



NHS Dumfries and Galloway Annual Climate Emergency and Sustainability report 2024/25

Published 2nd December 2025

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1. Introduction

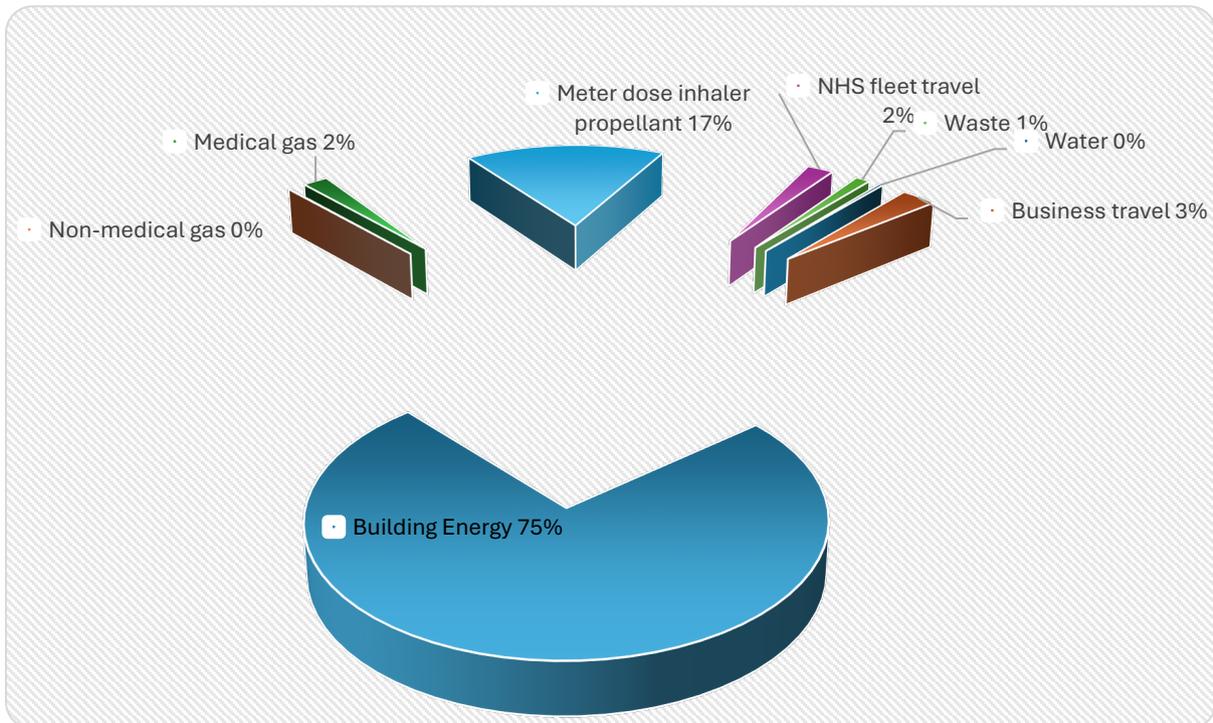
This is NHS Dumfries and Galloway's fourth annual Climate Emergency and Sustainability Report covering the financial year 2024/25.

The planet is facing a triple crisis of climate change, biodiversity loss and pollution because of human activities breaking the planet's environmental limits.

The World Health Organisation recognises that climate change is the single biggest health threat facing humanity. Health organisations have a duty to cut their greenhouse gas emissions, the cause of climate change, and influence wider society to take the action needed to both limit climate change and adapt to its impacts. More information on the profound and growing threat of climate change to health can be found here: www.who.int/news-room/fact-sheets/detail/climate-change-and-health

NHS Dumfries and Galloway provide health care to around 146,500 people who live in the Dumfries and Galloway region and employ around 4,500 people. It carries out this work out on a property network of over 174,000m², including two Acute Hospital sites, Mental Health Hospital and numerous community hospitals and health centres, medical practices and offices across the region. NHS Dumfries and Galloway estate totals to around 19 separate sites and 44 buildings.

Figure 1 breakdown of the emissions related to NHS Dumfries and Galloway during 2024/25



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The emissions breakdown for NHS Dumfries and Galloway remain largely similar to that of the 2023/24 report. Our greatest emissions source is through building energy throughout our estate (75%), with emissions from meter dose inhaler propellant being the Boards second largest emitter at 17% of the total.

2. Leadership and governance

The Executive Lead for the climate emergency and sustainability during 2024/25 was the Director of Finance, Katy Kerr, and a Non-Executive Board member was the Champion for climate emergency and sustainability. The Director of Public Health has taken on the role of Executive Lead following retirement of the Director of Finance. We would like to thank Katy Kerr for her commitment and leadership of the climate agenda during her lead role.

The Climate Emergency and Sustainability Programme Board (CES Programme Board)

The CES Programme Board's primary remit is to oversee the development of both a strategic plan and an annual workplan in relation to DL (2021) 38 and the 2022-2026 Scottish Government's NHS 'Climate Emergency and Sustainability Strategy' (hereinafter referred to as 'the Strategy').

Key responsibilities:

- Inform the content of and approve an annual work plan in line with the requirements of DL (2021) 38 and the Strategy
- Provide scrutiny in relation to progress reporting of the delivery requirements in the workplan, including in relation to targets
- Ensure that the Scottish Government's requirements are met in relation to 5-yearly Climate Change Risk Assessments, the production of a Climate Change Adaptation Plan and the annual Public Bodies' Climate Change Duties Report
- Inform the content of and provide scrutiny of the strategic planning for NHS Dumfries and Galloway to be a net zero organisation by 2040 at the latest
- Act as an escalation point for issues and risks by providing advice and support to assist with delivery
- Act as the forum for discussion about the Corporate Risk in relation to achievement of net zero by 2040, and all other risks which are identified in relation to delivery of the DL or Strategy arising from the Climate Change Risk Assessment
- Ensure appropriate resources are available to enable delivery of the approved workplan and to inform strategic planning
- Identify opportunities to work with external partners in the public, third and private sectors to pursue a common agenda on sustainable actions
- Actively seek and support the use of innovative solutions to the challenges
- Identify local and national initiatives which may benefit the Board in relation to sustainability
- Provide a dedicated network of expertise in relation to net zero

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- Exploit any sustainability related training opportunities which may arise and share with other colleagues; inform the development of net zero awareness raising and training, where appropriate, and ensure the nationally developed mandatory training (when available) is achieved
- Oversee the development of an annual Communications and PR plan to build a culture of stewardship and ensure success and challenges are celebrated and shared appropriately, right across the workforce of NHS Dumfries & Galloway
- Set up and oversee specific, operational workstream groups as required
- Take the lead in ensuring the aims of DL (2021) 38 are fully integrated into all planning, management decisions and operational practices across NHS Dumfries and Galloway.

Core membership is set out in the table below. However, at the Chair's discretion additional internal and external individuals can be co-opted onto the Board or attend for a particular issue. This is particularly relevant for clinical staff. Attendees and Professional experts can be called upon to attend when required. Membership will be formally reviewed on an annual basis; the table reflects the board membership in 2024/25:

Table 1 – CES Programme Board Membership 24/25

Chair	Non-Executive Board Member and Board Champion for climate emergency and sustainability
Vice Chair	Director of Finance and Executive Champion for climate emergency and sustainability
Member	Green Prescribing Group
Member	Director of Strategic Planning and Transformation
Member	General Manager, Facilities and Clinical Support Services
Member	Procurement Manager
Member	Director of Pharmacy
Member	Charity Operational Manager
Member	Communication and Engagement Manager
Member	Energy, Environment and Sustainable Development Programme Manager
Member	Clinical Teaching Fellow, ScotGEM Programme
Member	Speciality Doctor (Anaesthetics)/Green Theatre Lead
Member	Project Manager
Member	Non-Executive Board Member/ACF
Member	Equality and Diversity Lead
Member	General Manager, Highwood Health
Member	General Manager, Highwood Health
Member	Senior Infection Control Nurse
Member	Speech & Language Therapist (Allied Health Profession Representative)
Member	RCN Steward
Member	Programme Support Office
Member	GP IT Re-provisioning Project Support Officer
Member	Steward & Safety Rep with the Royal College of Nursing

3. Summary of impacts

Table 2 - 2040 Greenhouse Gas Reduction Targets

2040 Net-Zero emissions	2020/21	2021/22	2022/23	2023/24	2024/25	Target (2024/25)
Carbon footprint (tCO ₂ e)	17,395	16,961	16,457	16,963	16,228	Continued reduction

Table 2 shows NHS Dumfries and Galloway’s collective emissions as an estate in tonnes of CO₂ equivalent per year. Overall, there has been a downward trend in total emissions, with the 2024/25 emissions following that trend. NHS Dumfries and Galloway aims to become a net-zero organisation by 2040 for the sources of greenhouse gas emissions set out in **Table 3**.

Table 3 sets out the number of emissions (CO₂e) for multiple key sources across NHS Dumfries and Galloway for this reporting year, as well as the last reporting year. The percentage change between the two reporting years puts context to how we are performing in relation to emissions from an individual source, as well as our total emissions from all sources. If applicable, emissions targets are included against the source, and a percentage illustrates how the Board has performed against target.

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Table 3 Greenhouse Gas Emissions equivalent tonnes CO2 23/24 & 24/25

Greenhouse gas emissions 2023-2024 & 2024-2025, tonnes CO2 equivalent (tCO2e)					
Source	2023/24 emissions (tCO2e)	2024/25 emissions (tCO2e)	Percentage change – 2023/24 to 2024/25	2024/25 – target emissions	Difference between 2024/25 actual emissions and target emissions (percentage)
Building energy	12,332	12,332.8	0%	11694	+5.3%
Non-medical F-gas	22.25	13	-42%	-	-
Medical gases	521	339	• -39%	325	+4%
Metered dose inhaler propellant	2928	2,753.12	-6%	39% from baseline	54%
NHS fleet travel	393.3	359	-9%	373	-4%
Waste	249.4	195	-22%	-	-
Water	54.6	48.5	-11%	-	-
Business travel	475	481	+1%	-	-
Total emissions	16,963	16,228	-4%	-	-
Carbon sequestration	NA	NA	NA	NA	NA
Greenhouse gas emissions minus carbon sequestration	16,963	16,288	-4%	-	-

Table 4 sets out how much of key resources we used over the last two years, waste has increased as we now include clinical and domestic waste in this calculation this did not happen previously and gives use a more accurate baseline. **Table 4** shows the key measures of each source, which can be related back to how these affect the emissions from the source i.e. although the km travelled by the NHS fleet has increased, the emissions from the source have decreased. This is due to the Board working towards phasing out petrol and diesel vehicles in the fleet.

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Table 4 – Comparison of key sources usage over the last 2 years.

Source	2023/24 Use	2024/25 Use	Percentage change – 2023/24 to 2024/25
Building energy (kWh)	66,660,212	65,448,800	-1.8%
NHS fleet travel (km travelled)	2,013,425	2,257,345	+12%
Waste (tonnes)	754	1,256	+67%
Water (cubic metres)	162,446	173,690	+7%
Business travel (km travelled)	2,906,931	2,974,528	+2.3%

2045 Greenhouse Gas Reduction Targets

We are working to support reductions to greenhouse gas emissions to net-zero by 2045 for sources of emissions over which we have less control and influence – emissions from the production and supply of the goods and material we use, patient travel and staff commuting. **Table 5** is required as part of the Scottish Government reporting template however, the Board doesn't currently have ways to estimate these emissions but will continue to work with national colleagues and other Boards for ways to estimate this.

Table 5 Estimates of Greenhouse Gases for other emission sources

Source	Latest estimate, Tco2e	Year of estimate
Supply chain	Unavailable	Unavailable
Patient travel	Unavailable	Unavailable
Staff commuting	Unavailable	Unavailable

4. Climate change adaptation

The climate is changing due to the greenhouse gases already emitted into the atmosphere. While efforts to reduce the rate and scale of climate change continue, we must also adapt to new conditions we are facing.

The changing climate is increasing risks for health and health services. More information on these risks in the UK can be found in the UK Climate Change Committee's Health and Social Care Briefing available here:

[www.ukclimaterisk.org/independent- assessment-ccra3/briefings/](http://www.ukclimaterisk.org/independent-assessment-ccra3/briefings/)

NHS Dumfries and Galloway carried out a Climate Change Risk assessment utilising the tool provided by NHS Scotland in 2022. A Climate Change Adaptation Plan has been drawn up from this.

Assessments were made for critical services during future predicted weather extremes, patient demand and demographics. This included vulnerable communities.

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Business Continuity

The Board continues to develop its business continuity plans to take into consideration risks posed due to climate change

Business continuity is dependent on many different aspects of the services and assets of NHS Dumfries and Galloway. The following aspects are essential to the delivery of health services:

- Staff and contractors (and their ability to get to and from different locations)
- Resources (food, water, hospital supplies, etc.)
- Assets and infrastructure
- Wider transport infrastructure
- Energy supply
- IT and communications
- Waste disposal
- Supply chains (local, national and international)
- Emergency planning

Table 6 outlines the top six actions from the Climate Change Adaptation Plan.

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Table 6 - Top six actions Climate Change Adaption Plan

	Nature of potential impact	Risk Exposure	Mitigating Action	Risk
Higher average temperature and extended periods of hot weather (including heatwave)	Increased use of cooling systems (air conditioning)	8	Forward planning in building specification	8
Higher average temperature and extended periods of hot weather (including heatwave)	Issues raised by Climate Change	16	Building regulations and Future Proofing of Specifications	8
	Nature of potential impact	Risk Exposure	Mitigating Action	Risk
Combined climatic effects (including storms, high winds, lightning, fog, mist and low cloud)	Issues caused by the outcomes of climate change	16	Building regulations and Future Proofing of Specifications	8
Cold spells (including frost, snow and ice)	Increasing number of patients	12	Forward planning with Sustainable Care Models	8
Heavy downpours and driving rain (includes changes in moisture content of air and soil)	Transportation and site access	6	Planned maintenance of drainage and guttering	6
Heavy downpours and driving rain (includes changes in moisture content of air and soil)	Localised Flooding	6	Planned maintenance of drainage and guttering	6

To reduce the risks highlighted in the Climate Change Adaption plan, a number of different actions have been taken:

- Ensured ongoing maintenance of areas highlighted in the report, gutter and drainage cleaning, winter maintenance provision and heating and cooling systems
- Ensured planned preventative maintenance and repairs are made to power, light and heat system within all buildings in the estate
- Planned maintenance and testing of secondary fuel sources for heating systems to ensure redundancy during colder and wetter winter months
- Major projects carried out to future proof roofing systems of buildings
- Major projects to replace end of life cycle heating systems

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In preparation for future climate change impacts NHS Dumfries and Galloway is carrying out the following work:

- Continual review and development of Climate Change Adaptation Plan and Risk Assessment
- Periodic review and updating of site Emergency Water Plans
- Review and upgrade of site water systems to future proof water supply
- Ensure all current and future maintenance contracts cover and address potential issues from highlight climate change risks
- Periodic review of site flood risks, including the involvement of Dumfries and Galloway Royal Infirmary in the Phase 3 development of the national Floor Risk Assessment
- Develop and review business continuity plans for critical services such as uninterrupted health provision, utility supply and waste collection
- Staff training in Climate Change and impacts on Health Care

5. Building energy

We aim to use renewable heat sources for all the buildings owned by NHS Dumfries and Galloway by 2038. NHS Dumfries and Galloway has around 44 buildings such as 2 acute hospital sites, Dumfries and Galloway Royal Infirmary and Galloway Community Hospital, a mental health hospital, 5 community hospitals, 6 community hubs, health centres, GP practices and a dental centre.

In 2024/25, 12,332 tonnes of CO₂ equivalent were produced by Dumfries and Galloway's use of energy for buildings, this was similar to that used in 2023/24. Although the energy usage was lower from 2023/24 to 2024/25, conversion factors for emissions sources change from year to year, which has led to no change in emissions. In 2024/25, NHS Dumfries and Galloway used 65,448,786 kWh of energy. This was a decrease of 1.8% since the year before. LED lighting upgrades, alongside other projects such as space utilisation, has aided in the decrease in energy consumption.

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Table 7 – Building energy emissions from 2015/16 baseline to 2024/25.

Building energy emissions, 2015/16, 2023-2024 & 2024-2025, tonnes CO2 equivalent (tCO2e)				
	2015/16 energy emissions	2023/24 energy emissions	2024/25 energy emissions	Percentage change 2015/16 to 2024/25
Building fossil fuel emissions	6,631.9	9,339.7	11,035.1	+18.2%
District heat networks and biomass	56.1	26.5	92.7	+249.8%
Grid electricity	5,169.4	2,966.6	2,671.8	-9.9%
Totals	11,857.4	12,402	12,332.8	+4%

Although there was a decrease in grid electricity emissions from 2015/16 to 2024/25, overall, the Boards building energy emissions increased from the baseline year for a variety of reasons. DGRI was opened in 2017 and, being an acute hospital and the largest within the NHS D&G estate, ultimately led to a significant increase in fossil fuel emissions. After the 2015/16 baseline, a lot of more rural practices, community hubs and community hospitals have had biomass pellet boilers installed as a source of heat, along with a large biomass boiler which can supply Midpark Hospital. Grid electricity has decreased from the baseline year due to LED light upgrades and multiple other energy efficiency projects. All factors combined mean the Boards emissions from building energy are more than it was in 2015/16.

This reduction in tonnes of CO_{2e} was, in part by using the following projects.

- Building re-roofing projects including increased loft insulation levels.
- Large-scale project to convert Midpark Hospital entirely to LED light fittings at the end of the reporting period.
- The main areas still to have LED light fitting installed are: Dumfries and Galloway Royal Infirmary (DGRI), Dumfries Dental Centre, Castle Douglas Hospital and Galloway Community Hospital, some of which the Board intend to carry out in the next reporting year. It has been agreed that any light fitting for repair will be swapped out for LED fittings in DGRI as part of the contract.
- Building heating optimisation and temperature reductions where possible.
- Updated property strategy to better use our buildings and dispose of those which are not required.

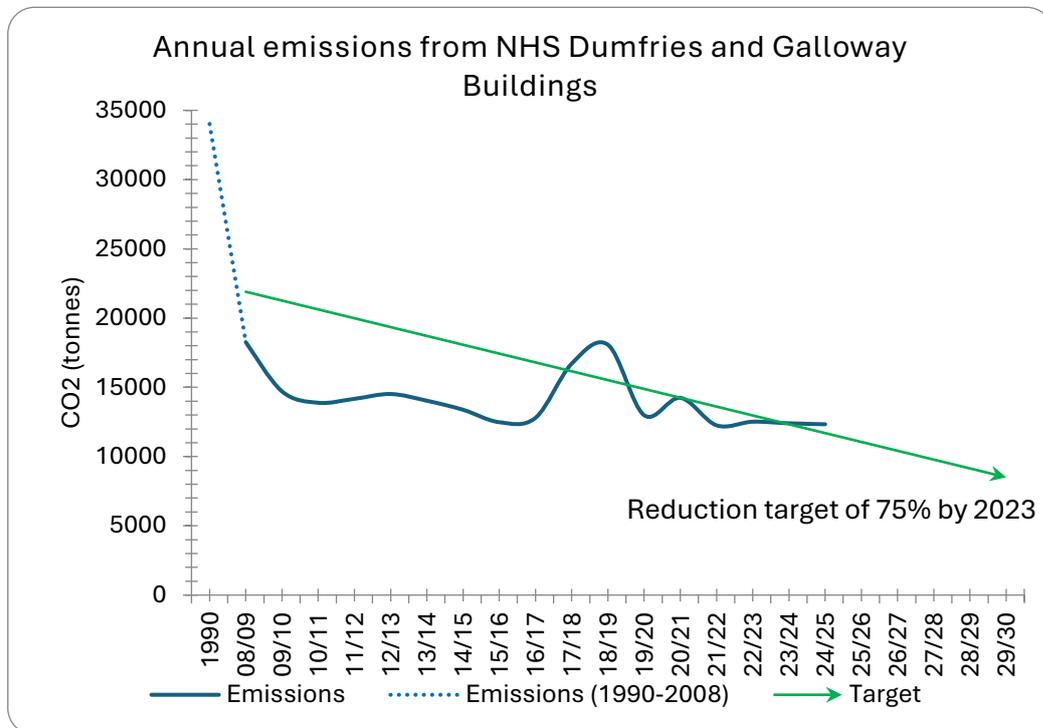
Table 8 shows the Boards building energy usage in megawatt hours (MWh). These are affected by optimisation of heating schedules and better insulation in buildings, energy efficient upgrades and the opening of DGRI in 2017.

Table 8 – Building energy use from 2015/16 to 2024/25, Megawatt hours (MWh)

Building energy use, 2015/16, 2023-2024 & 2024-2025, MWh				
	2015/16 energy use	2023/24 energy use	2024/25, energy use	Percentage change 2015/16 to 2024/25
Building fossil fuel use	35,955.3	50,898.4	51,691.1	+43.8%
District heat networks and biomass	4,251.7	2,095.9	1,901.6	-44.7%
Grid electricity	11,184.5	13,185.4	11,856.1	+5.7%
Renewable electricity	0	0	0	0
Totals	51,391.5	66,179.7	65,448.8	+27.3%

Figure 2 shows the Boards progress at reducing buildings emissions. A reduction of 63.2% has been achieved against a 1990 baseline.

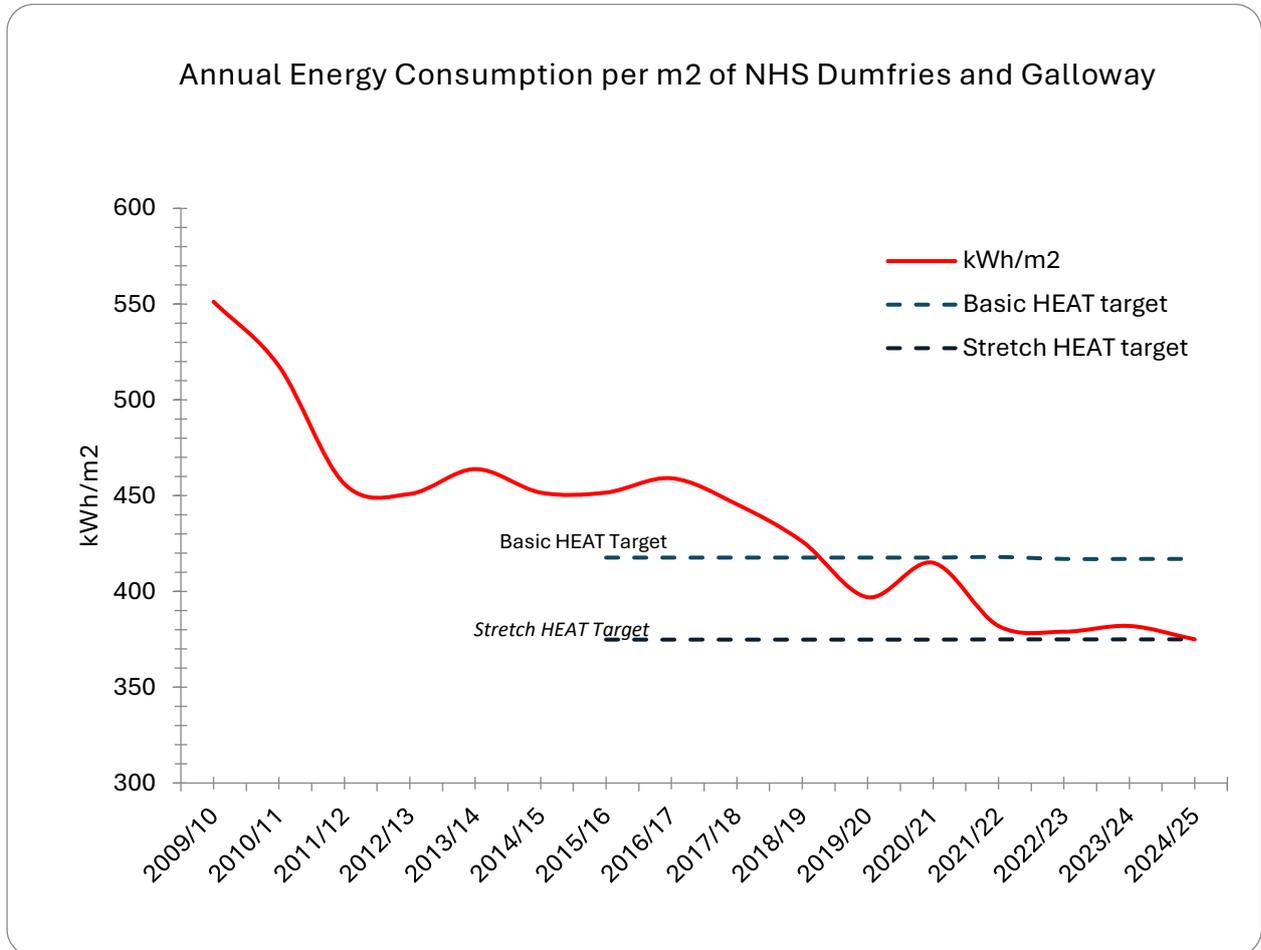
Figure 1 - Annual NHSDG building emissions from 1990 to 2024/25



The Scottish Government set a reduction target of 75% of annual emissions from NHS D&G buildings by 2030 in line with the Climate Change (Emission Reduction Targets) (Scotland) Act 2019. The Board is on the correct trajectory to achieve this by 2030.

Figure 3 shows the Boards progress in improving energy efficiency. The basic HEAT target is set by NHS Scotland climate emergency and sustainability strategy, which outlines a goal for NHS D&G to work towards for kWh/m². The stretch HEAT target is set at a local level and is a more ambitious target to meet. A reduction of 31.9% has been achieved since 2009-10 which met the local stretch HEAT target set

Figure 2 - Annual Energy Consumption per m2 of NHSDG Estate



In 2024/25 NHSD&G continued its work in decarbonisation of the estate. This included the following work:

- Full LED lighting replacement at Midpark Hospital. This work was funded by a grant from Scottish Government and completed in the last quarter of the reporting period with full benefits of the project to be seen in 2025/26.
- Major servicing work on the Combined Heat and Power Units at Dumfries and Galloway Royal Infirmary
- Building fabric, including roof, repairs on the estate
- Heating Systems and Building Management System (BMS) Optimisation

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In 2025/26 NHS D&G has several projects aimed at further reducing building emissions:

- In-depth analysis and optimization of the Building Management System at Dumfries and Galloway Royal Infirmary. This is funded through Scottish Government with plans to complete the project in early 2026
- Further building fabric repairs, including a new roofing project at a major site funded by Scottish Government
- The Board will install and commission the first solar Photovoltaic (PV) array, expected to be complete in Q2 2025, funded through the Board's capital stream.
- Feasibility study at Dumfries and Galloway Royal Infirmary looking at the decarbonisation of the heating system within the building. This is a Scottish Government funded project aiming to understand how decarbonised heat can be integrated into existing systems.
- Activation of power optimization equipment aimed at reducing and stabilising power consumption thus reducing utility expenditure and emissions. This is work funded through the Estates Department.
- Development of further LED lighting replacement programs.

NHS D&G continues to develop and update the Board's long-term strategy for reduction of building emissions. This long term plan includes both infrastructure changes and existing green energy generation. Future plans include:

- Update of heating system at Mountainhall Treatment Centre, this has numerous possibilities such as green fuels and on site renewable energy provision
- Roof top solar PV systems
- Waste Heat Recovery systems
- Power reduction technology
- Use of existing renewable power generation to offset grid electricity emissions without need for on-site infrastructure

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The following has been developed as a workplan for Building Energy in NHS Dumfries and Galloway.

Table 9 – Building Energy Workplan

BUILDING ENERGY TARGETS
Work stream Targets
<ul style="list-style-type: none"> • All owned buildings to have renewable heating by 2038 with interim targets from 2024 • Reduce emissions by 75% compared to 1990 • All electricity from renewable sources by 2035 • Adaptive capacity (high winds, storms, water security) following best practice in line with ISO14090 • Use NHS Scotland Sustainable Construction and Design Guide (SHTN 02-01) for any new facilities or refurbishments
BUILDING ENERGY WORKPLAN
2023-24
<ul style="list-style-type: none"> • Analysis was undertaken of Jacobs Zero Route map work (received June 2023). • The Board reviewed the Estates Strategy, including the utilisation of space. – A Property Strategy and an Emissions Reduction Strategy has now been produced. • The Board developed an Energy strategy - A Property Strategy and an Emissions Reduction Strategy have also been produced. • NHS D&G engaged in the NHS Scotland Circular Economy Programme. • The Board continued to explore local opportunities for energy generation.
2024-25
<ul style="list-style-type: none"> • Ministerial review included CES update. • Undertook appropriate Internal Audits to measure progress. • Solar PV installed. • Reduction of Building emissions via Building Management and power optimization systems. • Continued development of Boards property strategy. • Initiation of LED lighting replacement programme
2025-26
<ul style="list-style-type: none"> • Ministerial review to include CES update. • Development of heating strategy for Mountainhall sites. • Implementation of actions from BMS optimization project at DGRI. • Continuation of LED lighting replacements. • Review of energy reduction and optimization technologies.
2026 Onwards
<ul style="list-style-type: none"> • 2028/2029 – update Climate Change risk assessment and review Climate Change Adaptation Plan • Update Estate de-carbonization strategy

6.1 Sustainable care

The way we provide care influences our environmental impact and greenhouse gas emissions. This section outlines some of the projects that have been taken forward to promote sustainable models of care across our health and social care system.

Digital Technology

Digital Technology pilot has been undertaken within the care at home sector of the Community Health and Social Care Directorate namely Ethel, our Smart Hub with integrated sensors, is currently providing digital support to 13 service users. This innovative solution has effectively replaced approximately 148 hours of weekly traditional hands-on care. Notably, one service user has transitioned from requiring overnight care to being supported by the Smart Hub in combination with a responder service.

The Smart Hub costs £1,080 annually, while the average hourly cost of hands-on care is £25.50. This represents a significant cost saving and, more importantly, enables care staff to focus their capacity on delivering essential, hands-on care where it is most needed. From a climate sustainability perspective this cuts vehicle mileage lowering fuel consumption with a reduction in carbon emissions, contributing to a greener, more sustainable care model.

NHS Near Me is widely utilised across Dumfries and Galloway for outpatient (non-emergency) appointments, enabling patients to connect using a smartphone, tablet, or computer. This approach delivers significant benefits, including reduced travel time and enhanced accessibility by allowing individuals to participate remotely.

Looking ahead to the next financial year, there will be a continued focus on optimising the use of technology within our remote and rural communities. This strategy aims to minimise unnecessary travel, improve patient experience, and support sustainable service delivery.

The Board continues to utilise the PatientHub appointment system, which was introduced in September 2021. This platform issues digital notifications via SMS or email for a proportion of hospital appointments, supporting a digital-first approach to patient engagement. The use of PatientHub reduces reliance on postal communication, thereby lowering associated costs and minimising administrative paperwork.

Integrated Discharge Team

The evolution of the Community Waiting Times Team into the broader Community Hub has marked a significant step forward in integrated care delivery. This transformation has brought together key teams across patient flow—spanning acute and community services, the Reablement Team, and the original Community Waiting Times Team—into a cohesive, collaborative unit.

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This integrated approach has enabled greater transparency across providers, including Care at Home and Care Homes, allowing for more effective management of patient flow. The team now proactively identifies system pinch points and highlights areas of available capacity, ensuring timely and informed decision-making.

A key advancement has been the implementation and embedding of the Ethel Smart Hub within the community, enhancing digital connectivity and remote support. Additionally, the team has played a pivotal role in the development and refinement of the Flexible Bed process, supporting seamless transitions across multiple care pathways from acute settings into the community.

These developments have laid the foundation for establishing of a fully Integrated Hub, managed by community services and facilitated within DGRI, to further streamline care coordination and improve outcomes across the region. This is in the early stages however due to commence in December 2025. Better integrated and co-ordinated care across our region will reduce the need for staff and patient travel, thereby reducing environmental impact.

Discharge to Assess (October 2024 to present)

Since its initiation in October 2024, the Discharge to Assess (D2A) programme has received 750 referrals, with 528 individuals commencing the pathway. Of those, 37% were discharged independently, requiring no long-term care support.

Key Strengths

Timely Assessment: Individuals are assessed within their own homes within 72 hours of discharge, ensuring care decisions are made in a familiar and realistic environment.
Rapid Discharge: The D2A teams have demonstrated the ability to facilitate discharge within hours of referral, contributing to efficient hospital flow and reduced delays.

Positive Outcomes: Evaluation from the first quarter indicated that 40% of participants regained independence, highlighting the programme's potential to support reablement and reduce long-term dependency. This in turn reduces the need for provision of care packages, reducing patient and staff travel.

This is an evolving model and financial and geographical constraints present challenges that are being worked through to enable sustainable delivery of this model.

Flexible Beds Implementation and Utilisation Summary Reporting Period: October 2024 – August 2025

Following the decommissioning of three community hospitals on 14th October 2024, the Flexible Beds initiative was introduced to support system-wide patient flow and maintain capacity. This was further impacted by the closure of Ward 1 at Mountain Hall Treatment Centre on 1st April 2025, which previously operated as a surge facility with a maximum capacity of 16 beds.

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Bed Capacity and Utilisation

- Initial Capacity: 19 beds
- Peak Capacity: 26 beds
- Current Capacity: 21 beds

The remaining 5 beds were reallocated to the residential bed capacity. Between October 2024 and August 2025:

- Total Commissioned Bed Days: 992
- Total Bed Days Used: 760
- Occupancy Rate: 71%

It is acknowledged that there was a lead-in period required to establish the service and ensure regional teams were familiar with and embedded the referral and access processes.

Referral Breakdown

- Respite Care: 62%
- Step-Up from Community: 22%
- Step-Down from Hospital: 16%

Impact and Observations

The Flexible Beds model has significantly contributed to improving patient flow across the system by providing ringfenced capacity. However, there remains scope for improvement, particularly in optimising step-down pathways from acute hospital settings, which could further alleviate pressure on acute care beds.

While there is no definitive data to establish a direct correlation, anecdotal evidence suggests a potential link between the availability of flexible beds and a reduction in delays for care home placements.

The Flexible Beds proposal was the first in Dumfries and Galloway to be subject to an Environmental Sustainability and Climate Impact Assessment. This identified expected beneficial impacts and mitigating actions for expected adverse impacts or maximise positive impacts. There has been no formal assessment of the environmental impact of introduction of the flexible bed model yet as these have only been in use for one year. The environmental components assessed considered the long term need for increased community beds in line with bed modelling. The results of the initial assessment are outlined in **Table 10**.

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Table 10 – Environmental Sustainability and Climate Impact Assessment Results for Flexible Bed Model

Area of Impact	Assessed Possible Impact
Air and atmosphere	Beneficial impact due to shorter journey times
Energy	Adverse impact due to potential for increased number of community beds
Human beings	Beneficial impact due to delivery of intermediate care and the expected positive impact on wellbeing
Consumables	Adverse impact due to increased number of locations
Demography	Beneficial impact due to changes to where people live and receive care. Potential adverse impact for less access to specialist support
Economic Base	Beneficial impact for more opportunities in local communities. Beneficial impact for greater certainty of revenue for providers of flexible beds
Housing	Beneficial impact due to increased care sector employment and need for housing Beneficial impact due to build of care home or housing
Other local services	Adverse impact indirectly as implementation could mean construction and increase demand for utilities
Recreation	Beneficial impact as may increase demand for recreation
Socio-cultural	Beneficial impact in delivering intermediate care close to home is important to people
Transport	Beneficial impact as should reduce demand for longer distance travel Adverse impact as change in demand pattern could increase demand for community travel services
Flora and Fauna	Adverse impact as extended or increased number of buildings reduce habitat
Landscapes	Adverse impact if construction/extension occurs Beneficial impact of new builds where planning for minimal impact could be possible
Soil and Geology	Adverse impact due to use of heavy plant in construction
Water resources	Adverse impact due to construction work run off

Community Health and Social Care Hubs

The Right Care Right Place Programme resulted in the closure of beds within four cottage hospitals in October 2024 and plans to establish community health and social care hubs within these buildings in Thornhill, Kircudbright, Newton Stewart and Moffat. There are plans in place for increased clinics, introduction of ‘near me’ and for use by third sector organisations to provide community supports. In Moffat the building will become the location of the GP Surgery. The required capital works are underway or planned in all four areas and it is expected that the community health and social care hubs will become operational in 2026. An Environmental Sustainability and Climate Impact Assessment was also undertaken for this area of work with the results of the initial assessment outlined in **Table 11**.

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Table 11 – Environmental Sustainability and Climate Impact Assessment Results for Community Health and Social Care Hubs

Area of Impact	Assessed Possible Impact
	Assessment September 2024
Air and atmosphere	Beneficial impact due to shorter journey times and fewer journeys
Energy	Adverse impact due to potential for increased use of community hospital sites
Human beings	Beneficial impact due to delivery of intermediate care and the expected positive impact on wellbeing
Consumables	Adverse impact due to increased number of people treated
Demography	No impacts expected
Economic Base	Beneficial impact for more opportunities in local communities
Housing	No impacts expected
Other local services	Adverse impact indirectly as the amount of refuse increases due to increased activities onsite
Recreation	Beneficial impact as may increase demand for recreation
Socio-cultural	Beneficial impact as community use the site differently
Transport	Beneficial impact as should reduce demand for longer distance travel Adverse impact as change in demand pattern could increase demand for community travel services
Flora and Fauna	No impact expected
Landscapes	No impact expected
Soil and Geology	No impact expected
Water resources	No impact expected

6.2 Anaesthesia and surgery

Greenhouse gases are used as anaesthetics and for pain relief. These gases are nitrous oxide (laughing gas), entonox (a mixture of oxygen and nitrous oxide) and the 'volatile gases' - desflurane, sevoflurane and isoflurane. Through improvements to anaesthetic technique and the management of medical gas delivery systems, the NHS can reduce emissions from these sources. NHS Dumfries and Galloway total emissions from these gases in 2024/25 were 306tCO_{2e} a decrease of 195tCO_{2e} from the year before. More detail on these emissions is set out in the **tables 12 and 13**

Table 12 - Nitrous oxide and entonox emissions

Nitrous oxide and entonox emissions, 2018/19, 2023-2024 & 2024-2025, tonnes CO2 equivalent (tCO2e)				
Source	2018/19 (baseline year)	2023/24	2024/25	Percentage change 2018/19 to 2024/25
Piped nitrous oxide	231	177	44	-81%
Portable nitrous oxide	20	14	7	-65%
Piped entonox	423	275	229	-46%
Portable entonox	48	35	26	-46%
Total	722	501	306	-58%

Table 13 - Volatile medical gas emissions

Volatile medical gas emissions, 2018/19, 2023/24 & 2024/25, tonnes CO2 equivalent (tCO2e)				
	2018/19 (baseline year)	2023/24	2024/25	Percentage change 2018/19 to 2024/25
Desflurane	51.8	0	6	-88%
Isoflurane	0.6	0	1	+66%
Sevoflurane	22.9	20	27	+18%
Total	75.3	20	34	-55%

In 2024/25 the following work was carried out to minimise emissions from anaesthetic gases:

- Preventative maintenance as per all statutory requirements to minimise gas loss through piped systems
- Board wide survey of all anaesthetic systems and bottles

The increase in use across all volatile medical gases may be a reflection of increased elective activity following COVID.

In 2025/26 this work will continue with:

- The review of Nitrous Oxide use and the manifold system at our Galloway Community Hospital
- Continued preventative maintenance as per all statutory requirements to minimise gas loss through piped systems
- Review of Volatile medical gas use within NHS Dumfries and Galloway

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The National Green Theatres Programme was officially launched in 2023 to help reduce the carbon footprint of theatres across NHS Scotland and enable more environmentally sustainable care by:

- Working with clinicians and professionals to develop actions that reduce carbon emissions, waste and resource use.
- Supporting Boards to implement, measure and report on these improvements.

The Green Theatres Programme is based on actions developed by frontline staff and the Green Theatre Project at Raigmore, NHS Highland. In 2024/25, NHS Dumfries and Galloway did the following to make operating theatres more sustainable:

- Trial a number of surgical fluid systems that discharge to a grey water system, with evaluation ongoing
- Commenced the process of changing pre-operative paracetamol from intravenous to oral in appropriate patient groups.
- Embed waste segregation and recycling within the scopes of the site recycling systems
- Investigation of system abilities to implement 'set back' for Theatre ventilation systems
- Embed changes in practice for hand 'rub not scrub' for staff undertaking surgical procedures
- Rationalise use of fluid warming during operations

2025/26 will see NHS Dumfries and Galloway implement the following to reduce emissions associated with theatres:

- Switch off anaesthetic gas scavenging system out of hours, thereby reducing energy consumption
- Continue to appraise surgical fluid systems that discharges to a grey water system and work up business plan for a preferred system
- Complete the change of pre-operative paracetamol from intravenous to oral
- Final implementation of 'set back' for Theatre ventilation systems
- Investigate opportunity for lean surgical trays and reduced material waste in operating theatres
- Reduce the unnecessary use of surgical gloves and investigate the opportunities for re-usable theatre caps.

Alongside these actions for implementation as part of the renamed Green Healthcare Scotland, NHS Dumfries and Galloway has also worked to incorporate the following actions into wider workstream around surgery:

- Enabling active travel
- Using telephone consultations and electronic forms to reduce unnecessary hospital trips for patients.
- Using re-usable plastic trays within theatre instead of pulp trays

We meet regularly with the team from Centre for Sustainable Delivery to measure progress and quantify the effect that these changes have had both financially and in terms of reduced CO2 emissions. The Green healthcare Programme is expanding to also include Renal and Endoscopy services from 2025/26.

6.3. Respiratory medicine

Greenhouse gases are used as a propellant in metered dose inhalers used to treat asthma and COPD. Most of the emissions from inhalers are from the use of reliever inhalers – Short Acting Beta Agonists (SABAs). By helping people to manage their condition more effectively, we can improve patient care and reduce emissions. There are also more environmentally friendly inhalers such as dry powder inhalers which can be used where clinically appropriate. We estimate that emissions from inhalers in NHS Dumfries and Galloway were 2,753 tonnes of CO2 equivalent in 2024/25. This is a 6% reduction in emissions from 2023/24.

Table 14 – Inhaler propellant emissions

Inhaler propellant emissions, 2018/19, 2023-2024 & 2024-2025, tonnes CO2 equivalent (tCO2e)				
Source	2018/19 (baseline year)	2023/24	2024/25	Percentage change 2018/19 to 2024/25
Primary care	2,794	2,952	2,708	-3%
Secondary care	129	45	46	-64%
Total	2,923	3,024	2,753	-6%

Actions to reduce inhaler emissions during 24/25 included:

- A programme of training was delivered and communications to increase awareness across healthcare professionals and sectors. This was accompanied by social media and communications targeted at patients to help increase knowledge and acceptance of respiratory reviews with a focus on environmental aspects. Supported resources were provided to enable cluster teams to examine and review prescribing of MDIs and those with asthma over-reliant on reliever inhalers.
- Continued focus on training and awareness, with regular update bulletins and implementation of BTS/NICE/SIGN asthma guidance, focusing on those with relievers only, to improve therapeutic outcomes and reduce environmental impact. Local formulary updates also occurred in line with national guidance.
- Use of social media to highlight the need for respiratory reviews when there is poor control. Use of regular update bulletins and emails to update clinical staff.
- The SABA Inhaler Project has progressed through targeted training in high-spend practices and a review of the respiratory formulary, now awaiting sign-off. Using the Scottish Therapeutics Utility system, 13 complex patients were identified for potential inhaler optimisation. Outcomes to date include discontinuation of unnecessary inhalers, switching patients to a single combination inhaler, and scheduling eight patients for asthma or COPD reviews due to compliance issues or SABA overuse.

Table 15 – Work Plan Sustainable Care

SUSTAINABLE CARE/Green Theatres
Work stream Targets
<ul style="list-style-type: none"> • Continue to implement shared decision making between clinicians and patients in line with Realistic Medicine aims to reduce low value and futile treatments e.g. in relation to prescribing • Reduce emissions from inhaler propellants by 70% by 2028 • Work towards zero emissions of anaesthetic gases (desflurane, isoflurane, sevoflurane) • Achieve zero emissions of nitrous oxide by 2027
SUSTAINABLE CARE/Green Theatres – Workplan
2023-24
<ul style="list-style-type: none"> • Establish a sustainable clinical services delivery team as part of overall response to help clinical teams make sustainability a core consideration in improvement work • Seek to baseline wasted medication • Clarify NHS D&G’s approach to realistic medicine • Develop and deliver a local green theatres plan as part of the national Green Theatre Programme based on the NHS Highland plan • Establish a team to work towards zero emissions of anaesthetic gases and engage in the national programme on nitrous oxide removal • Support Green Prescribing Group to reduce Metered Dose Inhaler use and increase Dry Powder Inhalers; use SG awareness raising campaigns to inform locally. Training and resources provided to teams in primary and secondary care on green inhaler use.
2024-25
<ul style="list-style-type: none"> • Using learning from pilot Green Health Partnerships, develop a local green prescribing Plan and resources (this links to land stewardship and sustainable communities) • Continue work on inhaler prescribing – implementing new BTS/NICE/SIGN asthma guidance which has emphasis away from reliever prescribing. Focus support on practice nursing teams but also wider general practice teams where majority of prescribing and reviews take place, including prescribing bulletins and training. • Continue work on anaesthetic gases · Support SG work with medicine return to pharmacy schemes
2025-26
<ul style="list-style-type: none"> • Cease the use of nitrous oxide by 2027

6.4. Other sustainable care action

The pharmacy teams in primary care are working to increase the number of polypharmacy reviews undertaken, in partnership with the GP practices. The local hub models release time for pharmacists in practice to focus on this and numbers are increasing each quarter.

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The pharmacy teams will continue to prioritise and focus on polypharmacy reviews to improve safety and sustainability of medicines use. Clinical strategy will help to identify priority patients.

In November 2024, a Medicines Waste Workshop was held with 40 attendees representing all Directorates across our health and social care system and a number of professions. Key speakers including pharmacy leads, deputy medical director and secondary care consultant painted a stark picture of the damage caused by unused prescriptions, while also outlining innovative solutions to make prescribing safer, greener, and more effective. The attendees broke into breakout sessions to think about what we are doing well, what we need to stop doing and what we need to start doing. Insights from the workshop will feed into a Medicines Waste Implementation Plan, setting out practical actions for Dumfries and Galloway.

NHS leaders aim to roll out these initiatives, with a focus on collaboration across primary, secondary and community care where this is monitored and managed through our Medicines Scrutiny Group with an associated communication campaign.

The move comes at a critical time, as the NHS faces increasing pressure to reduce spend, improve efficiency, and reduce its carbon footprint.

7. Travel and transport

Domestic transport (not including international aviation and shipping) produced 28.3% of Scotland's greenhouse gas emissions in 2022. Car travel is the type of travel which contributes the most to those emissions. NHS Scotland is supporting a shift to a healthier and more sustainable transport system where active travel and public transport are prioritised.

To support and develop healthier and more sustainable travel NHS Dumfries and Galloway developed a sustainable transport and travel workplan which is outlined in **Table 16**. This details work completed and planned from 2023/24-25 in the areas of reducing the need to travel, improving active travel and improving public and community links to NHS facilities.

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Table 16 Sustainable Transport and Travel Workplan

SUSTAINABLE TRANSPORT AND TRAVEL
Work stream Targets
<ul style="list-style-type: none"> • Achieve 'Cycling Friendly Employer Award' from Cycling Scotland by 2028 • Remove 80% petrol and diesel fuelled cars from owned and leased fleets by 2028 • All small and light NHS commercial vehicles to be powered by renewables by 2028 • To cease purchase or lease of any large fossil fuelled vehicles by 2030 • Decarbonise owned or leased fleet by 2032
SUSTAINABLE TRANSPORT AND TRAVEL - Workplan
2024-25
<ul style="list-style-type: none"> • Continue the evolution of the Cycle to Work scheme • Seek assurance about plan for fleet transition requirements by 2028 • In line with SG intentions, ensure continued use of NHS Near Me and other forms of remote consultation where clinically appropriate • Explore other digital opportunities for safe delivery of consultation/treatment • Include greenhouse gas emissions from business travel in annual Climate Change reports
2025-26
<ul style="list-style-type: none"> • As part of biodiversity plans, ensure path networks link to the health care estate to encourage active travel • Ensure Home working Policy is fit for purpose • Explore options or better integration of care to reduce separate journeys • Develop information for patients and visitors in relation to siting and arrangements for e-charging of vehicles • Use Community Planning routes to review where public transport links to NHS sites needs to be improved • Funding application for the purchase of more bikes • Explore potential use of e-Cargo bikes between sites • Include greenhouse gas emissions from business travel in annual Climate Change reports • Review policies for staff leased vehicles and business travel so they support sustainable travel
2025-26
<ul style="list-style-type: none"> • Undertake an internal audit into fleet requirements • Continue work to reach 2030 and 2032 targets • Add an Internal Audit into the programme in relation to use of digital consultation tools • Develop detailed and accessible information to patients and visitors on how to avoid using a car to visit major sites (including cycle routes and paths, facilities, public transport options) • Include greenhouse gas emissions from business travel in annual Climate Change reports

Table 17 Fleet and Business Travel

Greenhouse gas emissions, tCO2e	2023/24	2024/25	Percentage change
Fleet emissions,	393	359	-9%
Business Travel	475	481	-1%

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In 2024/25 NHS Dumfries and Galloway was unable to reduce the need to travel with our fleet vehicles. However, even with an increase in mileage of 12% from the previous financial year, due to continued procurement work in replacing fleet with electric vehicles overall emissions from fleet travel was reduced 9% from the previous financial year. This was achieved by increasing the overall number of EVs within the fleet to 43% and the number of electric vans to 4% of the fleet, this is from 0% the previous year.

To support this change in fleet and as EVs become more widespread publicly NHS Dumfries and Galloway installed 12 new EV chargers at Dumfries and Galloway Royal Infirmary, these new higher rated chargers will help reduce charging times for the public to better support the change to green vehicles.

NHS Dumfries and Galloway continues to promote active travel, this is done through multiple routes, including the availability of bikes and ebikes to staff and students, articles in staff communications sharing the success stories of switching from cars to active travel and finally through the support of the bike to work scheme. This plan is to be continued into 2025/26, supporting staff to utilise active travel options.

We are working to remove all petrol and diesel fuelled vehicles from our fleet. **Table 18** sets out how many renewable powered and fossil fuel vehicles were in NHS Dumfries and Galloway fleet at the end of March 2024 and March 2025. There has been a significant increase in the number of zero tail pipe emissions over the last year.

Table 18 – NHSD&G fleet 0% tailpipe emissions breakdown

	March 2024		March 2025		Difference in % zero tailpipe emissions vehicles
	Total vehicles	% Zero tailpipe emissions vehicles	Total vehicles	% Zero tailpipe emissions vehicles	
Cars	120	21%	121	43%	+69%
Light commercial vehicles	23	0%	27	4%	+4%
Heavy vehicles	1	0%	1	0%	0%
Specialist vehicles	0	NA	1	0%	0%

Table 19 sets out how many bicycles and eBikes were in NHS Dumfries and Galloway fleet at the end of March 2024 and March 2025:

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Table 19 – Bicycles/eBikes in NHSD&G fleet

	March 2024	March 2025	Percentage change
Bicycles	21	21	0%
eBikes	19	19	0%

Table 20 sets out the distance travelled by our cars, vans and heavy vehicles in 2024/25 – an increase in km covered is likely due to an increase in service demand.

Table 20 Distance travelled 23/24 & 24/25 and percentage change

Distance travelled, kms	Cars	Light commercial vehicles	Heavy vehicles	Specialist vehicles	Total
2023/24	1,126,599	845,575	41,251	0	2,013,425
2024/25	1,603,457	588,043	65,873	0	2,257,345
Percentage change 2023/24 to 2024/25	+42%	-30%	+60%	0	+12%

Business travel is staff travelling as part of their work in either their own vehicles or public transport. It covers travel costs which are reimbursable and doesn't cover commuting to and from work. The **Table 21** shows our emissions from business travel by transport type

Table 21 Business travel emissions

Business travel emissions, tCO ₂ e	Cars	Public transport	Flights	Total
2023/24	475.1	Unavailable	Unavailable	475.1
2024/25	481	Unavailable	Unavailable	481
Percentage change	+1.2%	NA	NA	+1.2%

8. Greenspace and biodiversity

8.1 Biodiversity

Biodiversity, or the wide variety of living organisms within an environment, has declined at a rapid rate in the last 50 years. Evidence demonstrates that these trends are attributed to human activities, such as land use change, habitat degradation and fragmentation, pollution, and the impacts of climate change. The State of Nature report published in 2023 has highlighted the decline of nature across Scotland, with 11% of species now classed as threatened with extinction.

Public bodies in Scotland have a duty under the Nature Conservation (Scotland) Act 2004 ([Nature Conservation Scotland Act 2004](#)) to further the conservation of biodiversity, taking care of nature all around us. Furthermore, the Wildlife and Natural Environment (Scotland) Act 2011 ([Wildlife and Natural Environment Scotland Act 2011](#)) requires every public body to summarise their activities to meet this duty, through the production of a publicly available report.

NHS Dumfries and Galloway has implemented a number of strategies and policies which both, directly and indirectly, affect biodiversity. The Board has a Climate Emergency and Sustainability policy. These directly relate to the protection and enhancement of biodiversity. To supplement these there are an Energy and Emissions Reduction Strategy, each aimed at lowering emissions and energy use and in consequence reduce environmental impact and loss of biodiversity. Finally, NHS Dumfries and Galloway has created a decarbonisation plan which highlights projects for the reduction of greenhouse gas emissions through the use of green technologies for heating and energy reduction within the estate.

To ensure Biodiversity and the environment play a prominent part within NHS Dumfries and Galloway, opportunities have been leveraged to raise awareness and understanding in this area. The Board take part in Climate Change week with the creation of content that is then published on the website and in staff communications. This is followed up throughout the year with poster initiatives. The Board is proactive in the promotion of NHS Scotland Environmental training courses. Through the project to diversify, the Mountainhall greenspace NHS Dumfries and Galloway has organised and held consultations and biodiversity themed events for both staff and the public to attend. These events are crucial in helping increase peoples understanding of biodiversity and the environment, which surrounds us.

8.2 Greenspace

The design and management of the NHSScotland green estate for human and planetary health, offers an opportunity to deliver a range of mutually beneficial outcomes. These include action on climate change (both mitigation and adaptation), biodiversity, health and wellbeing for patients and staff, community resilience building and active travel.

NHS Dumfries and Galloway is assessing the extent and quality of the greenspace we own; the contribution its estate makes to biodiversity and undertake action to improve the contribution its estate makes to biodiversity. This section outlines key projects being undertaken in relation to greenspace and progress during 24/25.

BOARD PUBLIC

Galloway Community Hospital Community Garden

Aim of project – to enhance biodiversity, promote health and wellbeing and community resilience

Outline of Project - Creation of a community garden, raised beds and poly tunnels. Provides opportunity for a variety of groups to use, with disabled access to the gardens. Number of local partnerships involved in the development and running of the garden. The garden now provides both physical and mental health benefits through outdoor access and reduced isolation. The garden also creates a source of locally grown food

Progress during 2024/25

The Galloway Community Garden is facilitated by Community NHS volunteers and focuses on influencing young people (local secondary school), community groups and individuals in ways to address climate change, learn about land management and growing healthy food.

A few of the key approaches have included:

- Sharing knowledge on growing healthy food and health benefits for both humans and the planet, self-sufficiency and the appreciation of nature.
- The importance of living in a biodiverse environment and so encouraging biodiversity, soil health, local composting and mulching, reducing waste, water management and distributing local excess produce.
- Developed a local 'grow at home initiative e.g. New Tattie Planting day.
- Acting as a 'nursery' for propagating of perennial flowers, fruit and herb plants so that local people cultivate in the wider community
- Incredible Edible Stranraer, meet every Monday afternoon all year round. Their numbers range from 4 to 12 depending on the weather
- Easter to October (minus school holidays) a group of Stranraer Academy pupils (usually about 12) come for 90 minutes of gardening- they have their own raised bed and they choose what they want to grow. They help with other tasks - seed saving, turning compost, pruning etc.
- When the poly tunnel was available: seed saving and winter planting courses were running through the year. Minimum of 12 people on each course.
- The Covid Memorial and five trees, part of the dispersed forest, is situated within the garden: NHS staff enjoy their breaks, Women's Aid and nursery pupils and other members of the public visit the area.

Challenges

- The garden is inaccessible to wheelchairs or people with mobility issues. Storm Eowyn destroyed the poly tunnel and two of the fences in January 2025. A local donation of timber was given to replace one of the fences.

BOARD PUBLIC

DGRI 'Garden Hospital'

Aim of project – support Climate Change Adaptation Climate Change enhance Biodiversity Health and Wellbeing

Outline of Project - Use of green and energy efficient heating systems including CHP plant and ground source heat pumps. Redundancy built in energy supplies to ensure building is capable of adapting to climate change. Wards surround by garden spaces with 17 courtyards and gardens functioning as areas to relax. Use of light wells to give all ward room's access to natural light source.

Progress during 24/25 – Project complete

Greenspace Mountainhall Treatment Centre (MHTC) project

Aim of project – to enhance biodiversity, promote health and wellbeing and community resilience

Outline of Project – To collaborate with the local community to develop a plan for use of a parcel of land owned by NHS Dumfries and Galloway to promote biodiversity and community led management and use.

Progress during 2024/25

This project is progressing in partnership with Third Sector Organisation Propagate and Design Hopes (Design for Healthcare). Funding from Design Hopes and What We Do Now network commissioned two independent researchers organised a series of engagement events between December 2024 and April 2025 including onsite activities and developed a Community Panel of individuals who wished to work voluntarily alongside the above partners to develop the project. A report following the engagement was produced and distributed. Activities to date included: litter picking, ecological walks, community nature day, land management discussions, foraging and biodiversity.

A community face book and newsletter has been established and supported by Propagate, offering information of Greenspace MHTC project progress and advice/ tips

The overall consensus from the engagement indicates that most people want to ensure that any changes protect the site's natural ecosystem and biodiversity, and support wildlife habitats. There is an enthusiasm for nature-based activities, especially those that support wildlife and offer learning or creative opportunities. Accessibility is a strong recurring theme, with calls for seating, shade, and gentle paths to ensure everyone can enjoy the space.

The project is currently establishing its next steps as we bring Stakeholders and Community Panel members together. A key action is to agree upon a preferred management option for the future of the project, based on the results of engagement work, shared priorities and consider governance, terms of reference, funding, communication etc.

BOARD PUBLIC

Mountainhall Treatment Centre – Flax growing project

Aim of project – to enhance biodiversity, promote health and wellbeing and community resilience

Outline of Project - This project saw an area of grassland on the Mountainhall Estates changed over to allow the planting of flax seed. This project was supported by Design Hopes. The flax was then to be cultivated and processed locally into a set of surgical/doctors scrubs showing a local circular economy.

Progress during 2024/25 – Design Hope funded Elves CIC (Non profit social enterprise who offer learning opportunities for people with disabilities) to plant and manage a MHTC site, identified for Flax growing. Unfortunately, the soil was unsuitable and the flax didn't grow. Organic matter has been applied to improve the soil. Further discussion is required to determine what could be planted next.

Table 22 – Land Stewardship Workplans

LAND STEWARDSHIP Workplan
2024-25
<ul style="list-style-type: none">• Ensure the Board understands the decision making responsibilities in relation to SG Land Rights and Responsibilities Statement (LRRS) and SG Land Use Strategy as part of Board development
2025-26
<ul style="list-style-type: none">• Develop and implement a strategic framework for greenspace• Develop plans for all major sites to plan future change and maximise opportunities to enhance biodiversity as part of this explore role of arts to encourage use of outdoor spaces• Development community partnerships for the development of NHS green spaces for public use• Develop a Greenspace Register

9. Sustainable procurement, circular economy and waste

Earth Overshoot Day marks the date when our demand for resources exceeds what Earth can regenerate in that year. In 2024, the Global Earth Overshoot Day was 1st August, a day earlier than 2023. In 2021, it was 29th July. For 2025, Global Earth Overshoot day was 24th July. The current global trend shows a concerning picture of over consumption. For the UK, the picture is more worrying - in 2025, the UK's Earth Overshoot Day was 20th May in comparison to 3rd June 2024. The current level of consumption of materials is not sustainable; it is the root cause of the triple planetary crises of climate change, biodiversity loss and pollution.

The greenhouse gases produced in creating the goods and materials used by NHS Dumfries and Galloway are unavailable this year.

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We aim to reduce the impact that our use of resources has on the environment through adopting circular economy principles, fostering a culture of stewardship and working with other UK health services to maximise our contribution to reducing supply chain emissions to net-zero by 2045.

In 2024/25 NHS Dumfries and Galloway procured new general waste and recycling contracts. As part of the tender evaluation process, a section on sustainability is included. This section has an overall weighting of 30% of the mark, emphasising NHS Dumfries and Galloways commitment to ensuring the highest level of recycling and sustainability within its supply chain. A further component of these contracts is a requirement for the successful contractors to provide a sustainability plan to the Board, detailing how further savings can be made on emissions associated with waste and how recycling rates can be increased.

When tendering for refurbishment works contracts, such as the development of community sites, provisions are included in the contract specification to ensure, in the first instance, that any materials are re-used where appropriate on the project, and secondly if not used they are correctly recycled.

In 2024/25, Local Procurement supported National Procurement in the trialing of new, biodegradable pots for dispensing medication. This is now completed and embedded into the medication dispensing process.

To continue this effort, in 2025/26, NHS Dumfries and Galloway will continue to procure further waste streams as required, including tendering for a new confidential waste provider. Work will be done to ensure tender specifications contain any program specific requirements such as a, where appropriate, recycled goods, materials and modern low carbon alternatives to existing options.

Table 23 sets out information on the waste we produce and its destination for the last four years.

Table 23 historic vs current waste tonnages

Type	2021/22 (tonnes)	2022/23 (tonnes)	2023/24 (tonnes)	2024/25 (tonnes)	Percentage change – 2021/22 to 2024/25
Waste to landfill	0	0	0	0	0
Waste to incineration	825.5	668.9	422.73	357	-57%
Recycled waste	411	314.4	157.9	76	-81%
Food waste	166	180.7	173.7	171	+3.0
Clinical waste	527	518	723	652	+24%

BOARD PUBLIC

NHS D&G continue to send no waste to landfill. Throughout 2024/25 both waste to incineration and recycled waste has decreased due to an increased audit schedule and education through staff communications and engagement. Clinical waste tonnages decreased from last year through an interdepartmental training package along with projects that encouraged better segregation at ward level.

In 2024/25, to facilitate a reduction in waste, NHS Dumfries and Galloway focussed on auditing and education. This included increased waste audits across all sites, for both clinical and general waste streams. Increased staff communications and engagement with individual departments to help reduce waste, increase recycling and improve segregation in specific areas.

An interdepartmental project saw the creation of a new waste training package specific to clinical waste. A further waste project was also carried out looking at decreasing incorrectly segregated waste at ward level.

To further, improve NHS Dumfries and Galloway's position, in 2025/26 the Board in collaboration with its waste partners are rolling out a new recycling program. This will look at individual sites, analyse their waste streams, implement new bins and collection schedules to meet building needs, increase recycling rates, and reduce waste. Waste streams will be developed, as required and continued auditing will help highlight areas for improvement.

We have set targets to reduce the amount of waste we produce and the tables below provide information on our performance against those targets:

Table 24 – Waste performance vs target

Reduce domestic waste by a minimum of 15%, and greater where possible compared to 2012/2013 – by 2025	
Target – reduce domestic waste by	178 tonnes
Performance – domestic waste reduced by	467 tonnes
Outcome	ACHIEVED
Further reduction required	

Ensure that no more than 5%, and less where possible, of all domestic waste is sent to landfill – by 2025	
Target – reduce waste sent to landfill by	Maintain at 0 tonnes
Performance – waste sent to landfill reduced by	0 tonnes
Outcome	ACHIEVED
Further reduction required	

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Reduce the food waste produced by 33% compared to 2015/16 – by 2025	
Target – reduce food waste by	67.6 tonnes
Performance – food waste reduced by	28 tonnes
Outcome	NOT ACHIEVED YET
Further reduction required	40 tonnes

Ensure that 70% of all domestic waste is recycled or composted – by 2025	
Target – recycle or compost	528 tonnes
Performance – recycled or composted	247 tonnes
Outcome	NOT ACHIEVED YET
Further increase required	281 tonnes

Our workplan for Waste Management, Circular Economy, recycling and procurement is outlined in **Table 25**.

Table 25 - Workplan – Waste Management, Circular Economy, Recycling and Procurement

WASTE MANAGEMENT, CIRCULAR ECONOMY, RECYCLING AND PROCUREMENT
Work stream Targets
<ul style="list-style-type: none"> • Reduce domestic waste by minimum of 15% compared to 2012/13 baseline by 2025 • Maximum of 5% of domestic waste in landfill by 2025. • Reduce food waste by 33% compared to 2015/16 baseline by 2025. • Ensure that 70% of all domestic waste is recycled or composted. • Develop plans for waste streams and key materials (clinical waste, medicines waste, residual waste, recycling streams, packaging, food, estates including furniture and equipment, plastics, metal, wood, textiles, organics)
WASTE MANAGEMENT, CIRCULAR ECONOMY, RECYCLING AND PROCUREMENT – WORKPLAN
2024-25
<ul style="list-style-type: none"> • The Board reviewed and communicated Waste procedure so that it is clearly understood (Food Waste to be completed separately). • Waste Manager to established a programme to review opportunities to reduce clinical waste – works are still ongoing. • The Board took necessary action to achieve 2025 targets – partially complete. • Review plant based catering options - ongoing • The Board reviewed food provision across sites, including use of plastics – still ongoing • We ensured waste contracts align with ‘Duty of Care’ which includes audits and traceability.

BOARD PUBLIC

2025-26

- Finalise a reviewed Food Waste Policy to include national engagement in relation to menu choices
- Develop a local sustainable Procurement strategy
- Set appropriate targets for reducing the volume of clinical waste eg. extending life use, waste segregation, increased recycling (noting that SG is looking at a target for clinical waste reduction)
- Evaluate individual sites and create new bin/collection strategies for reducing waste, increasing recycling and reducing financial costs

10. Environmental stewardship

Environmental stewardship means acting as a steward, or caretaker, of the environment and taking responsibility for the actions, which affect our shared environmental quality. This includes any activities, which may adversely affect land, air and water, either through the unsustainable use of resources or through the generation of waste and pollution. Having an Environmental Management System (EMS) in place provides a framework that helps to achieve our environmental goals through consistent review, evaluation, and improvement of our environmental performance.

NHS Dumfries and Galloway is utilizing the Rio framework for the Environmental Management System (EMS). Minimal progress was made in the development of the EMS within the Rio platform during the reporting period due to resource availability. However, the Board continues to develop keys areas of an EMS system out with the Rio platform using processes such as SCART.

In 2024/25, further EMS training sessions were unable to be held due to staffing gaps and has slowed the development and management of the EMS system. With new appointments in quarter two of 2025 this will allow further work within the legislation and Aspects and Impacts register to be completed at a more advanced pace.

In 2025/26 NHS Dumfries and Galloway will continue with the previously agreed work plan for Good Environmental Stewardship see **Table 26**. To further improve environmental performance in the coming year the Board will continue to pursue green technologies for decarbonizing the estate and service, interact with local community groups and public bodies to better utilize greenspace, create more biodiversity and reduce environmental impacts.

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Table 26 Workplan – Good Environmental Stewardship

Good Environmental Stewardship
Work stream Targets
<ul style="list-style-type: none"> • Embed the Scottish Government (SG) Environmental Management System (EMS) across the organisation • Support staff, patients and visitors to understand the net zero agenda for the NHS and identify how by working together they can support
Good Environmental Stewardship - Workplan
2024-25
<ul style="list-style-type: none"> • The Board started to embed environmental performance into all relevant governance reporting processes (eg. CES Programme Board, P&R Committee and the Board) - ongoing • Continued work to cascade environmental management across the organisation - ongoing • Policy development and Aspects & Impacts Register was work initiated - ongoing
2025-26
<ul style="list-style-type: none"> • Deliver Communications Plan • Plan final Rio training session to include all parties to be involved with EMS development and management. • Add EMS progress to Internal Audit programme • Review performance management approach and amend as required • Update Communications Plan for 2024/25 • Use Community Planning routes to share, seek support and work together • Board development session on CES • Explore synergy between environmental stewardship and realistic medicine; develop actions

To support our environmental stewardship role clear communications on our approach to climate change is an important area for staff and the wider public, we have continued to promote key climate change events and messages and support local and national campaigns to reduce our environmental impact. **Table 27** outlines action for future years:

Table 27 Workplan – Communications, Internal and External

Communications, Internal and External
2024-25
<ul style="list-style-type: none"> • Deliver Communications Strategy and continue to identify opportunities for engagement • Targeted communications to support behaviour change of staff, patients and visitors • Targeted communication about 'where waste goes' • Identify networks which can be used to learn and share ideas
2025-26
<ul style="list-style-type: none"> • Communications strategy review • Internal Audit on staff perspectives about their understanding of our journey to net zero • Targeted communications with regards to clinical waste control • Communications to support the roll out of further recycling schemes within the Board

11. Sustainable communities

The climate emergency undermines the foundations of good health and deepens inequalities for our most deprived communities. The NHS touches every community in Scotland. We have a responsibility to use our abilities as a large employer, a major buyer, and one of the most recognised brands in the world – an ‘anchor’ organisation – to protect and support our communities’ health in every way that we can.

To create and maintain sustainable communities, NHSD&G work with many organisations. Below is an example of groups the Board work in partnership with:

- Third Sector Dumfries and Galloway
- Dumfries and Galloway council
- Crichton Trust
- South of Scotland Enterprise

Examples of approaches to support sustainable communities are outlined throughout this report. **Table 28** outlines the initial agreed workplan for Sustainable Communities

Table 28 Workplan – Sustainable Communities

SUSTAINABLE communities
Work Stream Targets
<ul style="list-style-type: none"> • Play a positive role in the community by minimising our own impact on the environment • Continue to work on the causes of poor health and inequalities • Use the Community Empowerment (Scotland) Act 2015 to have conversations about local land
SUSTAINABLE communities - Workplan
2024-25
<ul style="list-style-type: none"> • The Board gained assurance on the delivery of the Population Health Framework. • We worked with other partners and local communities to share information about NHS land and identify opportunities to collaborate on development, use and management • Through community planning mechanisms, we managed and protected greenspace • The Board explored how community groups and volunteers can support nature-based activity on key sites • Innovative partnerships were explored with other sectors which promote and support good physical and mental health
2025-26
<ul style="list-style-type: none"> • Explore further opportunities for NHS Dumfries and Galloway to act as an ‘anchor’ organization to help increase the sustainability within local communities

12. Conclusion

NHS Dumfries and Galloway’s approach to the climate emergency emphasises the necessity of a holistic approach to mitigate and adapt to a variety of impacts.

BOARD PUBLIC

This annual report reflects on our progress and activities throughout 2024/25, highlighting the successes along with the challenges the Board face. It also allows space for the Board to showcase future work for 2025/26, which has already begun.

Successes in 2024/25 include a reduction in clinical waste through staff communication, training and engagement alongside the Board maintaining 0% of domestic waste going to landfill.

Through the Board working towards less petrol and diesel vehicles in the fleet, more 0% tailpipe emission vehicles are within the Boards fleet, leading to a reduction in emissions although there were more kms travelled throughout the reporting year.

There was a significant improvement in secondary care inhaler propellant emissions, although the Board recognise there is more work required on the primary care front.

Considerable reductions in anesthetic gases (nitrous oxide and Entonox) were seen through maintenance and Board surveys of systems and bottles.

Throughout 2024/25 the Board saw a decrease in building energy usage and emissions. This was achieved through numerous energy efficiency projects, alongside works carried out in response to risk from the Boards Climate Change Adaption Plan. A combination of all the above has resulted in an overall emission reduction from the Board compared to last year.

The Board also recognizes that further work and development is required to reduce food waste, improve recycling and compost and reduction of emissions in volatile medical gases. Addressing these challenges, along with others, demands a collaborative effort with partners and stakeholders, alongside targeted financial support. Additionally, establishing policy frameworks that prioritise feasibility and affordability is essential in the pursuit of a sustainable, net zero future.

We are also incorporating climate change considerations into the way we design and deliver services and are progressing work with local communities to support use of NHS greenspace to support biodiversity and community wellbeing.

Together, throughout 2024/25, we have made meaningful progress whilst recognising that the development of climate-informed healthcare is an ever-evolving and continuous journey.

The Boards Climate and Emergency Programme Board will undertake a refresh of the workplans for each of our climate change areas and consider actions we need to take forward beyond 26/27 to continue our journey to Net Zero.