



UK Health Alliance on Climate Change

Minute

UKHACC AGM and Council Meeting

Thursday 18 September 2025, 14.00-17.00

Held in person at Royal College of Psychiatrists

Attendance: 20 in person and 23 online. The meeting was recorded.

The meeting was chaired by: Richard Smith (RS), UK Health Alliance on Climate Change

1. Introduction and welcome

Richard Smith welcomed everyone to the meeting and thanked the Royal College of Psychiatrists for hosting.

2. Delivering sustainability in specialist areas of practice: examples of good practice

One of the UKHACC commitments for membership organisations is to “Develop a plan for sustainability in your specialist area.”

Examples from some specialist areas that have made good progress in achieving this were presented. The presentations provided insights into how the programmes got started, the guidance and assessment protocols developed, and the impact they have achieved in environmental sustainability being incorporated into clinical practice.

Greener ED, Royal College of Emergency Medicine

Sandy Robertson from RCEM presented on how GreenEd is improving sustainability in the emergency department.

Slides: [Improving Sustainability in the Emergency Department](#)

The Green Impact for Health Toolkit

Terry Kemple from the Royal College of GPs presented the Green Impact for Health Toolkit for primary care

Slides: [Green Impact for Health Toolkit](#)

Greener Palliative Care Award

Kate Crossland from the Association for Palliative Medicine presented a gold, silver, bronze award system used in palliative care

Slides: [Green Palliative Care Award](#)

Questions and points noted:

- Speakers indicated that the toolkits and systems that have been implemented to deliver more environmentally sustainable care have also led to improvements in quality of care.

Examples included unnecessary cannulas and improvements in asthma through switching inhalers

- There is variation in implementation, sometimes in individual sites, but sometimes being taken up across regions, for example the Welsh government is asking all trusts in Wales to implement Green ED. Almost 2000 practices are signed up to Green Impact for Health Toolkit so it has spread across the country, but there are also hotspots where there has been an individual champion or local support from funders
- It was agreed a central repository for sharing speciality specific toolkits for environmental sustainability would be useful. EM advised that UKHACC does this through the web page for the commitment on 'develop a plan for sustainability in your specialist area'. As well as the examples provided at the meeting, The Green Theatre Checklist is also on the UKHACC website
- A 'How To' guide sharing these examples and case studies is also being developed. Centre for Sustainable Healthcare also provides links to examples.
- RCPSG has developed a toolkit for podiatry and is currently developing one for travel medicine. EM and VS (RCPSG) to follow up for inclusion of these in the How To guide and case studies
- Getting hospital to 100% renewable power should be a priority
- Green ED work to reduce unnecessary investigations involved a simple audit to see if it made a clinical difference
- A ripple effect and ICB support are important. The Green Impact for Health Toolkit is also for everybody in the practice, not just the clinician, and this team approach makes it more impactful
- Aligning specialist toolkits with carbon net zero plans for the different devolved nations helps to ensure they are relevant and useful

RS thanked SR, TK and KC for their presentations and insights.

3. Greener NHS five year report

A report on progress towards NHS England's net zero targets will be published on 23 September. RS welcomed Hiten Patel, Head of Strategy and Robin Simpson, Head of Analytics from the Greener NHS to present an overview. [The slides can be viewed here.](#)

Questions and points noted:

- A report on progress towards NHS England's greenhouse gas emissions reductions will be published on 23 September
- The report will be accompanied by a publication in the Lancet planetary health journals that lays out improved methodology that was used to assess the carbon footprint
- An NHS net zero expert panel was established to advise on the report. UKHACC Chair, RS was a part of this panel as were representatives from RCGP, Climate Change Committee, health experts from within the health system, academics and international advisors
- NHS England has reduced their carbon footprint (scope 1+2) by 14% (800 kilotonnes) since 2020 and is on track to reach the 80% interim target (compared to 1990 levels) on the current carbon footprint plus (scope 1+2+3)
- Footprinting in the NHS is incredibly complex and few countries have footprinted their health systems as comprehensively as NHS England

- Significant improvements in data collection and modelling have been implemented in the last five years. As a result, the five year report is based on more specific and granular NHS data, and less reliant as spend-based approaches which were used in the earlier 2020 report. The updated data is more precise and more reflective of the true picture
- Significant impacts in clinical practice such as inhaler use, removal of nitrous oxide, and anaesthetic gases, are coming through in the data
- While the NHS carbon footprint (scope 1 and 2) is on target to meet the 80% reduction by 2032, this requires additional reductions of about 225 kilotonnes each year which needs a continuation of accelerated progress. The Greener NHS team is confident this can be achieved but it is challenging.
- Overall the NHS carbon footprint plus (Scope 1+2+3) has not fallen because scope 3 emissions, which make up about 75% of the total footprint have not seen any fall in emissions.
- Reductions through changes to clinical practice, NICE guidelines, introductions to the market of new inhalers and propellants, and the partnership with GB Energy to install solar and decarbonise the national grid, heat pump installation and efficiency investments, and the roll out of zero emission vehicles will all contribute to emissions reductions.
- Currently, spend-based approaches are used to measure the carbon footprint in the supply chain. It is hoped over time more product or category level emissions factors can better reflect the information available. Work will be carried out over the next few years to develop metrics of circularity and other factors to inform actions.
- The pie chart of emissions breakdown in NHS England has been updated to reflect wider knowledge in the data than previously (e.g. categories of supply chain activity)
- Greener NHS has been working with WHO to publish guidance on measuring greenhouse gas emissions of a healthcare system to encourage alignment between nations
- Current legislation and lack of funding can make it very difficult for trusts to implement changes (e.g.. reusing medicines). Power purchase on energy places legislative difficulties which need to be overcome.
- When there is a really clear mandate and expectation that comes from higher up is really important lever to get things done.
- A better data platform is a powerful resource for pushing real escalation in terms of progress over the next five years
- Caution was noted about the pace of emissions reductions needing to accelerate. While progress has been made, a significant portion of this has come from changes in the grid mix and overall emissions have not fallen.
- UKHACC can play a role in calling for legislative changes needed to enable changes to happen (e.g. MHRA)
- Jeevons Law was emphasised - savings in cost and carbon drive increased resource use and worse pollution unless savings are explicitly tied to a spend on further decarbonisation
- There is a need to free the NHS for power purchase agreements
- The most significant changes over the past five years have been inhalers, nitrous oxides, and volatile anaesthetics - this demonstrates the significant changes that can happen when the workforce is behind it
- How do we build sustainability into the nationally commissioned preventative programmes such as the National Diabetes programme or vaccination programmes

- NHS needs to work with local authorities
- HP said Greener NHS is grateful for the work of UKHACC in getting net zero targets into the health and care bill and 10 year health plan. A continuation of this influencing work and the development of specialty level guidance are important for UKHACC to continue.

AGM AGENDA

4. Appointment of new chairs

Following a call for individuals to put themselves forward for Chair of UKHACC, Hugh Montgomery and Sandy Mather were interviewed and recommended for the role. The pair were formally appointed at the AGM with no objections noted.

RS welcomed HM and SM.

5. Election of trustees

In 2025 two founding trustees retired their roles after completing their term of office:

- Jacob Kranowski, Royal College of Psychiatrists
- Juliet Dobson, BMJ

Trustee, Sandy Mather, also resigned her role as trustee following her appointment as co-Chair.

RS thanked each of the outgoing trustees for their commitment to the alliance over a number of years.

Two individuals were nominated from the membership to be trustees of UKHACC. As the number of nominations did not exceed the number of vacancies, no elections were held. The two were appointed unopposed at the meeting. They are:

- Andrew Mackenzie, The Physiological Society
- Sandy Roberston, Royal College of Emergency Medicine

6. Progress report

A Progress Report for the period from January to August 2025 was shared prior to the meeting. Highlights of work delivered during the year were presented by Elaine Mulcahy, Director of UKHACC. The presentation slides can be viewed [here](#). The report can be viewed [here](#).

7. Treasurer's report

The set of accounts and trustees report for the year ended 31 December 2024 have been submitted to the Charity Register as required by the regulator. These are available to view on the charity register website [here](#).

The [treasurer's report](#), including end of year projections, was shared prior to the meeting and presented by EM

The Opening balance at the start of the year was £133,869.

Total projected income from subscriptions is £136,688. This includes subscriptions due in December 2025 (£130,000) plus subscriptions from new members during the year.

Projected final outgoings in 2025 of £135,139, which is predominantly from salaries (£93,000) and operating expenses (£42,000).

The projected end of year closing balance: £135,418

8. 2026 subscription fees

RS advised that membership subscription fees are our main source of income. In order to keep in line with inflationary pressures, the trustees have recommended a subscription fee increase of 3.5% in 2026. This is equivalent to a charge of 29.5p per member. The fee is capped at the lower and upper rates of £528 and £5775.

OUR COMMITMENTS

9. Objectives and progress in 2025

EM presented an update on objectives for delivering our Commitments agreed at the Council meeting in March 2025, and progress made to date.

Key points were:

1. Work on three 'How To' guides has been developed
2. The How To Guide on 'Prioritise plant based and sustainably sourced food' will be launched at an exclusive event for UKHACC members on 8 October. Members were encouraged to share the registration link with anyone in their organisation who would benefit from understanding how to use the guide. EM thanked Plant Based Health Professionals for their support in producing the guide. EM thanked the 20 membership organisations who responded to the survey providing insights to inform the content of the report and those who provided case studies.
3. Work on the How To guide on 'Switch to greener banking' is underway. Four organisations responded to our survey and insights have been reviewed or still underway. We expect to have this finalised by the end of October.
4. Work on the How To guide on 'Develop a plan for sustainability in your specialist area' is underway. The case studies presented today are part of this work and will be featured as case studies in the guide. We expect to have this finalised by the end of November.

5. The Climate and Health Scorecard is behind schedule with progressing on the 2024-25 scorecard analysis. Our aim is to complete the scorecard for the period from 1 January 2024 to 31 December 2025, with a report to council in March 2026. We will share information about the questionnaire as soon as we have more information.
6. 21 organisations have endorsed our commitments. The list of organisations that have endorsed is included in the monthly Director's Update email every month, and organisations are invited to let EM know when they are ready to add their name to the endorsements.
7. EM clarified endorsement means that your organisations agrees with the principles set out in the commitments and aspires to achieve all those relevant to them.

Points noted were:

- Green banking can be very difficult for large organisations. Switching to 'greener' rather than 'green' options as a means to do what they can. An option to diversify the risk with different pots of money in different banks, moving finances to greener banks when possible. In this way, choosing a bank that doesn't invest in fossil fuel industries for a portion of reserves or finances can demonstrate a shift in the direction to greener banking
- ER from Greener Practice pointed out that many of UKHACC members are not big organisations and many smaller organisations could make the switch - this would itself make a big impact
- Pensions can be the biggest potential investment fund linked to fossil fuel investments and are very difficult to shift
- RW from FMLM expressed thanks to RS for support he had provided to FMLM. FMLM currently doesn't have a building and is looking to establish a footprint, but finding it difficult to establish a premises that is carbon neutral or meeting the Commitments. A question was asked about sharing carbon neutral infrastructure. RG from RCN advised they might be able to provide shared space. RW and RG agreed to follow up
- HM offered to make himself available to speak with organisations to help convince boards and move things forward
- It was highlighted that as well as calling for organisational change, we could also consider what emphasis were are putting on the individual members. Caution was noted about being too directive towards individuals and a balance should be struck regarding helpful advice and resources and organisations/workplaces leading by example
- It was agreed the How To guides will be very useful in supporting implementation

8. Closing remarks

Outgoing Chair, Richard Smith thanked our Ambassadors, the trustees and directors he has worked with during his time as Chair. He reflected on the Alliance's founding 10 years ago and the work we have achieved in that time. While the focus has been on mitigation, adaptation and improving health, emissions and global temperatures have continued to rise. He spoke about work UKHACC does at the national, international, regional and health sector levels. He spoke about projects that had been delivered over the last few years and the establishment of UKHACC as an independent charity.

Director, Elaine Mulcahy, on behalf of UKHACC, thanked RS for the work he has delivered in the role of chair over the last six years. She reflected that we are all incredibly grateful for the time, dedication and commitment he has shown and how much he has moved the Alliance forward during his time. He has been an outstanding leader and we are all very grateful and wish him well. EM mentioned a collection of poems that has been produced following a call to members and friends of UKHACC to write a poem reflecting on their experience of Richard. EM read a poem by ChatGPT.

Incoming co-chair, Hugh Montgomery, highlighted the current state of emissions and the implications of this over the next decade. He said we've left it too late for incremental change - it needs to be transformational. He put it to UKHACC members present that we cannot and he will not talk about net zero - sustainable, the science tells us we need to be at zero and we only have a few years to do it. That's the challenge and we've got to take it and its going to be tough.

Incoming co-chair Sandy Mather expressed thanks to outgoing Chair RS and said she looked forward to working with the Director and trustees. She expressed sadness that it was needed for a group of healthcare professionals to come together to tackle climate change - its a shocking position to be in, but its here and brings hope. Membership organisations can galvanise people around a shared interest. Our success will be to get rid of this charity because the successful charity is not longer needed, we've achieved our object.

RS closed the meeting

Next meeting: March 2025