable national benchmarking and progress tracking.

Local progress tracking within BSW against targets and actions will be monitored using current data sources available as appropriate, such as the existing Greener NHS metrics and dashboards and metrics captured as part of NHS Standard Contract requirements.

Where tracking additional metrics adds value and enhances delivery and accountability, we will explore and agree the use of specific local metrics. We will also explore the development of a system wide dashboard to support the use of these metrics and data.

Monthly



Greener BSW Group meetings to share progress, challenges and solutions.

Quartely



Progress updates on actions shared through the Greener BSW Group.

Greener BSW Group performance tracker (RAG rating).

Greener NHS Data Collection.

6 monthly



Progress updates on actions shared through the Greener BSW Group.

BSW Green Plan performance dashboard reported to Finance and Infrastructure Committee to monitor progress.

Annually



Formal progress update shared to the ICB Board.

Inclusion of Green Plan progress in Annual Report including TCFD compliance.

Annual data submitted to NHS England.

How you can help to inform our strategy

We are committed to ensuring everyone is able to contribute to designing and shaping more environmentally sustainable health services in BSW.

We will work with our partners, our colleagues and our communities to undertake an annual review of the strategy.

This will ensure we maintain oversight and will enable us to reflect any changes in priorities and population need.

As part of this process, we are keen to understand your views and thoughts on our strategy and future health services.

If you would like to get in touch please contact us:
[Bath and North East Somerset, Swindon and Wiltshire ICB](#)



Appendix 1 – Glossary

Adaptation: The world has already warmed by 1.1–1.2°C above pre-industrial levels, and some of the impacts of the current heating are irreversible. Even if we succeed in drastically cutting emissions, we will still need to adapt to the impacts of more extreme weather. Infrastructure, including buildings, will need to be adapted to ensure we can continue providing healthcare services.

Air Pollution: The presence and introduction into the air of a substance that is harmful to human health.

Anaesthetic Gases: Gases used to keep patients unconscious during surgery.

Biodiversity: The variety of plant and animal life in the world or in a particular habitat. A high level of biodiversity is usually considered important and desirable.

Carbon Footprint: The total greenhouse gas emissions caused by an individual, event, organisation, service, place, or product, expressed as carbon dioxide equivalent.

Circular Economy: An economic system aimed at eliminating waste and the continual use of resources through principles like reuse, sharing, repair, refurbishment, remanufacturing, and recycling.

Climate Change: Long-term shifts in temperatures and weather patterns. These shifts may be natural, but since the 1800s, human activities have been the main driver of climate change, primarily due to the burning of fossil fuels.

Decarbonising: Reducing the amount of carbon emissions released into the atmosphere due to an environment or process.

Dry Powder Inhaler: A device that delivers medication to the lungs in the form of a dry powder.

Fossil Fuels: Non-renewable energy sources like coal, oil, and natural gas, formed from ancient plant and animal remains. Burning them releases greenhouse gases, contributing to climate change and environmental damage.

Greenhouse Gas: A gas that contributes to the greenhouse effect, leading to climate change (e.g., CO₂).

Greener NHS: The NHS England team responsible for the Greener NHS programme.

Heat Decarbonisation Plan: A strategy to reduce and eventually eliminate the use of fossil fuels for heating.

Integrated Care Board: A statutory NHS organisation responsible for planning and commissioning health and care services in a local area.

Integrated Care System: A partnership of organisations that come together to plan and deliver joined-up health and care services and to improve the health of people who live and work in their area.

Metered-Dose Inhalers: A device that delivers a specific amount of medication to the lungs in the form of a short burst of aerosolized medicine that is usually self-administered by the patient via inhalation.

Mitigation: Efforts to cut or prevent the emission of greenhouse gases, limiting the magnitude of future warming. It may also encompass attempts to remove greenhouse gases from the atmosphere.

Net Zero Emissions: Achieving a balance between the amount of greenhouse gas emissions produced and the amount removed from the atmosphere.

NHS Carbon Footprint: The carbon footprint that NHS organisations have the greatest direct control over, including all scope 1, all scope 2, and certain scope 3 greenhouse gas emissions sources.

NHS Carbon Footprint Plus: The sum of all scopes 1, 2, and 3 sources plus patient and visitor travel greenhouse gas emissions.

Procurement: The process used to purchase goods and services.

Renewable Energy: Energy from sources that are naturally replenishing but flow-limited, such as solar, wind, and hydroelectric power.

Social Prescribing: Connecting people to non-medical community services, like exercise or social groups, to improve wellbeing and address issues such as loneliness or mental health. It's a holistic approach often supported by a link worker.

Sustainability: Meeting our own needs without compromising the ability of future generations to meet their own needs. It includes concerns for social equity and economic development, not just environmentalism.

System: Refers to the Bath and North East Somerset, Swindon and Wiltshire Integrated Care System (BSW Together). This is a collaborative network of NHS organisations, local authorities, voluntary sector groups, and other partners working together to improve health and care services across the region.

Ultra-Low Emission Vehicle: A vehicle that emits extremely low levels of motor vehicle emissions compared to other vehicles.

Zero-Emission Vehicle: A vehicle that emits no exhaust gas from the onboard source of power.



Picture credit:
Inez Szczepanska, Salisbury District Hospital

Appendix 2 – Abbreviations

AWP – Avon and Wiltshire Mental Health Partnership

BANES – Bath and North East Somerset

BEIS – Department for Business, Energy and Industrial Strategy

BMS – Building Management System

BREEAM – Building Research Establishment Environmental Assessment Method

BSW – Bath and North and East Somerset, Swindon and Wiltshire

CAZ – Clean Air Zone

CDU – Central Destruction Unit

CFO – Chief Finance Officer

CRP – Carbon Reduction Plan

DPI – Dry Powder Inhaler

EPR – Electronic Patient Record

EPRR – Emergency Preparedness, Resilience and Response

ERIC – Estates Returns Information Collection

GTF – Green Task Force

GHGP – Greenhouse Gas Protocol

GWH – Great Western Hospital

ICB – Integrated Care Board

ICS – Integrated Care System

ICT – Information and Communications Technology

ICR – Integrated Care Record

IHC – Integrated Health Centre

INTs – Integrated Neighbourhood Teams

KPIs – Key Performance Indicators

LA – Local Authority

LED – Light Emitting Diode

MDIs – Metered Dose Inhalers

NHS – National Health Service

OHFT – Oxford Health NHS Foundation Trust

PAS – Patient Administration System

PV – Photovoltaic (Solar Panels)

QI – Quality Improvement

QSIR – Quality Service Improvement and Redesign

RUH – Royal United Hospitals Bath

SABAs – Short-Acting Beta-2 Agonists

SEG – Smart Export Guarantee

SFT – Salisbury NHS Foundation Trust

SMR – Structured Medication Review

SusQI – Sustainability in Quality Improvement

TCFD – Task Force on Climate-related Disclosures

tCO₂e – Tonnes of Carbon Dioxide Equivalent

ULEV – Ultra-Low Emission Vehicle

VCSE – Voluntary, Community and Social Enterprise

ZEV – Zero-Emission Vehicle

WECA – West of England Combined Authority

Appendix 3 – Key metrics

The table below sets out the national metrics for tracking progress against green plan delivery which are collated on a quarterly and annual basis as part of regular data gathering by the Greener NHS team.

The list is not exhaustive and may be updated as new data streams become available. This data will be used where applicable for national, regional and organisational monitoring and benchmarking but will not be published in line with guidance.

Focus area	Metric	For use by	Data source
Workforce	Named board-level lead for green plan delivery	Trusts and systems	Greener NHS dashboard (from Q1 25/26)
Medicines	Emissions (tCO ₂ e) and volume (litres) of nitrous oxide by trust	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Medicines	Emissions (tCO ₂ e) and volume (litres) of nitrous oxide and oxygen (gas and air) by trust	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Medicines	Average inhaler emissions per 1,000 patients	Systems (aggregate of primary care data)	Greener NHS dashboard (from Q1 25/26)
Medicines	Mean emissions of Short-acting beta-2 agonists (SABAs) inhalers prescribed	Systems (aggregate of primary care data)	Greener NHS dashboard
Medicines	% of non-SABA inhalers that are MDIs	Systems (aggregate of primary care data)	Greener NHS dashboard
Travel and transport	% of owned and leased fleet that is ultra-low emission vehicle (ULEV) or zero-emission vehicle (ZEV)	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Travel and transport	Total fleet emissions	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Travel and transport	Does the organisation offer only ZEVs in its salary sacrifice scheme	Trusts and systems (aggregate of trust data)	Greener NHS dashboard

Appendix 3 – Key metrics

Focus area	Metric	For use by	Data source
Travel and transport	Does the organisation operate sustainable travel-related schemes for colleagues (for example, salary sacrifice cycle-to-work)	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Estates and facilities	Emissions from fossil-fuel-led heating sources	Trusts and systems (aggregate of trust data)	Greener NHS dashboard
Estates and facilities	Number of oil-led heating systems	Trusts and systems (aggregate of trust data)	Estates Return Information Collection/ Greener NHS dashboard (from Q4 24/25)
Estates and facilities	% of gross internal area covered by LED lighting	Trusts and systems (aggregate of trust data)	Estates Return Information Collection/ Greener NHS dashboard (from Q4 24/25)
Estates and facilities	% of sites with a heat decarbonisation plan	Trusts and systems (aggregate of trust data)	Estates Return Information Collection/ Greener NHS dashboard (from Q4 24/25)
Supply chain and procurement	Inclusion of Carbon Reduction Plan and Net Zero Commitment requirements in all relevant procurements	Trusts and systems	Greener NHS dashboard
Supply chain and procurement	Inclusion of requirements for a minimum 10% net zero and social value weighting in procurements, including defined KPIs	Trusts and systems	Greener NHS dashboard
Food and nutrition	Weight (tonnes) of food waste, with further break down by spoilage, production, unserved and plate waste	Trusts and systems (aggregate of trust data)	Estates Return Information Collection
Adaptation	Number of overheating occurrences triggering a risk assessment (in line with trust's "heatwave" plan)	Trusts and systems (aggregate of trust data)	Estates Return Information Collection
Adaptation	Number of flood occurrences triggering a risk assessment	Trusts and systems (aggregate of trust data)	Estates Return Information Collection

Appendix 4 – Key national and local strategies

The BSW Green plan has been produced with reference to the following strategies and core documents:

National

[Building a Net Zero NHS](#)

[NHS Net Zero Travel and Transport Strategy](#)

[NHS Supplier Roadmap](#)

[NHS Net Zero Building Standard](#)

[NHS Clinical Waste Strategy](#)

BSW Strategies

[BSW Integrated Care Strategy 2023–28](#)
and [Implementation Plan 2025](#)

BSW Infrastructure Strategy 2025–35 (in development)

BSW Digital Strategy 2026–29 (in development)

[GWH Green Plan 2025–28](#)

RUH Green Plan (in development)

[Oxford Health Green Plan 2025–28](#)

[Salisbury Green Plan 2025–28](#)

[AWP Green Plan 2025–30](#)

[HealthHero Integrated Care CRP 2024](#)

[HCRG CRP 2024](#)

[Bath and North East Somerset Council Climate Strategy 2019–2030](#)

[Wiltshire Council Climate Strategy 2022–27](#)

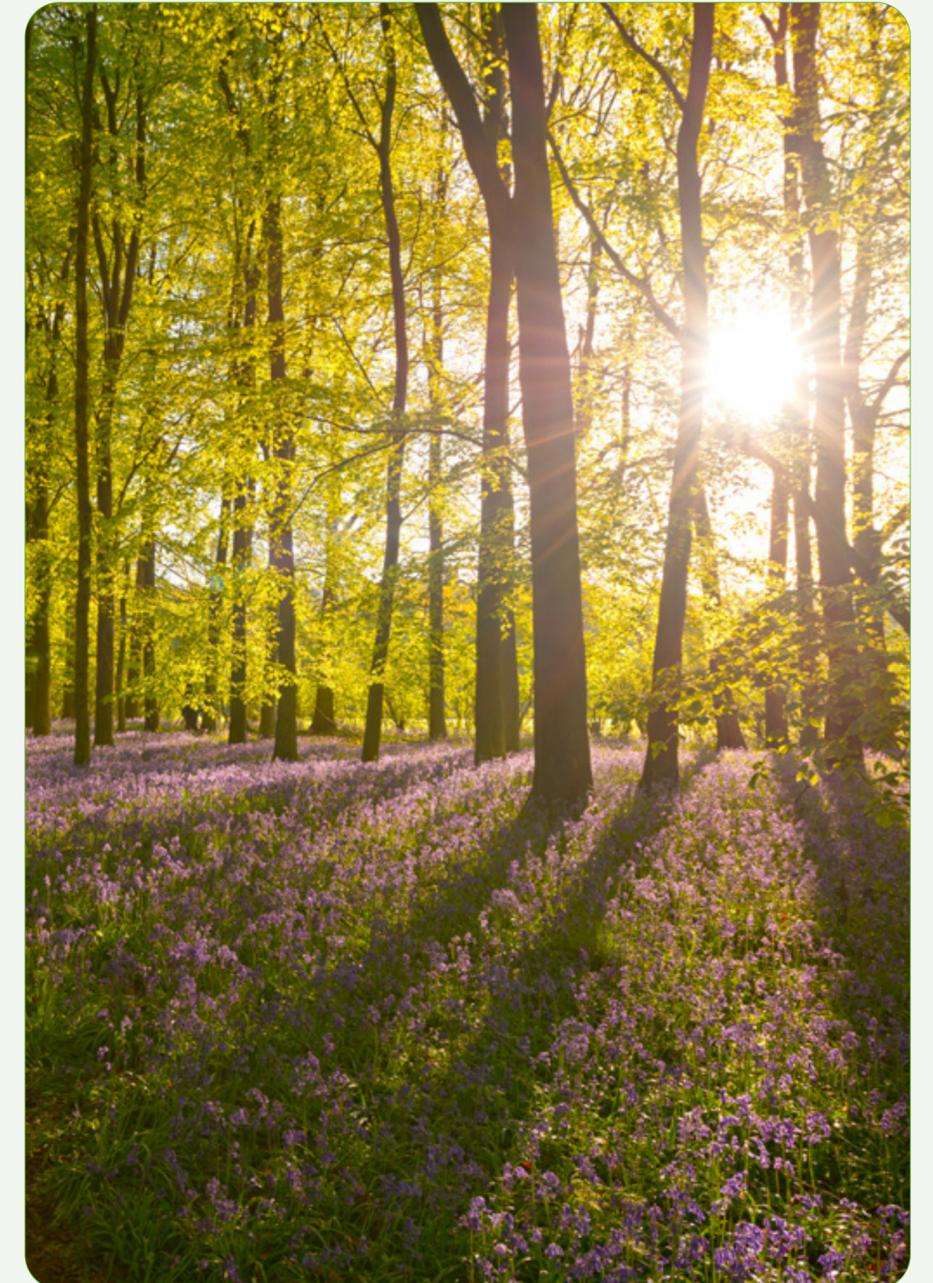
[Swindon Plan 2024–27](#)

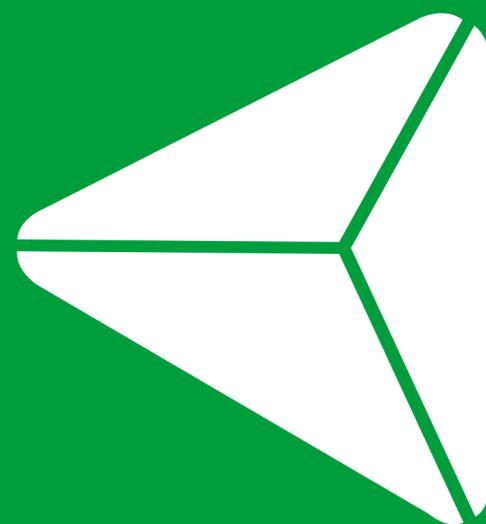
[Joint Health and Wellbeing Strategy | Bath and North East Somerset Council 2024–30](#)

[Joint Health and Wellbeing Strategy | Swindon 2023–33](#)

[Joint Health and Wellbeing Strategy | Wiltshire 2023–32](#)

[Wiltshire and Swindon Local Nature Recovery Strategy 2025](#)





Bath and North East Somerset, Swindon and Wiltshire Together

[bsw.icb.nhs.uk](https://www.bsw.icb.nhs.uk)

Published November 2025

BSW Green Plan Stakeholder Engagement Record

Job Role	Organisation	Meeting Date
Energy and Sustainability Manager	AWP	24 July 2025
Associate Director for EPRR and Deputy Accountable Emergency Officer	BSW ICB	06 August 2025
EPRR Lead	BSW ICB	06 August 2025
Associated Director of Estates	BSW ICB	06 August 2025
Regional Energy and Environmental Manager	NHS Property Services	06 August 2025
Assistant Clinical Director Vaccination and Immunisation	BSW ICB	08 August 2025
Associate Director for Patient Safety and Quality, All Age Continuing Care, ABI, CYP Complex Care	BSW ICB	08 August 2025
Head of IT	BSW ICB	13 August 2025
Procurement Transformation Lead	SFT	13 August 2025
Head of Estates & SLT Member – BSW Community	HCRG	14 August 2025
Director of Primary Care	BSW ICB	14 August 2025
Associate Director of Pharmacy	BSW ICB	14 August 2025
Chief Pharmacist	BSW ICB	15 August 2025
Coordinating Pharmacist	BSW ICB	15 August 2025
Head of Sustainability	GWH	28 August 2025
Sustainability Officer	GWH	28 August 2025
Facilities Manager	Health Hero	29 August 2025
Sustainability Manager	Oxford Health	31 August 2025
Energy Manager	RUH	31 August 2025
Sustainability Climate Lead	BaNES LA	03 September 2025
Team Manager – Energy Transformation	BaNES LA	03 September 2025
Strategic Sustainability Lead	Swindon LA	03 September 2025
Head of Climate Team	Wiltshire LA	03 September 2025
Sustainability Manager	SFT	04 September 2025
Senior Officer – Health and Environment (Southwest Region)	Natural England	04 September 2025
Sustainability Delivery Lead NHS England Southwest	NHS England	23 September 2025

BSW Green Plan Planning Workshop Attendance
Date: 18 August 2025

Job Role	Organisation
Project Manager [Facilitator]	SCW CSU
Junior Consultant	SCW CSU
Associate Director of Estates	BSW ICB
Estates Change Manager	BSW ICB
Sustainability Officer	GWH
Energy Manager	RUH
Sustainability Manager	RUH
Head of Estates & SLT Member – BSW Community	HCRG
Property & Facilities Manager	HCRG
Sustainability Manager	Oxford Health
Energy and Sustainability Manager	AWP
Facilities Manager	Health Hero