

Primary Care Resilience Webinar Series

---

# Greener primary care services

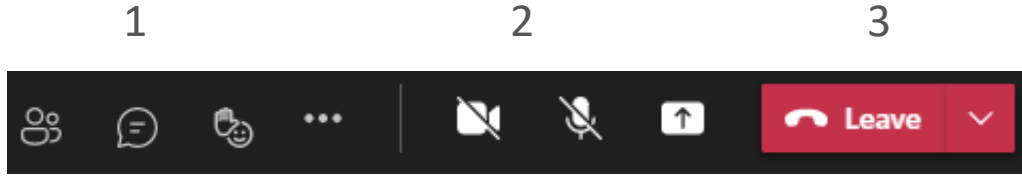


# Introduction and Scene Setting

**April Masson**

Portfolio Lead, Primary Care Improvement Portfolio  
Healthcare Improvement Scotland

# Housekeeping



1. **Open and close the chat panel** – use the chat box to introduce yourself, raise any questions you may have for the speakers and also post comments.
2. **Participants will have their cameras and mics automatically off** - The facilitators may ask you to elaborate on a specific point, in that case we will enable you to unmute your microphone.
3. **Leave the meeting** – use this to leave this webinar at the end.

**This Webinar will be recorded.**

**The link will be shared, so those who are unable to join us today can listen to the session.**



# Aims of the webinar series

- Reflect on what we have learnt from the response to COVID-19
- Explore what changes we have made and what we need as we move forward
- Connect and learn from each other

**TODAY**

Greener primary care services

# Session 1

## National perspective on greener primary care services

**Dr Michelle Watts**

Senior Medical Advisor

The Scottish Government

# Supporting NHS services to become an environmentally and socially sustainable health service

**Katie McCafferty**

Senior Policy Manager,  
General Practice Policy and Strategy,  
Scottish Government

# PRIMARY CARE AND CLIMATE CHANGE

In the service \_\_\_\_\_  
**of Scotland**



Scottish Government  
Riaghaltas na h-Alba  
[gov.scot](http://gov.scot)



- **Scotland is facing a climate emergency.**
- **We have ambitious targets to reach for 2045.**
- **NHS Scotland has bold 2040 target.**

# TOOLS AND RESOURCES AVAILABLE

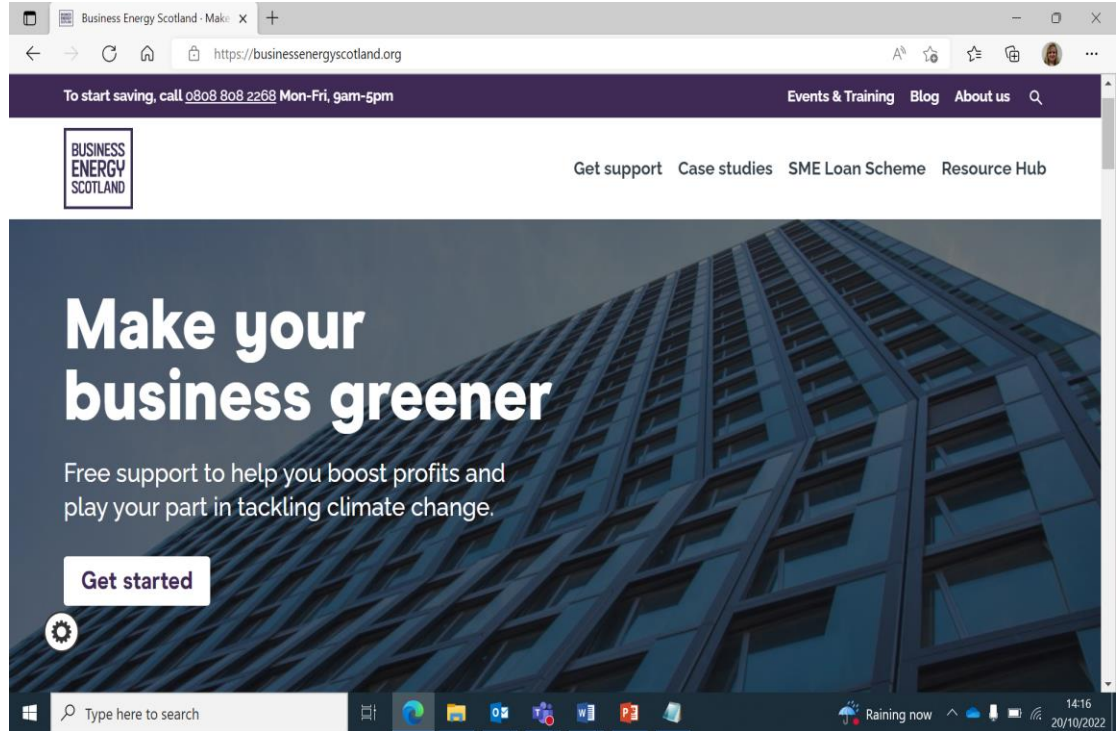
- **Support available via Business Energy Scotland**
- **Interest free loans and grants**
- **Climate Champion Events via Energy Saving Trust**
- **Bespoke General Practice Events soon**

## POLL

**Did you know you could  
take out an 8-year interest  
free loan for building  
improvements?**

# PREMISES

- **Free assessment**
- **Interest free loans**
- **Cashback grant**



# TRANSPORT

- **E-Bike Loan**
- **Used Electric Vehicle Loan**
- **EV Charging Installation**



## WHERE CAN I FIND OUT MORE?

- <https://businessenergyscotland.org/smeloan/>
- <https://energysavingtrust.org.uk/grants-and-loans/ebike-business-loan/>
- <https://businessenergyscotland.org/>

# How your practice can decarbonise and promote environmental sustainability in your everyday work

**Dr Munro Stewart**

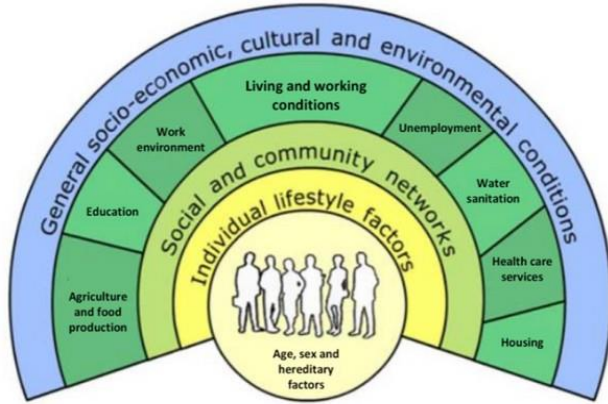
RCGP Scotland Climate and Sustainability Climate &  
Sustainability Lead, and General Practitioner, NHS Tayside

# Climate & Health

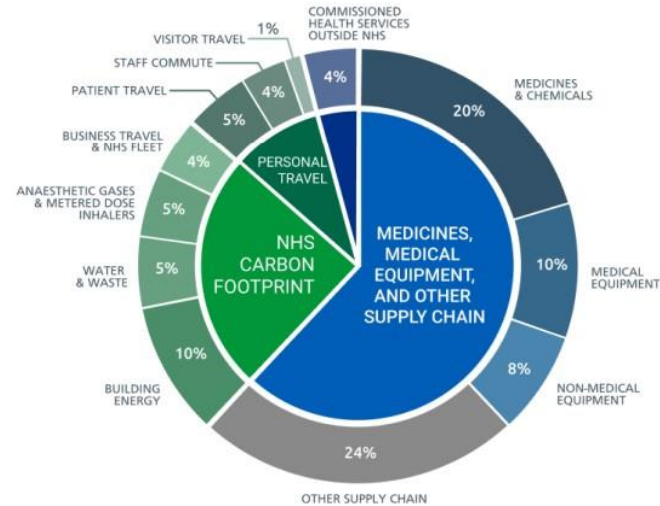
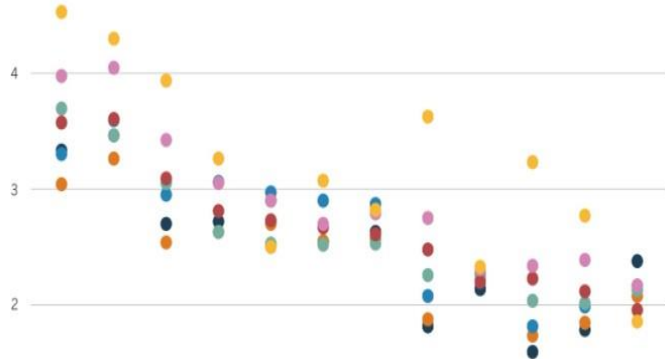




# Relevance to Primary Care



Source - Whitehead and Dahlgren, 1991





# Framing



# Integrate through practice



# Integrate through practice



# Find Support



Royal College of  
General Practitioners



# Discussion

# Session 2

## Practical ways of implementing green initiatives

**Dr Scott Jamieson**

General Practitioner, NHS Tayside and  
RCGP Scottish Council



# Reducing pharmaceutical waste on inhalers to avoid unnecessary environmental harm

**Peter Cawston**, GP

**Sandra Cahill**, Advanced Pharmacy Practitioner

Garscadden Burn Medical Practice

NHS Greater Glasgow and Clyde.



# Reducing MDI inhaler impact

PETER CAWSTON AND SANDRA CAHILL  
GARSCADDEN BURN MEDICAL PRACTICE  
DRUMCHAPEL, GLASGOW



# METERED DOSE INHALERS (MDIs)

**“The propellant in MDIs dispensed through NHS Scotland... is more than the emissions from the NHS fleet and waste combined”**

**NHS Scotland Sustainability Strategy 2022-2026**

79,000 tonnes of CO2 equivalent

> 1/6 of total building energy use  
emissions in NHS Scotland

**2.5 million car journeys**



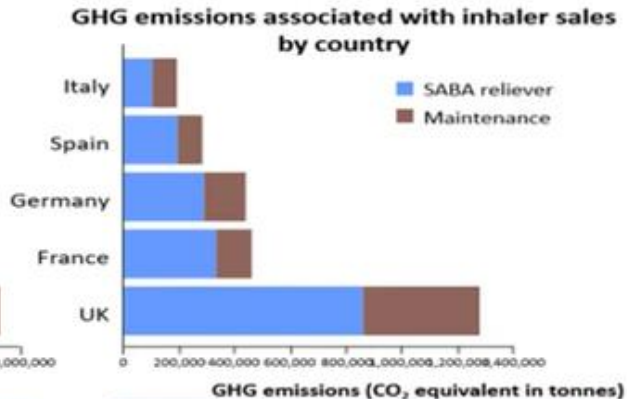
**Every year from Glasgow to Inverness**



## Reliever (SABA) inhalers represent the majority of inhaler use and carbon emissions



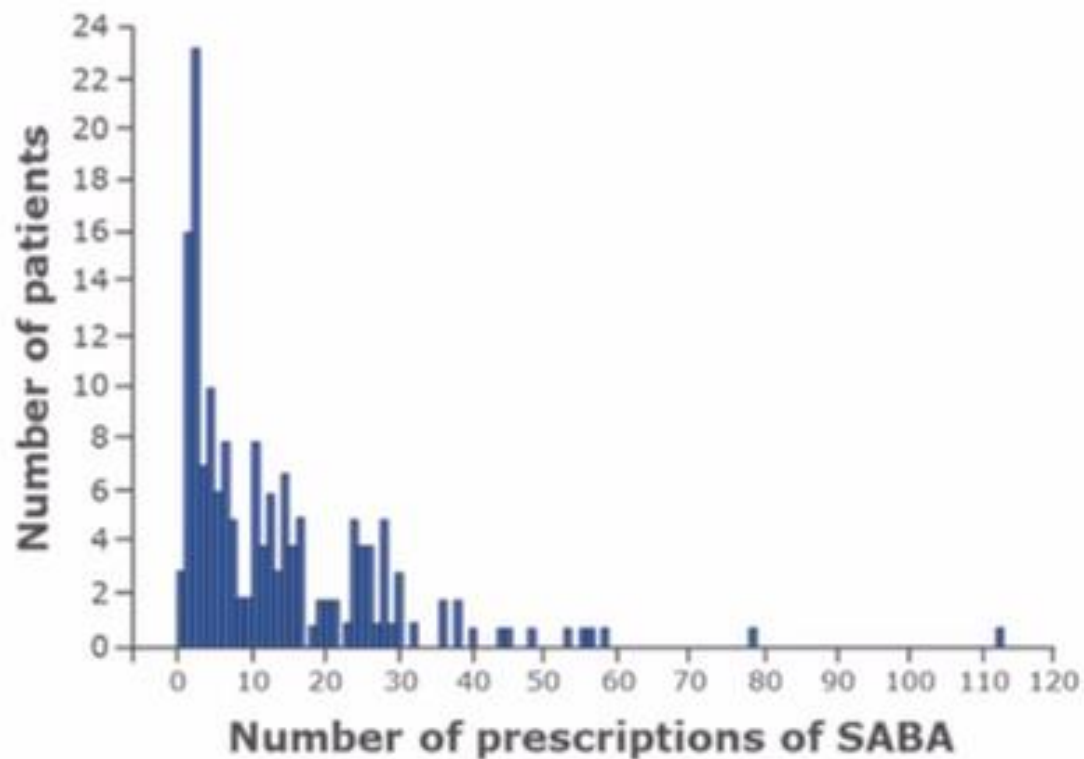
SABA relievers represent the majority of inhaler use in the UK and other European countries



SABA relievers drive the majority of GHG emissions from inhaler devices in the UK and other European countries

- In UK, 70% of all inhalers prescribed are SABA
- Average of 6.51 prescriptions of SABA in population of patients with over-reliance
- UK SABA use GHG emissions **treble** most European countries

**Frequencies of SABA prescriptions issued for patients  
in the 12 months before death from asthma (data available  
for 165 patients)**



# The FOUR 'D's to SAVE LIVES AND SAVE the PLANET

- ▶ DIAGNOSIS
- ▶ DISEASE CONTROL
- ▶ DEVICE CHOICE
- ▶ DISPOSAL



# EDUCATION, EDUCATION, EDUCATION

## GP PRACTICE TEAM

- ▶ PROTECTED LEARNING TIME
- ▶ INHALER DEVICE GUIDES
- ▶ CONSULTING ROOM POSTERS
- ▶ RESPIRATORY MCN GUIDANCE
- ▶ ONLINE TRAINING RESOURCES
- ▶ PEER PRESSURE

**NHS**  
Greater Glasgow  
and Clyde

### Adult asthma (18 years and over)- Inhaler device guide (primary and secondary care)

Please see NHSGG&C asthma guideline for full therapeutic guideline and formulary

Asthma management				No of doses/ inhaler (days inhaler will last)	Environmental impact
<b>SABA</b>	Salbutamol Easyhaler <sup>®</sup> Salbutamol CFC free inhaler	Dry powder inhaler Aerosol (MDI)	100 micrograms, two puffs when required 100 micrograms, two puffs when required	200 puffs 200 puffs	CO <sub>2</sub> e CO <sub>2</sub> e** CO <sub>2</sub> e**
<b>Regular preventer therapy- low dose ICS*</b>	Beclomethasone Easyhaler <sup>®</sup> Clenil Modulite <sup>®</sup>	Dry powder inhaler Aerosol (MDI)	200 micrograms, ONE puff twice daily 200 micrograms, ONE puff twice daily	200 (100 days) 200 (100 days)	CO <sub>2</sub> e CO <sub>2</sub> e
<b>Change to low dose ICS* and LABA</b>	Fostair <sup>®</sup> 100/6 Nexthaler <sup>®</sup> Fostair <sup>®</sup> 100/6	Dry powder inhaler Aerosol (MDI)	ONE puff twice daily (or as MART) ONE puff twice daily (or as MART)	120 (60 days) 120 (60 days)	CO <sub>2</sub> e CO <sub>2</sub> e
<b>Change to medium dose ICS* and LABA OR trial of LTRA (see GGC guideline)</b>	Fostair <sup>®</sup> 100/6 Nexthaler <sup>®</sup> Fostair <sup>®</sup> 100/6 Relvar <sup>®</sup> 92/22 Ellipta	Dry powder inhaler Aerosol (MDI) Dry powder inhaler	two puffs twice daily two puffs twice daily ONE puff once a day	120 (30 days) 120 (30 days) 30 (30 days)	CO <sub>2</sub> e CO <sub>2</sub> e CO <sub>2</sub> e
<p>LAMA for asthma- consider as add-on treatment in adults on <b>medium to high dose ICS</b> with a history of exacerbations (one course of oral steroids for a severe exacerbation in the last year) or persistent airflow obstruction. Formulary choices: Spiriva Respimat<sup>®</sup> as add on to existing therapy or replacing <b>*medium dose ICS/LABA</b> with Trimbow<sup>®</sup> triple therapy inhaler (<b>*no high dose ICS triple therapy option currently</b>)</p>					
<b>High dose therapies (high dose ICS and LABA*)</b>	Fostair <sup>®</sup> 200/6 Nexthaler <sup>®</sup> Fostair <sup>®</sup> 200/6 Relvar <sup>®</sup> 184/22 Ellipta	Dry powder inhaler Aerosol (MDI) Dry powder inhaler	two puffs twice daily two puffs twice daily ONE puff once a day	120 (30 days) 120 (30 days) 30 (30 days)	CO <sub>2</sub> e CO <sub>2</sub> e CO <sub>2</sub> e

\* Refer to BTS/SIGN or NHSGGC asthma guideline for table of ICS categorisation by dose

**Abbreviations:**

SABA: short-acting beta<sub>2</sub> agonist  
DPI: dry powder inhaler  
MDI: metered dose inhaler  
ICS: inhaled corticosteroid  
LABA: long-acting beta<sub>2</sub> agonist  
LAMA: long-acting muscarinic antagonist  
LTRA: leukotriene receptor antagonist  
MART: maintenance and reliever therapy

Clenil<sup>®</sup> = beclomethasone dipropionate  
Fostair<sup>®</sup> = extra-fine particle size beclomethasone/formoterol  
Relvar<sup>®</sup> = fluticasone furoate/vilanterol  
Spiriva Respimat<sup>®</sup> = tiotropium fine mist inhaler  
Trimbow<sup>®</sup> = beclomethasone/formoterol/glycopyrronium

Environmental impact	
CO <sub>2</sub> e	low CO <sub>2</sub> emissions
CO <sub>2</sub> e	high CO <sub>2</sub> emissions
CO <sub>2</sub> e	very high CO <sub>2</sub> emissions

\*\* (Ventolin<sup>®</sup> evohaler has higher CO<sub>2</sub> emissions than other brands of salbutamol)

NHSGG&C Prescribing Support Disclaimer  
Valid at date of preparation 15/4/21  
Date notified (MDI) 6/7/21  
Renewal date 6/7/24  
Authors: South Sector Respiratory  
Prescribing Support Team



# EDUCATION, EDUCATION, EDUCATION PATIENTS

- ▶ CLINICIAN ASTHMA /COPD REVIEWS
  - ▶ PATIENT LEAFLET
  - ▶ WAITING ROOM DISPLAY
  - ▶ ONLINE RESOURCES FOR PATIENTS
  - ▶ PEER SUPPORT GROUP
- (CHANCE TO CHANGE)

## Help Mother Earth Breathe!



The gases in some inhalers are toxic to our planet. Here's how you can help:



### Don't...

- ✗ Put used inhalers in the bin
- ✗ Order more than you need

### Do...

- ✓ Keep using your inhalers!!!
- ✓ Take used inhalers back to the pharmacy to be destroyed safely
- ✓ Get medical advice if you need more than 6 blue inhalers a year
- ✓ Ask your practice if an 'Eco-Inhaler' would be safe for you



THANK YOU!



# EDUCATION, EDUCATION, EDUCATION COMMUNITY

- ▶ COMMUNITY PHARMACY INHALER ORDERING
- ▶ LOCAL INHALER DISPOSAL
- ▶ NURSING HOMES / CARE HOMES
- ▶ WORD-OF-MOUTH
- ▶ MEDIA

When used MDIs  
are put in the bin all  
the leftover gases  
are be released  
into the  
atmosphere

Used inhalers  
usually have 30% of  
the toxic gases still  
remaining in the  
canister.

# Enablers



- ▶ INVOLVE THE WHOLE TEAM
- ▶ PROTECTED LEARNING TIME AND QUALITY IMPROVEMENT ETHOS
- ▶ INVOLVE HEALTH CARE STUDENTS
- ▶ LINK UP WITH RESPIRATORY MCN AND SECONDARY CARE
- ▶ LINK UP WITH HEALTH IMPROVEMENT TEAM & SMOKING CESSATION
- ▶ JOIN A GREENER PRACTICE LOCAL GROUP
- ▶ LISTEN TO PATIENTS / FEEDBACK
- ▶ INVOLVE PEER SUPPORT AND VOLUNTARY SECTOR

# Barriers

- ▶ PRESSURES ON PRIMARY AND SECONDARY CARE
- ▶ COMPETING PRIORITIES
- ▶ CLINICIANS KNOWLEDGE AND CONFIDENCE
- ▶ FEAR AND MISINFORMATION
- ▶ MEDICATION ORDERING SYSTEMS
- ▶ MEDICATION DISPOSAL INFRASTRUCTURE
- ▶ COMMUNICATION AND MESSAGING
- ▶ IMPLEMENTATION AT SCALE AND PACE
- ▶ NEED SUPPORT FROM NHS BOARDS AND SCOTTISH GOVERNMENT

# Useful links and resources:

- ▶ NHSGGC Inhaler Device and Asthma/COPD Resources (includes traffic light guide) <https://ggcmedicines.org.uk/prescribing-resources/>
- ▶ NHS GGC Inhaler Toolkit <https://ggcmedicines.org.uk/media/3msdxk5n/inhaler-toolkit-final-1-sept-22.pdf>
- ▶ Greener Practice Asthma Toolkit and education resources <https://www.greenerpractice.co.uk/>
- ▶ Greener Practice Education Video <https://www.greenerpractice.co.uk/high-quality-and-low-carbon-asthma-care/education/>
- ▶ PrescQIPP Resource <https://www.prescqipp.info/our-resources/bulletins/bulletin-295-inhaler-carbon-footprint/>
- ▶ Asthma UK Resources [www.asthma.org.uk/advice/inhaler-videos](http://www.asthma.org.uk/advice/inhaler-videos)
- ▶ Greener Respiratory WhatsApp Group <https://www.greenerpractice.co.uk/join-our-network/special-interest-groups/>





# Want to ditch the car?



Katie Walter, GP

Highland Healthcare for Climate  
Action

Ullapool Medical Practice  
(formerly of Cairn Medical Practice)

# What was the problem?



- Dominant culture of driving to work
- Expectation of needing a car for HV
- Day set up so that you might need car
- No bike racks
- No showers
- No lockers

*Nearly* every other practice around  
Most journeys to work <5 miles

# What did we do about it?

- Practice Cycling Champion Mick Heath challenged us to “think wider”
- Cycle friendly employer scheme grant and help from HiTrans
- 7 shelters across any willing GP practice in Inverness





# Bikes and Trikes for Highland Carers

- Shoestring project with a network approach!
- E-bikes for low paid health and social care workers

**Cycling  
Scotland**



Afternoon Ride



Distance  
18.36 mi

Elevation Gain  
1,261 ft

Moving Time  
2:11:12

Avg Power  
105 W

Avg Speed  
8.4 mi/h

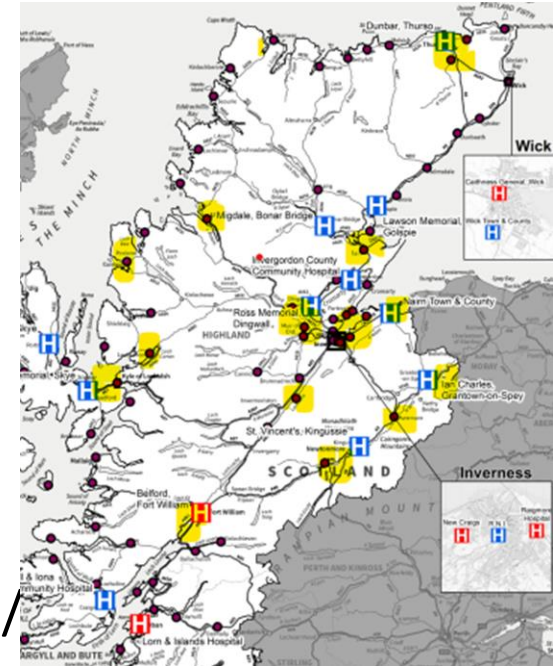
Calories  
926 Cal



# Ebikes for practices



- Further grants
- Folding ebike, helmet, bag, lock
- Challenge that bike should be accessible to all
- Not just for doctors!!!
- <https://bikesandtrikesforhighlandcarers.wordpress.com/>



# Impact

- Wide range of urban and rural practices
- Staff wellbeing
- Staff trying out e-bikes and buying their own
- Raising awareness with patients
- Practice car becomes possible once you change working day

*E-car or not to e-car.... that remains a thorny question*

# What you've learnt and tips for others

- Network thinking – Don't just do it for you, do it for all
- Find tigers and champions
- Grants – there's a lot of money out there
- Make it easy and normal - HAVE FUN, make the process minimal
- Don't make assumptions!



# The environmental impact of NHS Near Me

**Marc Beswick**

National Lead, Near Me Networks, TEC Scotland.

# How can Near Me benefit the Environment?

Near Me



Marc Beswick

National Lead – Near Me Network

@marcbeswickahp

@NHSNearMe

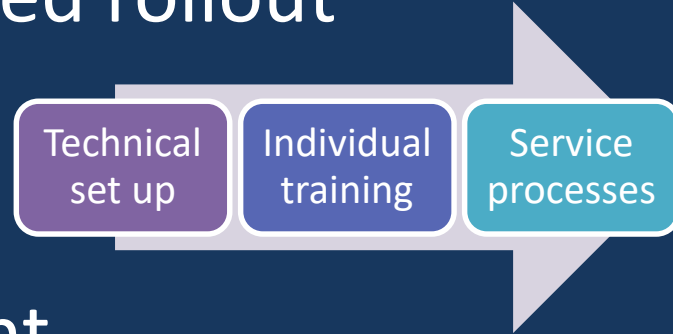




# Health Improvement Scotland & Near Me Rapid Scale Up in Primary Care 2020

Near Me

- Support for structured rollout



- Quality Improvement
- Shared learning & resources
- Once for Scotland



# National Data

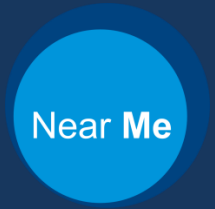
Near Me

- Patients have told us they save on average 36 miles of travel per Near Me call.
- Over 1.5 million Near Me calls have been made since introduction.
- That equals over 50 million patient miles not travelled.
- What about Clinician travel savings of time and expenses?





# Secondary Care NHS England: Edge Health Report September 2021



- March 2020 – March 2021
- 3 million consultations
- 76 million patient travel miles saved
- 14,200 tonnes fewer greenhouse gas emissions
- 11 million items of PPE equalling 46 tonnes in weight saved
- 5,352 miles travelled creates 1 tonne of greenhouse gas emissions
- <https://www.edgehealth.co.uk/outpatient-video>



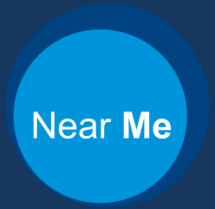
# What does this look like in Scotland?

Near Me

- NHS Scotland climate emergency and sustainability strategy: 2022-2026
- Domestic transport is the sector which produces the most greenhouse gas emissions in Scotland
- 54% of journeys are under 5km
- <https://www.gov.scot/publications/nhs-scotland-climate-emergency-sustainability-strategy-2022-2026/pages/6/>



# What could this look like in Primary Care?



- 30% of appointments are by Near Me in some practices
- 30% of average 1370 monthly appointments = 411
- Return journey of (2x5km) 10km for 411 appointments = 4110km
- 8613km travelled = 1t of GHG emissions
- 4110km = 0.47t of GHG emissions in 1 month
- Over 12 months = 5.64t of GHG
- Across 900+ practices in Scotland = ?t of GHG



# How have high use practices embedded Near Me?

Near Me

Approximately 30% of the patient consultations were by Near Me

All have integrated scheduled video appointments via Near Me

97% patients report that they would use it again.

All rooms in the practices are set up with equipment to hold a video consultation, including the receptionist

Appointment slots were either dedicated Near Me appointments or flexible telephone or Near Me appointments.

The receptionists promote the use of Near Me to patients when booking appointments

The receptionists have a vital role in supporting patients to use Near Me

Blended model using Near Me, Telephone and in-person.  
Very small use of e-Consult

Near Me enabled continuity of service while GPs were isolating with covid.

Patients felt better able to describe their problem using Near Me than try to explain on the phone.



# Added value compared to phone

Near Me

Mental Health

Carer  
Involvement

Long Term  
Condition  
Management

Medication  
Reviews

Occupational  
Health  
Appointments

Paediatric  
Assessments

Elderly  
Complex  
Patients

Neurological  
Presentations



# Who else in the practice can use video?

Near Me

**Physiotherapist**

**Occupational  
Therapist**

**Community  
Link Worker**

**Advanced  
Nurse  
Practitioner**

**Mental Health  
Nurse**

**Pharmacist**



# Links

Near Me

- Public Website

<https://www.nearme.scot/>

- Professional Website

<https://tec.scot/programme-areas/near-me>

- Contact Us

[nss.nearme@nhs.scot](mailto:nss.nearme@nhs.scot)



# Discussion

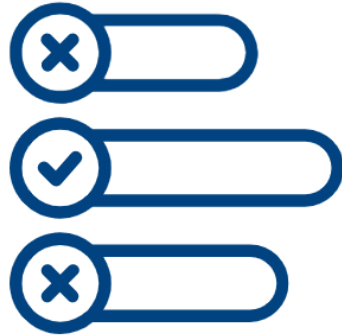


# Closing remarks

**April Masson**

Portfolio Lead, Primary Care Improvement Portfolio  
Healthcare Improvement Scotland

# Next steps



Evaluation  
survey – link in  
the chat box



Follow up  
email circulated  
soon

# Keep in touch



[ihub.scot/primary-care](http://ihub.scot/primary-care)



[@SPSP\\_PC](https://twitter.com/SPSP_PC)    [#PCImprove](https://twitter.com/hashtag/PCImprove)



[his.pcpteam@nhs.scot](mailto:his.pcpteam@nhs.scot)

