

# NHS Gloucestershire Clinical Commissioning Group Sustainability Report 2015/16



#### **Foreword**

Gloucestershire CCG recognises its role to improve health now and for future generations and to minimise our reliance on finite natural resources. Climate change is one of the greatest threats to our health and wellbeing and it is already affecting health across the globe.

Through adopting a sustainable approach and enabling individuals and communities to lead healthy lives we can protect natural resources, strengthen communities and enhance the quality of life for everyone.

Dr. Andy Seymour

Clinical Chair, NHS Gloucestershire Clinical Commissioning Group

#### Introduction

This report shows Gloucestershire Clinical Commissioning Groups' progress on sustainable development, including how we are implementing new models of care that seek to prevent unnecessary admissions; to reduce travel and to support self-care.

Our sustainable development policy was reviewed and extended to include the updates from the NHS Sustainable Development Unit in October 2015.

We recognise that the majority of our carbon emissions derive from our commissioning activity and therefore we work with our provider trusts to share good ideas and to improve overall performance across Gloucestershire. We also take action to minimise environmental impacts at our place of work through saving energy and reducing waste.



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## Carbon footprints of the CCG and our main providers

86.8%¹ of our carbon footprint comes from our commissioned services therefore a large part of the CCG's sustainability responsibility falls to ensuring that the services that we commission are playing their part to reduce the use of natural resources whilst supporting healthy lifestyles.

Additionally the carbon footprint of what we buy (procurement) accounts for a further 12.9% of our carbon footprint and this is almost entirely (99%) accounted for by pharmaceuticals (medicines) which costed £97.5 million in 2015/16. The CCG has significant programmes of work in place to optimise the use of medicines across Gloucestershire.

Table 1: Breakdown of GCCG Carbon Footprint

Category	% CO <sub>2</sub> e	TCO2e
Energy	0.2%	275
Travel	0.1%	119
Procurement	12.9%	19,701
Commissioning	86.8%	132,703

#### Provider performance

Table 2: Benchmarking of the provider performance

2015/16	GHFT	<sup>2</sup> gether	GCS
Number of employees	6,425	1,699	3,600
GIA buildings m²	163,807	18,396	43,671
Carbon footprint (TCO2 <sub>e</sub> ) energy	21,351	4,580*	3,859
Tonnes CO <sub>2</sub> e/m <sup>2</sup>	0.13	0.25	0.09
% recycled	23%	44%	39%

GCCG works with its providers through a quarterly meeting to share best practice on sustainability and to identify where there are opportunities for the main providers to work together. We will work to ensure that providers optimise the efficient use of resources.

All providers are asked to share their sustainability policies and plans as part of our commissioning and contracting processes.

<sup>\*2</sup>gether are currently disputing some electricity data with British Gas.



#### Case Study: Gloucestershire Hospitals Foundation Trust

Gloucestershire Hospitals NHS Foundation Trust produced 21,351 tonnes of  $CO_2$ e in 2015/16 and this is a 28% decrease on the carbon emissions from the previous year when the Trust declared 29,664t  $CO_2$ e.

Several waste and travel related awareness events have been held. Representatives from the Think Travel campaign (financed by Gloucestershire County Council) attended and spoke to staff and visitors, handing out pedometers and maps showing cycle routes and giving advice about active travel. New Trust employees now receive a leaflet outlining all the options for travelling to work with the aim of encouraging them to consider alternative methods of getting to work.

A series of waste awareness events have promoted the use of recycling, making staff aware of the cost difference between landfill and recycling and showing them exactly what can go into a recycling bin. This has resulted in an increase in the number of recycling bins around the Trust and a corresponding increase of over 40% in the amount of recycling.

In 2015 the Sustainability Team was established and there are now over 50 staff volunteers from all areas of the organisation. The Sustainability Team are advocates for good sustainability practice, helping to raise awareness on sustainability issues, encouraging others and leading by example to create a positive behavioural change amongst all staff. In this initial year they are helping to reduce energy and water consumption, minimise waste and increase recycling and some have changed their methods of travel to work by developing their own car share networks. The Team have received training and attend quarterly meetings where they can share their ideas and provide support and encouragement to each other.

The Procurement Shared Service started to implement a new Sustainable Procurement Strategy. This has identified six procurement areas with a high carbon impact (medical instruments, food and drink, chemicals, pharmaceuticals, construction and waste).

#### Case Study: <sup>2</sup>gether NHS Foundation Trust

<sup>2</sup>gether has focussed on reducing waste this year with a 43% reduction in clinical waste; this has been achieved through a change to waste policy resulting in less waste incineration.

A successful food waste collection has been implemented at Wotton Lawn site. They have also created a 'swapshop' called 'Anytakers' to ensure that items e.g. office chairs are reused within the Trust rather than being disposed of. The increased use of the Anytakers re-use webpage has saved <sup>2</sup>GFT approx. £10K by removing the need to procure new items and cost avoidance from waste disposal fees.

Rainwater harvesting for toilet flushing has been implemented at one site.

<sup>2</sup>gether has implemented a number of energy saving projects including the rollout of LED lighting at five of its properties. Additionally, other gas-saving measures have been implemented including the replacement of three gas boilers to high efficiency boilers.



#### Case Study: Gloucestershire Care Services NHS Trust

In 2015/16 Gloucestershire Care NHS Services Trust (GCS) continued to take action to reduce its carbon footprint and to reduce its environmental impact across key areas of the Trust.

GCS has completed its programme of renewable energy with two installations of solar photovoltaic panels at Stroud General Hospital and Cirencester Hospital; these will benefit the Trust financially through both energy savings and the Feed In Tariff. This means that all community hospitals in Gloucestershire have some of their energy demands supplied by renewable energy.

GCS has also completed its rollout of its new waste policy, which means that more waste is recycled and less is sent for incineration. Recycling awareness has been refreshed and promoted through new waste posters throughout and the dissemination of additional recycling bins.

Over the last year, the Trust also increased the number of volunteers by over 15% from 327 in 2014-15 to 379 in 2015-16. GCS continues to promote active travel and has a walking group in place to encourage staff to get active.



#### **Procurement**

As identified in the carbon footprint 12% of the CCG's carbon footprint comes from Pharmaceuticals. Pharmaceutical production, transport and the incineration of waste is energy intensive and hence results in the very high carbon footprint of products. GCCG has been working to optimise the use of medicines and to reduce pharmaceutical waste for many years and some key projects in 2015/16 are seen below.

#### Working in partnership to tackle carbon footprint of inhalers

The CCG has organised several advanced inhaler technique training sessions over the year in conjunction with Glaxosmithkline. 1078 professionals are now trained in advanced inhaler technique including over 200 doctors, 350 nurses and a range of other allied health professionals. The use of an advanced inhaler technique minimises medicine waste and maximises the benefit of the drug to the patient. The Royal Pharmaceutical Society has demonstrated that Advanced Inhaler technique can cause a significant reduction in emergency hospital admissions and length of stay due to asthma. A study on the Isle of Wight study showed that emergency admissions had halved as a result of using advanced inhaler techniques.

There are now 29 pharmacies in Gloucestershire participating in the inhaler take back and recycling scheme. If every inhaler-user in the UK returned all their inhalers for one year this would save 511,330 tonnes of CO<sub>2</sub>e. This is equivalent to someone driving around the world 88,606 times in a VW Golf 1.4 TSI.

#### Maximising shelf life

Work has taken place at the CCG to ensure that the Gloucestershire Joint Formulary tackles medicine waste whilst minimising costs. For example in 2015/16 the brand of adrenaline auto-injector pens used has been switched to one with a 30 month shelf life from the previous product which had an 18 month shelf life.

#### Prescribing Improvement Plan

The medicines management team at the CCG has taken action to reduce the prescribing of hypnotics (sleeping medication). Short-term courses have been advised to reduce the risk of dependence and equally to reduce medicines waste.

#### **Sustainability at Sanger House**

The CCG is based in an open plan modern building in Gloucestershire called Sanger House, the landlord is NHS Property Services Limited.

#### **Raising awareness**

The CCG dedicates time and resources to promoting sustainability and encouraging 'greener' behaviours. An 'afternoon-tea' style training session was held in Autumn 2015 entitled 'Sustainabilitea' to raise awareness of sustainable commissioning, sustainable behaviours and why these are so important to the health system. The CCG discusses sustainability issues every month at the Joint Staff Consultative Committee. There are regular articles in Team Brief the internal e-newsletter and several pages of the intranet dedicated to sustainability learning.

#### Energy

The building is air-conditioned and controlled by a building management system and lighting is automated. The building uses more electricity than gas. The building management system has been optimised to minimise the run time of the air handling systems to reduce electricity consumption.

#### **Carbon Emissions – Energy Use**

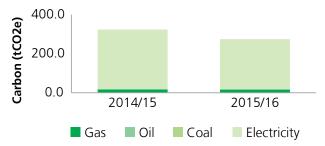


Fig 1. Carbon emissions from energy consumption at Sanger House 2015-16<sup>2</sup>

#### Waste

The overall number of tonnes of waste produced at Sanger House has reduced by 14% in 2015/16. The proportion of waste recycled is 64%.

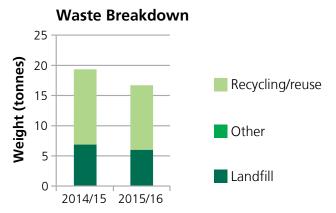


Fig 2. Tonnes of waste recycled and landfilled 2015/16

#### Business mileage

Business mileage undertaken by staff at the CCG in 2015/16 has increased by over 700 miles in total and we plan to review this in 2016/17. The carbon footprint of business travel has not increased as a result since the carbon intensity per mile has reduced as a result of improved vehicle technology.

#### Paper and Printing

The CCG has smart screens available in meeting rooms and supports staff to use technology such as laptops to reduce printing. We have a 'follow-me' system in place for printing, which allows individuals to cancel print jobs if no longer required and to monitor printing by person and team. Despite this printing has increased in 2015/16 by over 5%. In response we have raised awareness with staff to try to address this problem.

#### Staff wellbeing

The CCG is a Mindful Employer and as such has been supporting a range of Time to Change initiatives including conversations on mental health at regular staff events. Additionally staff have been offered mindfulness training, which 140 staff have attended.

#### Promoting Grow Your Own

The CCG has been keen to support staff wellbeing and sustainability at our headquarters. Annually we have a vegetable growing competition to promote 'grow your own' and healthy eating and in 2015 the humble onion was the vegetable of choice.

#### **Good Corporate Citizen Benchmarking**

The NHS Sustainable Development Unit host a Good Corporate Citizen tool to capture how well NHS organisations are doing across a range of areas including community engagement, workforce, estates, procurement, travel and adaptation. The CCG scores well in terms of its corporate approach to sustainability, with an overall score of 61% compared to the average score of other CCGs at 38%. We have also scored particularly well in the assessment of the sustainability of our community engagement, adaptation to the effects of climate change and our new models of care.



#### Healthy, sustainable and resilient communities

Strong and healthy communities support people to minimise their impact on the environment and to be resilient to changes in the world around us. Social connections are vital for health and well-being and help to reduce reliance on pharmaceuticals and health services.

### Social Prescribing – improving well-being and connecting communities

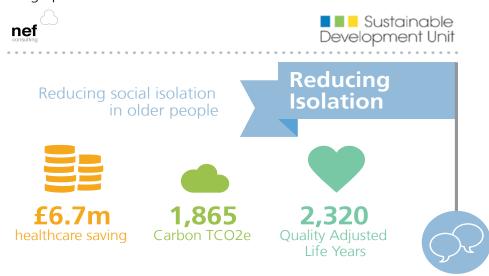
In some cases people attending GP surgeries for their health would gain much more benefit from social support rather than a prescription for medication. Social support provides a sustainable solution to a range of issues for example for issues such as bereavement, caring responsibilities, loneliness and isolation, debt and housing worries and these connections can be sustained and give support into the future in way that a medical prescription would not. See a real life story on this on the CCG website http://www.gloucestershireccg.nhs.uk/multimedia/patient-stories/

All seven of the localities in Gloucestershire now offer social prescribing. This means that a patient receives a social prescription from their GP and then has a conversation with a social prescribing coordinator who matches them with an appropriate scheme. Schemes include volunteer befrienders to community choirs and other social groups; from home adaptations and community transport to counselling and peer support groups; from specialist exercise classes and walking groups to debt advice. Social prescribing is an embodiment of sustainability with significant social, environmental and economic benefits.

Table 4. Social, environmental and economic benefits of social prescribing

Social	Environmental	Economic
Enhanced social	Potential to reduce the	Future resilience to
connections to support		help to prevent future
health and well-being	which have a high	appointments
in the long term	carbon footprint	

As a result of close partnership working between the CCG, local councils, Gloucestershire Care Services NHS Trust and a range of voluntary and community organisations, around 1,500 people have been supported this year to connect to services and groups that can help improve their well-being and meet their wider needs. It has been estimated below that reducing social isolation in older people would make a significant carbon and healthcare saving across the UK. As forecast by the New Economics Foundation think tank, healthy returns infographic below.<sup>3</sup>



#### **Local resilience to Climate Change**

Gloucestershire Local Resilience Forum manages a countywide Community Risk Register. Severe weather arising from Climate Change is one of the most significant threats in Gloucestershire.

Risks are reviewed 10 times per year and severe weather is a standing item on the agenda. These reviews are attended by personnel from the Environment Agency and the Metrological Office. We keep a register of vulnerable people so that, should severe weather be predicted, we can direct support to people in our communities that need it most.

#### **Greater support for Carers**

'Carers Afternoons' have been held at GP practices in Gloucestershire this year. Health checks were available and organisations were able to offer advice, guidance and support to those who provide unpaid care. The GP surgeries have also increased the length of carers' health check appointments and designed questionnaires and consultation forms to help health professionals better understand the needs of carers.

#### Memory cafés

The CCG has been supporting the rollout of memory cafés. These are sited within sheltered housing complexes, they are accessible to all patients (and Carers) from Stroud District who have concerns about their memory. The café sessions are run in partnership with a Dementia nurses and Dementia advisors.



#### **Cultural Commissioning Programme**

Gloucestershire Clinical Commissioning group was one of two public sector bodies in the country invited to participate in the national cultural commissioning pilot schemes. Cultural commissioning involves going out to the voluntary, community and social enterprise arts sector with a project brief and inviting them to submit artistic ideas to tackle a health issue. The example of how this worked with teenage diabetes is found below.

### Case Study – Gloucestershire arts and health programme case study: Teenage diabetes

The VCSE Sector were set a challenge to improve teenagers' control of type 1 diabetes, following evidence that young people in Gloucestershire are not always taking up health advice regarding medication and lifestyle, resulting in an increase of serious medical complications.

In response to the NHS call to artists for a new approach to diabetes, an idea was developed by a musician and theatre maker based at Cinderford Artspace (CA) in the Forest of Dean.

The project proposed by CA was to create a theatre piece based on the video game concept of 'refuelling' – the moment in a game when activity pauses and the character stocks up with their fuel, whether that is bullets, gold bullion or money. The metaphor of needing fuel to 'stay in the game' was proposed as a creative and positive approach to support teenagers struggling to maintain good control of their diabetes. It provided a complementary response to support the medical information of the health risks of not taking medication which clinicians provide. Young people are referred to the group directly by their doctor or other health practitioner.

The principle of co-production underpinned all aspects of the programme, with its ethos of shared and equal decision-making by patients, clinicians, arts practitioners and commissioners. This project was a key part of the skills strategy for commissioners, providers and citizens alike. From the initial writing of advertised

project briefs to the VCSE arts sector, through selection of artistic ideas submitted, and then on to co-design, delivery and evaluation of each project, these co-production values have extended the more traditional NHS patient participation model and reframed the commissioner/provider relationship. Emerging learning shows that the Gloucestershire approach is producing something more than a simple integration of arts and health, but rather a brand new approach and a set of unique interventions.

The artist proposed a weekly programme of workshops in which teenagers devise material, develop physical theatre skills and finally perform the show to friends and family. The emphasis is on young people as creators and performers in order to reinforce positive messages about their creative and physical strength. The public performance element is also a non-confrontational way of challenging the assumptions of parents who may well have anxieties about the capabilities and limits of their children.





#### **Sustainable Health System**

The key principle of sustainable clinical and care models is to keep people well to avoid carbon intensive interventions and stays in hospital. There are clear benefits to the individual and cost benefits to this approach.

#### **Care Homes Enhanced Service – Preventing admissions**

It was recognised by the CCG that a significant number of emergency admissions were coming from Care Homes. Therefore a proactive and preventative service was needed to help to reduce emergency attendances, whilst reducing travel (often emergency services), preventing symptoms getting worse whilst delivering fantastic sustainability benefits.

The Gloucestershire GP Care Homes enhanced service was thus developed. This service means that GPs are carrying out regular planned visits (at least fortnightly), assessing medical needs, reviewing medicines and reviewing the reasons for hospital visits.

An evaluation of the scheme at the end of the first year showed a 25% reduction in emergency hospital attendances amongst care home residents and a 5% reduction in admissions. As we know from the NHS Sustainable Development Unit an average inpatient stay has a carbon footprint of 380kg CO2e associated with it so every time an admission is avoided through prevention there is an environmental, social and economic benefit.



### Preventing admissions – Joined up care – supporting people at home and in the community

Investment in joined up Health and Social Care Community Teams (ICTs) is benefitting patients across the county with 24 hour a day, 7 day a week support where they live.

The development, through Gloucestershire Care Services NHS Trust, has helped around 16,200 patients this year, providing them with extra support at home, reducing unnecessary hospital stays and helping patients to return home sooner after operations or treatment.

Over 1,535 patients who need urgent care after a crisis or unexpected event at home have been treated by the Rapid Response Service (response within 1 hour) this year.

### Older people's advice and liaison service – same day assessment, treatment and support

The Older People's Advice and Liaison Service provides intensive medical support to older patients in Gloucestershire's two large hospitals to improve quality of care and avoid hospital stays where appropriate.

The service is provided within the emergency department and on wards at Gloucestershire Royal and Cheltenham General Hospitals. Led by Consultant Geriatricians, it is supported by other hospital staff and Rapid Response teams in the community. Over 500 patients have used the service this year. Results so far have been excellent with around 60% of service users able to return home safely the same day following review and treatment.

Through close working between GPs, community teams, the ambulance service and hospital staff, the aim is to reduce the number of patients who need to go back to hospital.

#### Total weight-loss from weight management programmes

A countywide scheme to help obese adults to achieve and sustain a healthy weight is continuing to benefit thousands of people this year. The Weight Management on Referral Scheme, funded by the County Council, has delivered a total weight loss across Gloucestershire of

20,777kgs and has helped over 4,400 people. This is benefitting the quality of life of those patients whilst helping to reduce the requirement for energy intensive surgery.

#### Self-care, technology and innovation

Where health conditions exist managing them through the use of technology can help to prevent unnecessary journeys and enhance the quality of the patient experience

#### Self-management

Real progress is being made in providing people with COPD (Chronic Obstructive Pulmonary Disease) with a structured programme of exercise and education to support them in the management of their condition. COPD is the name for a collection of lung diseases; people with COPD have difficulties breathing, mainly due to the narrowing of their airways. Pulmonary Rehabilitation provides people with support and information about their condition and the management of their symptoms.

The programme, provided by Gloucestershire Care Services NHS Trust, along with other innovative approaches such as remote monitoring of people's condition/symptoms, is supporting people to keep well in their own homes.

There is a real life story on this on the CCG website http://www.gloucestershireccg.nhs.uk/multimedia/patient-stories/

### Use of technology to reduce travel and enhance the patient experience

Some GP practices in the county have begun trialling video consultations this year with patients, where it's safe, appropriate and convenient to do so.

This small trial, using Skype, intends to test the concept and, if successful for patients and practices alike, it will be rolled out to other GP surgeries across the county.

Eighteen GP practices are also trialling E-consultation software, such as 'askmyGP', available from their practice website.

Patients can seek help through answering a series of questions about their symptoms on their smartphone, tablet or computer, which allows a much quicker initial assessment by the GP practice.

A swift decision can then be made by the surgery on whether to see or call the patient, and which member of the primary care team is best placed to support them.



#### References

- Our carbon footprint is calculated using the NHS Sustainable Development Sustainability report template http://www.sduhealth.org.uk/documents/resources/Sustainability\_Report\_Template\_2015\_16\_v5\_web.xlsx
- It has been necessary to re-baseline the carbon emissions derived from Sanger House given that CCG staff now occupy a larger proportion of the building than in previous carbon footprints. See the appendices for more details.
- New Economics Foundation. Healthy Returns Infographic http://www.sduhealth.org.uk/images/page\_placeholder.jpg?width=76&height=108&mode=crop

Written July 2016 by Georgina Smith, Sustainability Advisor

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