SUSTAINABILITY IN GENERAL PRACTICE (GREEN IMPACT FOR HEALTH)

The toolkit has been developed as a collaboration between the University of Bristol, RCGP, Health Education England South West and the National Union of Students.

INTRODUCTION

The Royal College of General Practitioners’ (RCGP) Green Impact for Health is a free, online toolkit designed to help general practices to become more efficient and improve sustainability.

The toolkit has been developed as a collaboration between the University of Bristol, RCGP, Health Education England South West and the National Union of Students.

It contains actions designed by GPs and sustainability professionals, specifically to help GP surgeries improve their sustainability and environmental impact.

NEED TO KNOW

What is Green Impact for Health?
Green Impact for Health provides guidance about the small changes that will improve quality, save money and improve the environmental sustainability in a general practice. Put simply it is an online DIY guide developed by RCGP and NUS/SOS to help become more environmentally sustainable. It has already been used by almost 400 General practices across the country.

What is sustainable healthcare?
In the healthcare system, it is providing high quality care and improved public health without exhausting natural resources causing severe ecological damage to planetary health.

What is planetary health?
It links the disruptions of the Earth’s natural systems caused by humans with the resulting impacts on public health and then develops and evaluates evidence-based solutions to secure a world that is healthy and sustainable for everyone. Good planetary health will come by seeing the threats and reacting fast enough by switching to better ways of living.

How much does GIFH cost?
The scheme is completely free to use, there are no hidden costs.
How long does it take?
Practices can commit to as few or as many hours as they like each year, there is no minimum requirement.

What do I tell the practice whilst on placement?
We understand general practice is under extreme pressure, and practices may feel unable to take on more than is necessary. However Green Impact for Health is developed by general practice for general practice which makes the process as easy as possible. In fact, practices that completed only two simple actions from the toolkit each saved around £1000/year.

ACTIVE LEARNING

 ✓ **What is a planetary health impact assessment and how do you it?**
You can do your own planetary health impact assessments to evaluate how your activity may cause environmental changes that affect natural systems and long-term health and decide how we can make meaningful restorations and reparations.

To do your own assessment follow the steps below:

Check your personal carbon footprint using:
[www.footprint.wwf.org.uk](http://www.footprint.wwf.org.uk) or
[www.carbonfootprint.com/calculator.aspx](http://www.carbonfootprint.com/calculator.aspx)

Practices can check their carbon footprint (in a bit more detail):
[https://www.carbonfootprint.com/calculator1.html](https://www.carbonfootprint.com/calculator1.html)

 ✓ **How do you offset your ongoing and/or past CO2 emissions?**

Try any of the following:
[https://www.goldstandard.org/get-involved/donate-to-us](https://www.goldstandard.org/get-involved/donate-to-us) or
[https://www.carbonfootprint.com/carbonoffsetprojects.html](https://www.carbonfootprint.com/carbonoffsetprojects.html)
[https://www.woodlandtrust.org.uk/plant-trees/large-scale-planting/](https://www.woodlandtrust.org.uk/plant-trees/large-scale-planting/)
[https://nhsforest.org/](https://nhsforest.org/)
FURTHER LEARNING

What other groups can help?

**UK Health Alliance for Climate Change** (UKHACC) brings together doctors, nurses and other health professionals to advocate for responses to climate change that protect and promote public health. The Alliance was formed in 2016 to coordinate action, provide leadership and help amplify the voices of doctors, nurses and other healthcare professionals across the UK. [http://www.ukhealthalliance.org/](http://www.ukhealthalliance.org/)

**Sustainable Development Unit** (SDU) is a national unit based in Cambridge working on behalf of the health and care system in England. It was established in 2008. It supports the NHS, public health and social care to embed and promote the three elements of sustainable development - environmental, social and financial. The Unit is jointly funded by, and accountable to, NHS England and Public Health England to ensure that the health and care system fulfils its potential as a leading sustainable and low carbon service. [https://www.sduhealth.org.uk/](https://www.sduhealth.org.uk/)

**Centre for Sustainable Healthcare** (CSH) is a charity based in Oxford working on sustainable healthcare in research and practice. It was established in 2008. It provides strategic input and consultancy to national and local programmes. [https://sustainablehealthcare.org.uk](https://sustainablehealthcare.org.uk).

There is a network for primary care - [https://networks.sustainablehealthcare.org.uk/network/sustainable-primary-care](https://networks.sustainablehealthcare.org.uk/network/sustainable-primary-care) with lots of resources as well as a forum for discussion.

**World Organisation of Family Doctors (WONCA)** has a Working Party on the ‘Environment’ that fosters the role of family doctors in protecting the health of their patients and communities from the impacts of environmental hazards and environmental degradation, and to promote healthy and sustainable societies at the local and global level. Family Doctors from every region of the world are engaging in planetary health within their local and global communities. The Working Party always welcomes new members - [https://www.wonca.net/groups/WorkingParties/Environment.aspx](https://www.wonca.net/groups/WorkingParties/Environment.aspx).

**Planetary Health Alliance** is a consortium of over 120 dedicated universities, NGOs, government entities, research institutes, and other partners around the world committed to advancing planetary health. [https://planetaryhealthalliance.org/](https://planetaryhealthalliance.org/).

**Lancet Countdown**: Tracking Progress on Health and Climate Change is an international research collaboration, dedicated to tracking the world's response to climate change, and the health benefits that emerge from this transition - [http://www.lancetcountdown.org/](http://www.lancetcountdown.org/).

**Carbon Brief Daily News**
Every weekday morning, Carbon Brief sends out a free email digest of the past 24 hours of media coverage related to climate change and energy, as well as their pick of the key studies published in the peer-reviewed journals. [https://www.carbonbrief.org/daily-weekly-briefing-sign-up](https://www.carbonbrief.org/daily-weekly-briefing-sign-up).
The GIFH toolkit - instructions to assess the practice:
This is intended to be an easy way to help practices be aware of what they could do to be more sustainable. For more information see www.greenimpact.org.uk/giforhealth.

Please circle each criteria if the practice seems to have achieved the criteria.

e.g. B008

**Communication**

**B008**: The practice newsletter or website has promoted the practice's participation in Green Impact.
**B023**: The practice's search engine is Ecosia.
**C013**: Email or SMS is used for contact with patients where possible, rather than paper mail (subject to agreement).
**G013**: The practice has taken action to see whether advertising the sustainability initiatives has changed patient perspectives of sustainability.
**C027**: Every practice meeting, every newsletter, meeting etc has climate change on the agenda.
**C028**: The practice has declared a climate emergency.

**Energy**

**B005**: The practice has used energy monitors to establish the energy use of the whole practice or individual electrical devices.
**B016**: The practice uses rechargeable batteries.
**B009**: The practice can show evidence of considering the use of renewable energy technology.
**B014**: The practice has an up-to-date written 'lighting and equipment responsibility plan' covering responsibility for all the main areas and key equipment within the practice and all relevant staff have been made aware of the plan.
**S002**: The practice takes monthly meter readings for any electricity, water and gas meters AND plots the monthly consumptions on a graph or chart for reference and analysis.
**S016**: A member of your practice team has used carbon footprint software and produced a carbon footprint for your practice using the estimation tools available within the tool.
**G019**: A member of the practice team has used carbon footprint software and produced a carbon footprint which includes practice specific data collected from staff and patient travel surveys, and energy data.
**G020**: The practice can demonstrate that it has reduced energy consumption over the last 12 months compared to the previous 12 months (taking average temperatures into account).
**C015**: The practice has provided data on the energy produced and/or cost savings from the installation of its renewable energy source(s).
**C016**: Within the last 12 months, the practice has proactively acted to ensure that internal and external doors and windows are kept closed when the air conditioning or heating is on.
**C017**: The practice has energy-awareness stickers and posters in place in most offices and communal facilities encouraging users to switch off lights and/or equipment when not needed. Posters should be dated to show when they were put up and ideally refreshed every 12 months to keep them noticeable.
C019: EITHER the practice does not have any [tungsten filament bulbs] in ceiling or wall lights or T12 tubes OR if it does, more efficient replacements will be installed within the next 6 months.
C025: There is a discussion with the practice team about their personal divestment from fossil fuels and investment in climate solutions.

Food

B001: EITHER all tea and coffee purchased by the practice for staff is Fairtrade certified OR a poster is up in the tearoom explaining the benefits of buying Fairtrade products. N.B. This only refers to tea or coffee bought with practice money, not products bought by staff.
B024: The practices promote breastfeeding.
G002: The practice uses locally-sourced, seasonal, healthy food for practice meetings and Fairtrade products where possible. This includes drug representative lunches where a request for locally sourced food should at least be registered.
C022: All milk supplied by the practice will be non-dairy e.g. oat or soya. Staff can still bring in dairy milk. Posters will display the environmental benefits of plant-based milks.

Fuel Poverty

B012: The practice has decided to address the problems of fuel poverty within vulnerable population groups in line with NICE guidance. This plan should include the identification of vulnerable patients, asking these patients about keeping warm at home and a process for referral to a single point of access.
S005: The practice has decided to address the problems of fuel poverty within vulnerable population groups in line with NICE guidance and has implemented the plan. This plan should include the identification of vulnerable patients, asking these patients about keeping warm at home and a process for referral to a single point of access.
G005: The practice’s plan to address the problems of fuel poverty within vulnerable population groups in line with NICE guidance has been implemented the plan and the practice has received feedback from their single point of access on referral numbers and subsequent actions. The results on the outcomes of these referrals has been discussed at team meetings and acted upon by the practice.

Prescribing

S011: The practice has put a Quality Improvement plan in place to reduce the number of unnecessary medications patients are on, including reviewing patients on 7 or more prescriptions. The practice has a system in place to in the first step to preventing unnecessary polypharmacy.
G010: The practice can show evidence of a reduced number of unnecessary prescriptions (particularly for patients on 7 or more prescriptions).
B007: The practice has accessed the national - www.openprescribing.net and has looked at the GP Dashboard for their practice, or uses their local preferred alternative (e.g. Eclipse). Someone in the practice receives regular email alerts on the prescribing trends.
S013: The practice has used https://openprescribing.net - Open Prescribing or uses their local preferred alternative (e.g. Eclipse) to identify a prescribing measure with potential for improvement, and has discussed plans to improve prescribing practice.
**G018:** The practice has successfully implemented their plan to improve performance for a prescribing measure.

**C026:** The practice encourages the use of ‘Green Impact prescriptions' for patients that are 'good for the patient and good for the planet'.

### Procurement

**B004:** All plain A4 white copier/printer/fax paper bought by the practice meets at least one of the following options: made from at least 70% recycled paper; [NAPM] accredited recycled paper; or pulp from [FSC] [certified sustainable sources].

**S007:** The practice has made a request to the CCG or the devolved nation equivalents that dry powder inhalers (see B015) are on the local formulary.

**S014:** The practice has reviewed its use of single use plastics in the practice and taken steps to reduce or stop their use.

**G009:** The practice has developed and introduced a stock-taking system for ordering materials to ensure low wastage. This may include stationery, pharmaceuticals or any other materials that are ordered on a regular basis. Only one system needs to be in place for this criterion to be marked as ‘Done'.

**G014:** The practice can show evidence of 1) preferentially prescribing low volume salbutamol MDIs rather than high volume salbutamol MDI when salbutamol MDIs are required AND 2) minimising the use of MDIs which use HFA227ea as their propellent.

**G017:** When the practice buys medical, research or commercial equipment, it regularly uses the Government's technology lists and/or calculates [whole lifecycle costings] as part of the procurement process and/or has incorporated energy efficiency of equipment and appliances into specific tenders.

**C004:** The practice is reducing the number of letters sent out by, or on behalf of, the practice in envelopes that contain plastic windows and are avoiding using poly-wrap alternatives.

**C005:** The practice has ensured that, where possible, the cleaners that clean its building(s) use: [ecological or plant-based detergents] in preference to chemical-based synthetic products; cleaning products that do not contain bleach; cleaning products that have not been tested on animals.

**C007:** The lead procurer within the practice has completed online sustainable procurement training.

**C008:** The practice preferentially buys any three of the following on a regular basis: Refillable writing pens and refills in preference to one-use disposable pens; Refillable highlighters and refills in preference to one-use disposables; Staple-free staplers; Pencils made from [FSC] certified sustainable wood in preference to wood from unaccredited sources; Stationery ranges made from a majority recycled content;[Biodegradable cellulose sticky tapes] in preference to acetate or polypropylene sticky tapes; Water-based correction fluid in preference to solvent-based.

### Self-management

**B018:** The practice encourages patient self-management with guidance for at least one named condition (as chosen by the practice).

**B022:** The practice promotes physical exercise for its patients.

**S009:** The practice can show evidence that encouraging patient self-management with guidance.
Social prescribing

**B006**: The practice has a named Social Prescribing champion or coordinator.
**B020**: The practice has a member of staff on site designated as the Social Prescribing Coordinator OR The practice makes use of a link worker or one-stop shop/hub for assessing and advising or individualising social prescribing OR The practice signposts patients to services available within the community and voluntary sector.
**S012**: At least one member of healthcare staff has obtained a certificate of competency or CPD points from completing a course on social prescribing.
**S015**: The practice is aware of local opportunities for green and blue prescribing (this is social prescribing where patients benefit from interaction with natural environments around land and water) and has a system of referring patients to these services.
**S020**: The Social Prescribing Coordinator or the healthcare professional(s) making social prescriptions can show continuing progress with a patient once a social prescription has been made, to assess their needs and review whether the service is beneficial.
**G011**: Healthcare practitioners who have completed the training on social prescribing can show that they have formed a network with other practices to develop social prescriptions.
**G022**: The practice demonstrates the impact of social prescribing in their practice either through an outcome indicator, for example using the - http://www.healthscotland.com/scotlands-health/population/Measuring-positive-mental-health.aspx.
Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) - http://patient.info/doctor/patient-health-questionnaire-phq-9 PHQ scoring], or improvement in patient QOL through patient surveys or anonymised case studies.

Staff welfare

**C002**: Staff are encouraged and supported to stop smoking.
**C010**: Staff are encouraged to bring and share healthy food, AND at least twice a year, the practice has a 'bring and share' communal healthy lunch.

Support

**C009**: The practice actively supported the last Fairtrade Fortnight campaign.

Training

**B011**: The practice has accessed appropriate online resources about sustainability to access up to date information.
**B017**: All GP trainees and/or Foundation doctors have received at least one tutorial on career resilience and have submitted feedback forms.
**B021**: The practice has engaged in at least one activity to enhance the sustainability of local training resources, for example sharing across practices.
**S004**: At least one member of staff (including admin, GPs, trainees and other clinicians) has completed learning on climate change and healthcare.
**S010**: The practice has at least one named doctor or nurse who has learnt about and follows the evidence and benefits of Wholegrain Plant based nutrition in Primary, and this person has disseminated their learning to at least 50% of clinical staff.
**S019:** A member of the practice team has learnt about motivational interviewing via a course or otherwise and has shared their learning with at least 50% of clinical staff.  
**G001:** Where appropriate, staff are given information, training and guidance on back care and manual handling and appropriate equipment if necessary. This includes staff who sit for long periods of time and should know how to do so properly.  
**C003:** Wherever possible, all staff use wipes for disinfection instead of spraying, reducing the amount of chemicals used and placed in the air.  
**C001:** The practice has a corporate social responsibility (CSR) policy and/or strategy.  
**C014:** Chemical/cleaning stores are tidy, with items stored safely and COSHH information next to products.

### Travel

**G015:** For a practice that is spread over several geographical sites, the practice has taken efforts to minimise cross site-travel.  
**C023:** The practice encourages active transport by joining the UK's "Cycle to Work" scheme to help employees buy and use bicycles.

### Treatment

**B013:** The practice has ensured that over half of its "vulnerable to unplanned admission" patients have had a documented discussion on end of life care, including decisions of Do Not Attempt Resuscitation (DNAR), Treatment Escalation Plans (TEP) and ceiling of treatment.  
**S018:** The practice has reviewed the choosing wisely recommendations to help reduce unnecessary tests and procedures. Clinicians incorporate the recommendations [http://www.choosingwisely.co.uk/resources/shared-decision-making-resources - shared decision making] into management with patients.  
**G007:** The practice has reviewed the impact of using the recommendations from the Choosing Wisely campaign and implementing.

### Quality improvement

**B019:** The practice has planned at least one quality improvement project, which aims to improve the sustainability of the healthcare system in question.  
**S017:** There is evidence that the plan for a quality improvement project has been put into motion and is progressing.  
**G006:** The practice has completed a quality improvement project and demonstrated improvement (or lack of) as a result. The practice has also communicated this information to other staff members and patients.

### Waste and recycling

**B002:** Clear guidance on how staff can double-side copy is posted within readable distance of each photocopier AND the practice collects its waste non-confidential A4 paper printed on one side only, and rather than sending it for recycling, the practice reuses it or donates it to an organisation for reuse.  
**B003:** The practice publicises the availability of the nearest pharmacies taking part in the GSK "Complete the Cycle" Inhaler Recycling Scheme.
B010: All staff within the practice have been reminded about the difference between the waste bins (e.g. clinical, offensive, hazardous and domestic waste) within the last 6 months. Waste bins are clearly labelled.
B015: The practice has reviewed the use of dry powder inhalers as an alternative to metered dose inhalers (MDIs).
S001: Clear guidance on how staff can scan documents to be emailed is posted within readable distance of each photocopier and the practice has communicated this to all staff.
S006: The practice can show that patients are using the GSK "Complete the Cycle" Inhaler Recycling Scheme.
G016: The practice can show evidence of prescribing dry powder inhalers rather than MDI inhalers.
S008: Each consulting room has at least five bins (paper, sharps, confidential, clinical and non-recyclable waste for landfill) and all bins within the practice are correctly labelled to show the waste stream.
G003: The practice recycles all its used printer and/or toner cartridges
C006: The practice has an up-to-date record of all stored pharmaceutical items. This may be because of the stock-taking procedure put in place because of criterion.
C011: There are signs above confidential waste containers and/or shredders questioning staff about whether the item really needs to be shredded and all staff have been reminded of what constitutes confidential waste.
C012: The practice collects incoming envelopes and reuses them in preference to buying new envelopes.
C024: Patients menstrual 'period poverty' and use of single use tampons and pads is addressed by the promotion, where possible, of menstrual cups and other washable menstrual products.

Water

S003: Items that have the potential to cause pollution are carefully stored and are away from water bodies or surface water drains.
G004: If the practice has a kitchen or access to a shared kitchen it has acted to ensure at least two of the following: The dishwasher is only run when full; Crockery is not washed under a running tap; All sinks have working plugs; All sinks have washing up bowls.
G008: EITHER the practice does not have high water pressure, OR it has fitted [water saving valves] or requested that they be fitted to reduce water pressure.
G012: EITHER the practice does not have any bottle-fed water coolers OR if it does, it has a valid reason for not having replaced bottle-fed water coolers with mains-fed versions or removed them completely.
C018: EITHER the practice has instant water boilers in the kitchen area OR it has environmentally-friendly kettles OR it has actively encouraged people to only fill the kettle as much as they need when making tea.
C020: The practice has contacted its water company for advice on how to save water.
C021: Any dual-flushing toilets have been labelled so that users know which button is for the half flush.

If you have any feedback on these criteria or suggestions for new criteria, please contact Dr Terry Kemple on tk@elpmek.demon.co.uk.