

One thing to do this month!

Please ask your Integrated Care Board/Health Board to support the new Greener Practice Platform. This guidance on sustainable, low carbon high quality clinical care is launching at the end of April 2025. Initially there will be >60 projects for action but more will be added all the time.

Now is the time to ask your ICB or Health Board to support you with this new resource. They have to pay for membership for you to use the resource. A typical project for action may take about 10 hours of work but completing one project should give your ICB/Health Board a return on investment of roughly £10 for every £1 invested (if 75% of practices complete one quality improvement plan), improve health care and cut carbon footprints. The cost for the ICB /Health Board will be £1 for every 1000 patients per year (£15k pa for an average size ICB) but with a special launch offer of 3 years membership for the price of 2.

Currently 20% of the toolkit criteria relates to clinical care, but >60% of the carbon footprint of general practices is caused by clinical care (investigation and treatments). Ask your ICB or Health Board what they are doing in their Green plans to support sustainability in Primary care and ask them to complete the [expression of interest form](#).

There will be links between the Green Impact for Health toolkit (which remains free to use) and the new Greener Practice Platform (which needs a subscription). The Green Impact toolkit will soon have the capability for ICBs/Health Boards to access a dashboard of their practices on the toolkit.



Why should ICBs invest?

- ✓ Supports statutory **Green Plan requirements** for ICBs
 - ✓ Helps **national medicine optimisation opportunities**
 - ✓ **Mainstreams activity:** LES, prescribing schemes
 - ✓ **Data** on activity
 - ✓ ICBs benefit from prescribing **return on investment**
-

In England the NHS has published its Green Plan Guidance for ICBs. All ICBs must update their 3-year plan 2025-28 by 31/7/25. General Practice and primary care do not get mentioned much but the guidance does say ICBs should: ·

- support primary care providers to contribute to system-wide emissions reductions - for example, by working with and through overarching structures such as primary care networks and primary care committees.
- work with primary care to support high-quality, lower-carbon respiratory care in line with clinical guidelines for asthma and chronic obstructive pulmonary disease, including:
 - improving inhaler use and adherence
 - encouraging patients to return their used or expired inhalers to community pharmacies for appropriate disposal
 - identify opportunities to support primary care estates decarbonisation, such as through the Boiler upgrade scheme
- address (in line with [National medicines optimisation opportunities](#)) overprescribing and oversupply while supporting patients in greatest need, taking a shared decision-making approach and personalising care

Ask your ICB/Health Board to complete the Expression of Interest form to get further information about the Greener Practice Platform.

This approach aligns with the Health Foundations recent analysis ‘Policy levers for a net zero NHS: four priorities for the future’ about what needs to be done

1. Strengthen existing accountability for net zero by building on existing governance, measurement and reporting infrastructure. Robust accountability measures are essential to ensure sustainability is prioritised.
 2. Systematically consider environmental sustainability when reforming policy levers. Meaningfully embedding consideration of environmental impacts can identify and unlock co-benefits, help to avoid creating unintended consequences and increase our knowledge of what good looks like.
 3. Coordinate and maintain focus around agreed priorities for action on net zero care. Policy levers for net zero health care should align with other health priorities to maximise co-benefits, while coordinated and consistent policies are needed to drive progress.
 4. Address key policy gaps on net zero. Action taken now on approaches to capital investment, health technology appraisals, innovation, and workforce capacity and capability for sustainable quality improvement can lay the groundwork for progress in the years ahead.
-

What else this month?



Online Marketing via unsplash

Creating Integrated Neighbourhood Teams Learning from Experience. This National Association of Primary Care [paper](#) brings together NAPC's experience of how to make INTs work and how to manage the challenging process of change and is designed to provide a guide to creating a neighbourhood health service.

Publications & Useful Info

Drs Matt Sawyer and Mike Tomson explain why environmental sustainability should be on every primary care team's agenda and offer straightforward tips to implement in your practice. Click [here](#) for the podcast and 0.5 CPD hours.

Simpler recycling: workplace recycling in England

From 31st March 2025 businesses that employ 10 or more FTE staff [must separate their waste](#) into mixed recycling, clinical waste, general waste, and food waste.

You need to [separate paper and card](#) from other dry recyclables (plastic, metal and glass), unless your waste collector collects them together. Waste collectors may also choose to collect other dry recyclable materials separately, like glass. You should discuss how your dry recyclable waste will be collected with your chosen waste collector.

You must always separate dry recyclable waste, food waste and black bin waste from each other.

Dry recyclable waste is:

- glass - such as drinks bottles and rinsed empty food jars
 - metal - such as drinks cans and rinsed empty food tins, empty aerosols, aluminium foil, aluminium food trays and tubes
 - plastic - such as rinsed empty food containers and bottles
 - paper and cardboard - such as old newspapers, envelopes, delivery boxes and packaging
- Black bin waste or residual waste is:

- absorbent hygiene products such as nappies
- highly contaminated materials like food packaging that cannot be washed

Food waste is:

- food leftovers
- waste generated by preparing food (of any volume, including if the workplace does not serve food or have a canteen)

The options for your food waste are either to compost it or arrange for food waste collection.

Matt Sawyer has worked with Mandy Emery to put together a [guide for GP practices](#). It's a summary of all a practice needs to know (and do).

There are also documents & posters available:

- [Waste management labels](#)
- [Waste segregation posters](#)
- [Further waste segregation posters](#)
- [Resources for communication](#)

The RCGP Net Zero Hub

In addition to the existing resources on its [net zero hub](#) RCGP is in the early stages of developing new resources for inclusion within the Hub. These new resources will focus on the following three areas:

1. Climate health equity
2. Green prescribing
3. Preventing illness - plant based diet and exercise

The Sustainable Health Coalition has issued (2/25) a discussion paper on '[Building environmental considerations into the evaluation of health interventions - taking a care pathway approach](#)' that identifies 5 key principles (on page 30).

Kind Regards,

The Green Impact for Health Team