

**NHS 24
BOARD MEETING****29 AUGUST 2024
ITEM NO 9.5
FOR ASSURANCE****CLIMATE EMERGENCY AND SUSTAINABILITY PROGRAMME
QUARTERLY UPDATE****Executive Sponsor:**

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Action Required

The Board is asked to take assurance from the Climate Emergency and Sustainability Programme (CESP) update presented at the recent Planning and Performance Committee on 8 August 2024.

Key Points for this Committee to consider

Responding to the climate emergency is one of the Scottish Government's highest priorities.

CESP activities are part of the annual review for all health boards.

Governance process

The NHS 24 governance reflects that defined by the Scottish Government National Climate Emergency and Sustainability Programme.

Strategic alignment and link to overarching NHS Scotland priorities and strategies

- NHS Scotland Climate Emergency and Sustainability Strategy: 2022-2026.
- The Scottish Government (SG) Care and Wellbeing Portfolio and Public health priorities for Scotland are overall strategic reform policies and delivery framework within Health and Social Care.
- Chief Medical Officer – Realistic medicine annual report: 2022
- Realistic Medicine Action Plans
- NHS 24 Workforce Strategy
- NHS 24 Corporate Strategy
- NHS 24 CESP Strategy and Action Plan
- NHS 24 Finance Strategy

Strategic alignment and link to Corporate Delivery Plan activity

7.1b

Deliver interventions that seek to reduce negative impact to the environment and contribute towards net zero.

Key Risks

Risk management is aligned with the standing corporate governance process.

Financial Implications

A key deliverable of the CESP programme is to identify any potential financial efficiency.

Equality and Diversity

NHS 24 takes account of requirements in relation to equality and diversity in relation to Sustainability Development and environmental matters.

1. RECOMMENDATION

- 1.1 The Board is asked to review for assurance the CESP update that was presented at Planning and Performance committee at its meeting on 8 August 2024.

2. TIMING

- 2.1 The NHS 24 Climate Emergency and Sustainability Programme update is reported to the Planning and Performance committee quarterly, as per the national governance agreement.

3. BACKGROUND

- 3.1 Climate change presents a serious risk to the health of people around the world and has been described by the Lancet Commission on Managing the Health Effects of Climate Change as “the biggest global health threat of the 21st century”.
- 3.2 NHS 24 has defined deliverables and targets align to the [NHS Scotland Climate Emergency and Sustainability Strategy 2022-2026](#). The Scottish Government corporate governance structures for Health Boards are in place at NHS 24, and the Climate Emergency and Sustainable programme is a key internal pillar of [Our Corporate Strategy 2023 | NHS 24](#).
- 3.3 Appropriate action to reduce carbon emissions, will reduce the impact on population health. This aligns to Scottish Governments [Care and Wellbeing Portfolio Board](#) priorities. Net zero targets are a key pillar of the Value Based Health & Care action plan aligned to Realistic Medicine. As we remobilise and reform services, we must build towards a more sustainable healthcare system that delivers better value care to the public.
- 3.4 Health care emissions contribute to the climate crisis. The CESP strategy and operational structures in NHS 24 will deliver more environmentally sustainable services, while also improving population health both now and in the future.
- 3.5 NHS 24 also has a key role to play in supporting its workforce to consider wider environmentally sustainable behaviours. This includes promotion of sustainable travel methods, procurement and a digital first approach for communication.

3.6 In May 2023 the NHS 24 Board approved the Climate Emergency and Sustainability Strategy and action plan. There are five main areas aligned with associated delivery actions and targets to achieve our overall net-zero ambitions.

- Buildings and Land
- Travel
- Goods and Services
- Care and Realistic Medicine
- Communities



3.7 NHS 24 committed to establishing an organisational CESP Programme. There are five key priority areas for delivery, these have associated short, medium, and long-term actions from each of the five themes. Individual aligned projects have been established and future projects will be put in place where there are updated Scottish Government CESP priorities, and where new opportunities emerge. Operational leads from each Directorate contribute to the delivery of the actions to deliver CESP targets.

3.8 Robust project governance is in place, providing assurance to the NHS 24 Board, that sustainability and value are key considerations for design, delivery and evaluation of current and future programmes and projects.

3.9 A bespoke Board workshop was delivered to increase awareness and knowledge of the CESP national programme. This workshop was delivered by the Institute of Environmental Management and Assessment (IEMA). IEMA offered this training to all Boards nationally coordinated by NHS Assure.

3.10 The processes for data collection are evolving, and as a result, NHS 24 now has improved capability for data collection, including access to near 'real time' data for some sites through collaboration with landlords, energy, and waste suppliers.

4. ENGAGEMENT

4.1 Internal

The focus on engagement continues with feedback and input from staff being encouraged. Directorates have been challenged with identifying additional saving in terms of redesigning how they do things to support efficiencies.

The Sustainable Insights page has been added to the [Climate Emergency and Sustainability](#) SharePoint page to continue to support and encourage staff in making positive changes. As well as advice and resources, there is also a comments and feedback section to submit ideas on how to encourage and support ways to live and work more sustainably.

4.2 External

The Programme Manager for the NHS 24 CESP programme, is a member of several national CESP groups. These groups include membership from health boards, Scottish Government, NHS Assure and subject matter experts.

5. NATIONAL E-LEARNING MODULES LAUNCH

5.1 The national eLearning module on Environmental Sustainability is now live on Turas. NHS Assure have advised comms and notified L&D teams across Boards and signposting at the end of the module links to the NHS 24 Sustainability intranet page.

5.2 The NHS Scotland Environmental Sustainability Group (NESG) had discussed whether the module should be mandatory for all staff to complete as this reflects the importance of the topic, however it was also highlighted that Boards are aiming to reduce the number of mandatory modules overall.

5.3 For categorisation within NHS 24 the module will be reviewed by the Training Quality Assurance Committee on 28 August. Workforce have suggested this will likely be categorised as CPD or Advisory. The module has been promoted to staff via Team Talk and completion rates will be internally monitored.

6. ESTATES

6.1 Consideration is being given in terms of NHS 24 estate spare capacity, particularly over daytime hours, and exploring the merit in sharing sites with other Boards or public sector organisations.

6.2 Site brochures have been designed to share with local boards to highlight the opportunities available to share space in the daytime period. One department from a neighbouring board have shown an interest in sharing space.

7. TRAVEL

- 7.1 NHS 24 have targeted a 20% reduction in train and car travel. This is in line with the Scotland's [Update to the Climate Change Plan 2018 – 2032](#) which set out a world-leading commitment to reduce car kilometres/by 20% by 2030 against 2019 baseline.
- 7.2 For 2023/24 the organisation achieved a reduction of 65% for mileage in train travel. For car mileage, an overall reduction of 24% was achieved.
- 7.3 Future reporting is now included in the finance report each month highlighting directorate level achievement on travel reduction targets, with consideration continuing to be given on most appropriate format for meetings, noting that some meetings are more productive/beneficial in person rather than virtual (e.g., stakeholder engagement).

8. ENERGY AND WASTE MANAGEMENT

- 8.1 There is a continued focus on energy management to reduce consumption and improve performance through several initiatives such as LED lighting across sites. Energy usage is monitored monthly with further anticipated savings being achievable in 2024/25. Work is also underway on zoning the estate to reduce the energy footprint in quieter periods by moving staff to a more condensed space.
- 8.2 A review of printing practices and the cost and usage of colour ink cartridges vs. mono is currently underway, with a view to establishing the need for colour printing and exploring whether this could be restricted to particular business areas or staff.

9. FINANCIAL IMPLICATIONS

- 9.1 The Sustainability and Value Group continue to review savings proposals, taking into consideration any unintended consequences, or impact in other areas from proposals prior to implementing.
- 9.2 It has been agreed by EMT that long term vacancies within the organisation, those over 12 months, will be removed from the system to support efficiency savings. The Establishment Control Panel has been formed to provide oversight and scrutiny of vacancies and changes to posts. A target of £300k efficiency savings has been set. The rationale for recruiting and consequences of not are reviewed and considered before any decisions are made.
- 9.3 The introduction of Virtual Queue functionality when calling the 111 service was tested extensively and gradually introduced in the last year. This allows patients the option to not lose their place in the queue but by choosing a ring back rather than waiting in the live queue during busy service periods they do not have to wait on the phone.

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- 9.4 There are separate contracts for inbound and outbound calls. For inbound calls they are charged per minute for the duration of the call whereas outbound calls are an unlimited bundle at a fixed cost. Costs are therefore incurred during the wait time to connect to a call taker as well as talk time from the point of that connection until the call is completed. The Virtual Queue option means costs are not incurred as the patient is not waiting on the phone and when they are called back as an outbound call by the call handler this is part of fixed cost bundle.
- 9.5 Cost modelling predicts a 20% saving on call costs as well as positive feedback from patients regarding the benefits of the convenience of call back.
- 9.6 Waste Management savings of £30k have been achieved by reducing the number of collections across the organisation and better management of waste categorisation.