

Sustainability Annual Report *2025-2026*

**HEALTHIER
PLANET
HEALTHIER
PEOPLE**

Contents

Foreword	03
Introduction	04
Highlights of 2025/26	05
Performance Report	06
Net Zero Clinical Transformation	07
Digital Transformation, Research & Innovation	08
Supply Chain & Procurement	09
Medicines	10
Food & Nutrition	11
Estates & Facilities	12
Travel & Transport	13
Climate Change Adaptation	14
Green Space & Biodiversity	15
Workforce, Networks & System Leadership	16
Carbon Footprint	17
Carbon Footprint Plus	18
Conclusion	19
Appendix A: Green Plan Progress at a Glance	20
Appendix B: KPI Dashboard	21
Appendix C: Carbon Footprint Changes & Methods	26
Find Out More	27



Foreword



I am pleased to introduce Manchester University NHS Foundation Trust's Annual Sustainability Report for 2025/26.

This report reflects a year of steady progress, growing ambition and, above all, the commitment of colleagues across our organisation who continue to show that sustainability is not an added extra, but part of how we deliver better care and build a stronger future.

Throughout this year, teams across MFT have taken practical steps to reduce our environmental impact, use resources more wisely and improve the places where we work, heal and live. Whether through major estates projects, changes in clinical practice, greener procurement, reducing waste or supporting staff to travel more sustainably, these actions are making a real difference. They also demonstrate something important: that even in a complex and pressured healthcare environment, meaningful change is possible when people work together with purpose.

One of the most encouraging aspects of this work is the way it connects directly to our values.

Sustainability is about more than carbon reduction. It is about creating healthier environments, improving resilience, reducing inequality and making sure we leave a positive legacy for future generations.

In that sense, it is closely tied to our responsibility as a public organisation and to the care we provide every day.

The achievements in this report reflect the commitment of colleagues across MFT and the strength of collaboration with partners across Greater Manchester and beyond. While there is more to do, the progress made this year demonstrates what can be achieved when sustainability is approached as a shared responsibility and a long-term opportunity.

I would like to thank everyone who has contributed to this work. Together, we are creating a more sustainable future for our Trust and the communities we serve.

Stephen Dickson

WTWA Chief Executive and
Green Plan Oversight Group Chair

Introduction

This Sustainability Annual Report shares the progress Manchester University NHS Foundation Trust (MFT) has made during 2025/26 to reduce our environmental impact and build a healthier, more resilient future for our patients, staff and communities.

Sustainability is a long-term commitment, and we publish this report each year to give an overview of the achievements and challenges we are facing along the way.

The annual update helps us track progress, celebrate the work taking place across the Trust, and identify where we need to go further. It also gives staff, patients, partners and the public a clear picture of how MFT is responding to the climate and health challenges that affect the people we care for.

This year's report marks the first full year of delivery against our refreshed *Green Plan 2 Net Zero 2025–2030*.

The five-year plan sets out how MFT will continue working towards the overarching targets: achieving net zero carbon emissions for the areas we directly control by 2038, and for our wider carbon footprint by 2045. It also brings up to date our objectives across the ten key areas of focus where healthcare can make the biggest difference.

Together, these actions show that sustainability is part of everyday healthcare. Every team has a role to play, and every improvement helps us move towards a greener NHS.



Click on the picture link above to see Green Plan 2 Net Zero.

MFT's Green Plan 2 Net Zero maintains our overarching ambitions for carbon reductions:

1. To achieve a net zero MFT Carbon Footprint by 2038 (those emissions we can directly control)
2. To achieve a net zero MFT Carbon Footprint Plus by 2045 (those emissions we can directly control and indirectly influence)



Click on the picture link above to see Time to Act video explaining the Green Plan.

Highlights from 2025/26



Greening Anaesthesia

Greening anaesthesia work celebrated in the media.

Click here to see coverage on **ITV** and in the **MEN**.



Sustainable MFT Conference

120 Sustainable MFT Conference attendees in the third year of running.



Carbon Footprint Drop

Biggest drop in our Carbon Footprint in one year, saving **5,200 tCO₂e** since 2024/25.



Lowest Ever Carbon Footprint

Lowest ever carbon footprint per patient contact at **19.5 kgCO₂e** per patient contact.



Staff Bikes

Over **200** staff bikes serviced on site for free.



Sharp Bins

5,600 reusable sharps bins rolled out Trust-wide.



Solar Panels

On-site solar panels generated enough electricity to power **350 homes** for a year.



Gas Boilers Removed

Old gas boilers removed at Trafford General Hospital as part of net zero retrofit.

Click here to see **Trafford Hospital Decarbonisation Journey**.

Performance Report

The following section provides a summary of key developments and case studies from 2025/26 and planned objectives for 2026/27.

For a detailed review at status of the Green Plan Headline Objectives and Supporting Actions for each Area of Focus, see [Appendix A](#)



Net Zero Clinical Transformation



2025/26 Overview

The “Time to Act for Greener Theatres” campaign concluded in December 2025, with several case studies captured, promotion of the Greener Theatres Checklist and bespoke sustainability training delivered to the theatres team at Manchester Royal Infirmary. A new “Time to Act for Greener Community Care” campaign launched in January 2026, supporting work in the community, an area of MFT that is often overshadowed by the acute sites. This firmly aligns the NHS 10 Year Plan intention of bringing care closer to home with net zero sustainable healthcare.

Work began to build sustainability into the Improvement Academy staff offer, helping more colleagues connect improvement methods with lower-carbon care. A new GIRFT sustainability fellow was appointed to explore how the ‘neck of femur pathway’ could be decarbonised, linking clinical improvement, patient experience and environmental impact.

Planned Objectives for 2026/27



Engage with existing frameworks of quality improvement and transformation to incorporate sustainability and the “triple bottom line” value assessment.



Run a focused sustainability campaign each year to address and support pathway improvements in service areas that are carbon hotspots.

Case Study

Small changes to surgical trays can cut waste, save time and support greener theatres. Prakriti Shrestha, Getting It Right First Time Research Fellow at MFT, led work to **reduce unnecessary instruments in surgical trays** at Trafford Elective Surgery Hub.

Many trays contain instruments that are rarely or never used. Despite going unused during surgery, these items still get cleaned, sterilised, checked, packed, transported and stored as part of keeping our theatres sterile and safe. This processing of unused items created avoidable cost, staff time and carbon emissions, without adding any benefit to patient care.

Prakriti worked with theatre colleagues, Materials Management, and Decontamination Services to review real instrument use in high-volume general surgery procedures. Prakriti created a new decision-making framework to get a consensus on which instruments were essential and which could be safely removed, based on data and collaborative discussion.

The framework was fantastic. One tray tailored for rectal procedures was narrowed down from 53 to 16 items. Across the four procedures reviewed, the project estimated annual avoided costs of around £17,000 and more than 40 kgCO₂e from not sterilising unused instruments. If this framework is rolled out to further tray sets and across different theatres at MFT, the potential savings can be much higher.



Digital Transformation, Research & Innovation



2025/26 Overview

The MyMFT app has continued to grow in popularity with patients, with over 673,000 people signed up at the end of March 2026. This has continued to reduce reliance on paper-based letters and helped patients manage their care more easily. Work also began to review and migrate historic paper patient records into HIVE, supporting the longer-term closure of medical record buildings and reducing the energy and water used by unnecessary estate.

The Ordering Wisely programme expanded into labs, imaging and medicines, using HIVE data, analysis and prompts to reduce unnecessary ordering. In collaboration with the University of Manchester, Research & Innovation established a patient engagement forum to explore views on sustainability in healthcare and research, helping bring patient voice into this area of work.

Planned Objectives for 2026/27



Maximise the opportunity for supplier takeback schemes & extending the lifetime of digital equipment through procurement practice.



Maximise the opportunity for supplier takeback schemes & reuse of excess items related to the delivery of research & innovation.



Assess new digital, research and innovation programmes for environmental impact.

Case Study

Digital monitoring is bringing blood pressure checks closer to home for many pregnant women and people across the North West.

The [Manchester Antenatal Vascular Service \(MAViS\) Team](#) at St Mary's Hospital introduced home blood pressure monitoring for pregnant women at risk of high blood pressure or pre-eclampsia.

Blood pressure problems affect many pregnancies and requires close monitoring. This traditionally meant frequent hospital visits, and sometimes long inpatient stays before birth in the highest risk cases. While clinically necessary, this could be stressful for the women and families involved, included unnecessary travel, and added pressure on staff, beds and clinic space.

Using a digital telemedicine solution, the team gave suitable patients a calibrated home blood pressure monitor. Readings are submitted by the patient through an app and reviewed in real time by specialist midwives using the HIVE electronic patient records. Following remote review, midwives kept in touch mainly by phone and brought people into hospital only when face-to-face care was needed or for planned scans and reviews.

By making this change, the people on this pathway could spend more time at home during pregnancy, while staff still had rapid access to blood pressure readings and could identify concerns early – a great example of delivering care in a lower carbon setting while improving the experience for patients.



Supply Chain & Procurement



2025/26 Overview

Supply chain activity throughout 2025/26 focused on reuse, waste prevention and social value. The walking aid return scheme continued to grow, with 2,890 walking aids returned by patients for reissue during the year. This scheme is now well embedded into physiotherapy services across the hospitals. After a successful trial, a furniture reupholstery service went live Trust-wide, allowing departments to repair damaged beds and other furniture on the same day, instead of disposing of items and buying new ones. This scheme is available to all departments in the trust, supporting a more circular economy while lowering costs.

A fixed-term social value review role was established within the Public Health team to examine commitments made through the Trust's highest value contracts. Continuing into 2026/27, this role will improve oversight of supplier commitments and help identify opportunities for collaboration that could bring wider benefits to communities across Greater Manchester.

Planned Objectives for 2026/27



Improve monitoring of supplier's social value commitments & carbon reduction plan progress.



Investigate & enact further return and reuse programmes for suitable equipment.



Expand the ward coverage of the inventory management system Genesis, to better manage consumables stock and reduce waste.

Case Study

Supplier social value is helping MFT turn procurement into practical community and sustainability benefits. Since 2022, every tendered contract at MFT includes a minimum 10% social value weighting, which means contract decisions are made partly on the commitments suppliers make to add extra value including helping local people, local economy, or the planet. However, supplier commitments were not always easy to track, measure or turn into action once contracts were awarded.

To close this gap, Bukola Isioye started a Social Value Review role in January 2026 within the Public Health Team. Working with Procurement, Bukola reviewed contract commitments, set practical measures, and built relationships with our largest suppliers. Early outcomes include direct funding for three MFT projects, apprenticeships for local residents, supplier site visits, and a list of community project ideas from neighbourhood leads.

"For most suppliers, they wanted to deliver their social value commitments but weren't sure how. No one had followed up on them and there was no standard reporting procedure. It's a big role and discussions are still ongoing." Bukola Isioye, General Management Officer.

The work is still developing, but it shows why procurement follow-up matters. Active management can turn written supplier commitments into practical benefits for sustainability, public health, local skills and communities across Greater Manchester.



Medicines



2025/26 Overview

The “Your Medicines Matter” campaign went live across the Trust, led by Pharmacy in collaboration with the Greater Manchester Pharmacy Sustainability Group. The campaign encourages patients to bring their own medicines into hospital, helping reduce duplicate prescribing and unnecessary waste. Impacts will be monitored through regular auditing. Pharmacy teams worked towards bronze accreditation using the Royal Pharmaceutical Society Greener Pharmacy Audit.

Inhaler e-learning was updated and shared across Greater Manchester following the 2024 NICE guidance update to include environmental impact as part of inhaler choice. 2025/26 was the first full year of impact from decommissioning pure nitrous oxide manifolds, achieving significant savings compared to 2019/20. Gas and air leak detection tests, funded by an NHS England grant, were carried out across maternity, identifying and resolving seven leaks responsible for 8 litres/minute waste, which equates to a yearly saving of £23,000 in purchasing costs.

Planned Objectives for 2026/27



Reduce the carbon intensity of inhalers by improving staff awareness of improved asthma control for patients through training on inhaler technique and adherence to NICE guidelines.



Roll out the “Your Medicines Matter” campaign to encourage patients to bring their medications into hospital to reduce unnecessary overprescribing & medicines waste.

Case Study

After years of work, greening anaesthesia at MFT is saving thousands of tonnes of greenhouse gas emissions each year.

Pure nitrous oxide (N_2O) is a medical gas sometimes used in anaesthesia, but it is also a powerful greenhouse gas with a global warming potential 265 times stronger than carbon dioxide. An audit at Wythenshawe Hospital in 2022 found that only 2% of the nitrous oxide purchased was used on patients, meaning 98% was going to waste with no clinical benefit.

A multidisciplinary team was set up bringing together anaesthetists, pharmacy, medical gases, portering, estates, sustainability and transformation colleagues. They collectively decided to move supply of the gas from the existing large and inefficient piped manifold system to smaller mobile cylinders.

Wythenshawe’s manifold was decommissioned first in April 2023, and the final of MFT’s acute hospitals switching in August 2024. The change has had no impact on patient care: nitrous oxide is still available when clinically needed, but far less is wasted.

In 2025/26, the first full year of impact across MFT, annual carbon emissions from the nitrous oxide we purchase are 95% lower than in 2019/20, saving 4,300 tCO₂e per year, the equivalent carbon emissions from more than 700 average UK households.



Food & Nutrition



2025/26 Overview

With work led by various colleagues across Facilities, the Trust strengthened the foundations for reducing food waste and supporting healthier, lower-carbon choices. Opportunities to improve food waste monitoring were identified at all inpatient sites, and a Food Waste Task and Finish Group was established. Chaired by colleagues in Facilities, this group helps bring structure to this area of work, which previously had a lot of unknowns around extent and cause of food waste.

Inpatient menus at Oxford Road Campus and Wythenshawe Hospital adopted a “plant-rich first” design, making lower-carbon options more visible and easier to choose. Procurement also supported sustainability through the tendering of a new inpatient dining contract. The tender included weighted social value questions pushing suppliers towards providing carbon labelling of meals and reducing single-use plastics, as well as confirming supplier net zero commitments. By including these expectations from the outset of the contract, we are helping make sustainability part of decision-making around food services.

Planned Objectives for 2026/27



Increase understanding of reasons behind food waste through better monitoring.

Case Study

Listening to patients and weighing food waste is helping Trafford General Hospital (TGH) serve better meals and produce less waste. Colleagues at TGH spotted the lunch and dinner services as a clear opportunity to reduce food waste. Before changes could be made, the Facilities and Catering teams needed to understand exactly how much food was being thrown away and why edible food was being left uneaten or unserved.

Since 2024 TGH has measured food waste at ward level to improve understanding and track progress. Since measurements began, they have seen a steady downward trend in the amount wasted.

The team worked with MFT's Senior Specialist Food Service Dietitian on six inpatient wards to improve the mealtime experience, helping reduce waste further. Staff and patient engagement sessions meant meal choices better reflected what patients wanted, and regular mealtime audits gave patients a consistent way to give feedback. This led to practical changes, including adjusting portion sizes to avoid over-serving, offering optional seconds, and removing less popular dishes from the menu.

“Better meals support recovery, while less waste saves money and reduces the environmental impact of our food.” Orlaith Curran, Senior Specialist Food Service Dietitian.

The next step is to improve recording further. A trial at Trafford and North Manchester General Hospital will record plate and unserved food waste more accurately.



Estates & Facilities



2025/26 Overview

After multiple successful grant funding bids in previous years, 2025/26 saw several energy decarbonisation schemes progress across the estates. Construction work began on the [Trafford General Hospital decarbonisation](#) scheme, removing the end-of-life gas boilers and replacing them with heat pumps and solar panels to create the first net zero retrofitted inpatient hospital in England. Additional solar panel installations, battery storage, and building management system upgrades were also made across our sites. Collectively, these schemes are forecasted to save over 3,200 tCO₂e per year once completed (based on 2025/26 greenhouse gas emissions factors).

Reusable sharps containers were fully rolled out across the Trust by financial year end, including acute and community sites, and removing an estimated 76 tonnes of plastic a year from high temperature incineration. The tiger waste campaign also continued to improve clinical waste segregation, reaching 59% of clinical waste treated as tiger by March 2026, compared with 20% at the end of 2023.

Planned Objectives for 2026/27



Create a sustainability design guide to support delivery of capital projects in line with sustainability ambitions and objectives.



Develop refreshed site-based understanding of required actions to meet decarbonisation plans.



Increase coverage of energy-efficient lighting across MFT.

Case Study

The introduction of reusable sharps containers is reducing plastic consumption and waste in healthcare's highest-carbon waste disposal route. Sharps containers are essential for protecting staff and patients from needles and other sharp items. Traditionally, once full, single-use plastic sharps containers were sealed and sent along with their contents for high temperature incineration. This disposal method is essential for treating certain types of hazardous waste safely, but is the most expensive and carbon-intensive disposal route used in healthcare.

To reduce the plastic consumption and waste, over 5,600 reusable sharps containers have been introduced across the organisation including hospitals and community sites. The Waste Team provided staff training and support on how to use them.

The reusable Sharpsmart containers are used in a similar way to single-use containers. However, once full, they are collected and sent to the Sharpsmart plant, where they are emptied, cleaned and returned into circulation. The sharps contents still go for incineration, but the container itself is reused rather than destroyed. This saves about 76 tonnes of plastic per year.

As well as tackling single use plastic waste and reducing carbon emissions, these bins provide much better protection for staff against needle stick injuries, which was originally why Sharpsmart designed the boxes. They demonstrate the overlap between better outcomes for staff and the environment.



Travel & Transport



2025/26 Overview

Total travel and transport emissions have reduced, despite business travel distances and patient contacts increasing. This reflects ongoing improvements in vehicle technology and the shift to electric vehicles, as well as the drive to deliver care effectively while maximising value.

The free staff bike maintenance offer continued to support active travel, with over 200 staff bikes checked, serviced and maintained during the year. A staff travel survey was carried out in summer 2025, showing that car use remains the main method of staff commuting and that uptake of sustainable commuting modes, such as walking, wheeling, or taking public transport, has stayed broadly static. This finding is consistent with other NHS organisations across Greater Manchester and shows that private vehicle travel is embedded as the go-to method of transport, even during times of fuel cost pressures.

Collaboration is key to tackling barriers to more sustainable travel, so the Trust continued working with local transport partners, including the Oxford Road Corridor Sustainable Travel Group, Transport for Greater Manchester and the NHS Greater Manchester team, seeking shared solutions for healthier, lower-carbon travel.

Planned Objectives for 2026/27



Continue to increase the ratio of Ultra Low Emission Vehicles (ULEVs) and Zero Emission Vehicles (ZEVs) owned or leased by MFT.



Increase uptake in sustainable travel modes for staff commuting.

Case Study

Geographical Nursing is cutting travel time, mileage and pressure on staff. District nursing teams provide essential care for housebound patients, but individual caseloads have not always correlated with where patients live. When patients moved home but stayed registered with the same GP practice, nurses could still be required to travel outside their neighbourhood to provide care. In some cases, one patient visit could take over an hour, with extra time lost in traffic, creating more emissions from driving and idling.

The Central Adults Community Health Service within the Local Care Organisation reviewed the issue. Gill Acreman, Lead Nurse, Maeve McNulty, District Nursing Team Lead, and John Egerton, Neighbourhood Lead, analysed where patients lived, revealing as many as 2 in every 5 patients lived outside the neighbourhood boundary. They introduced Geographical Nursing by realigning patients to the closer neighbourhood team.

"The introduction of Geographical Nursing made a significant contribution to the health and wellbeing of our District Nursing Team. Importantly it contributed to improved patient care, far less travel time in vehicles, and more accessible District Nurse caseloads." John Egerton, Neighbourhood Lead.

The change has helped nurses spend less time driving across Greater Manchester, reduced mileage and fuel costs (and related carbon emissions) and increased caseload capacity.



Climate Change Adaptation



2025/26 Overview

MFT worked with other Greater Manchester NHS trusts and the GM Integrated Care Board to create the 'Greater Manchester NHS Climate Change Adaptation Plan'. This brought together experience from earlier work with the NHS Climate Adaptation Maturity Framework and helped define both the regional risks and the regional action on climate change adaptation. Actions recommended by the document come at a variety of scales, including for individual Trusts. The work strengthened links between adaptation, service continuity and infrastructure resilience, and will act as the basis for MFT's own Climate Change Adaptation Plan.

Members of the Green Plan Oversight Group also completed PlanIT training, a scenario-based climate change and adaptation package. The training helped build understanding of climate risks, the wider health impacts of a changing climate and the co-benefits of timely action. This supported a more joined-up approach to considering adaptation alongside work to reduce carbon emissions (climate change mitigation).

Planned Objectives for 2026/27



Establish site-specific understanding of climate risks and vulnerabilities using Greater Manchester Combined Authority Climate Change Risk Assessment tool and other appropriate resources.



Create guidance resources to build climate change risk into service-level business continuity plans.

Case Study

Simulation-based training is teaching MFT colleagues to turn climate risk into practical, shared decision making. Climate change is already affecting health and healthcare through hotter summers, flooding, poor air quality and disruption to services. For MFT, adaptation means more than protecting buildings. It means designing services that can keep patients healthy and support staff, including when extreme weather puts extra pressure on care.

The challenge is how to make this complex problem feel practical rather than distant or overwhelming. PlanIT training offered an interactive way to do this using a simulated local community, where participants collaborate to make decisions and prioritise action using limited resources whilst attempting to keep people healthy by improving the environment, reducing inequalities, and increasing satisfaction.

Members of the Green Plan Oversight Group completed the scenario-based training, helping them explore trade-offs, co-benefits and unintended consequences in a safe, engaging way.

"This was a great mix of fun and functional. We challenged each other, made mistakes, then made progress. This will help the group work together to drive real action." Megan Richold, Senior Sustainability Officer.

The main outcome was improved learning, awareness and confidence interacting with a very complex system, rather than direct carbon or cost savings. A more climate-ready NHS depends on staff understanding the risks, choices and opportunities in everyday decisions.



Green Spaces & Biodiversity



2025/26 Overview

Green space work focused on building capacity and aligning activity with new biodiversity requirements. Biodiversity net gain regulations began to shape planning for the North Manchester General Hospital redevelopment, with the Sustainability Team working to ensure benefits are delivered on the Trust estate or through local projects where possible. Concept designs for improvements at Baguley Woodland and Woodsend Clinic were developed, with early stakeholder engagement taking place at Woodsend during the year, however further progress depends on innovative funding streams to support the work.

The Trust also secured a two-year NHS Nature Recovery Ranger post, hosted by MFT from April 2026 as part of a national cohort employed by the Centre for Sustainable Healthcare. The ranger's remit is to increase biodiversity across MFT's estates whilst improving access to, and the quality of, its green spaces for use by staff, patients, and local community members. This will strengthen the Trust's ability to connect nature to recovery and wellbeing.

Planned Objectives for 2026/27



Nature-based or social prescribing activities to take place at MFT sites.



Establish local site management groups for the external areas to determine best practice management while promoting and increasing biodiversity.

Case Study

MFT celebrated wilder green spaces for the fourth year running as part of 'No Mow May'. During May 2025, the Estates Teams across MFT have avoided mowing the grassy areas of the estate, helping promote biodiversity, nature recovery and climate resilience as part of the international [Plantlife](#) campaign. There are strong links between mental and physical health and access to nature, so the small act of allowing areas to be slightly wilder also has benefits for our staff and patients.

"I love seeing the different colours of grasses and wildflowers, plus they provide vital food and shelter zones for pollinators. Even if the trust can only provide small patches of un-mowed grass here and there it will benefit nature greatly."

Sarah Holmes, Senior Clinical Research Nurse.

May is a crucial month for plant growth in the UK, and reducing the amount of mowing ensures that wildflowers and grasses grow healthy, flower and set seed for the following years. Some key reasons for allowing our grassed areas to grow longer during May include providing early-season nectar for pollinators, locking away carbon and building healthier soil from longer grass, and supporting biodiversity by creating habitats for beetles, birds and small mammals. As a large organisation, it is important for the Trust to play a full role in supporting nature recovery in Greater Manchester.



Workforce, Networks & System Leadership



2025/26 Overview

Governance and accountability of the sustainability agenda improved across the past year, with senior leads identified and across the ten areas of the Green Plan. The leads are responsible for driving progress on the objectives and supporting projects in the Green Plan 2 Net Zero, reporting progress to the MFT Green Plan Oversight Group.

The Sustainability Team continued to host monthly webinars covering a spectrum of topics, as well as delivering the third annual Sustainable MFT Conference, this year at Wythenshawe Hospital. More than 100 staff and external participants attended, hearing from internal speakers from public health, green spaces and quality improvement, alongside external speakers covering sustainable shipping, behaviour change, and healthcare ethics.

Several Carbon Literacy training sessions were delivered in house, with more than 100 staff trained as carbon literate during the year. The internal Sustainability Advocates network also grew, with 144 staff opting in and supporting sustainability across different departments and clinical groups of the Trust.

Planned Objectives for 2026/27



Increase the completion rate of online sustainability e-learning modules, including targeting key staff groups, for example the Green Plan Oversight Group, Research & Innovation, Procurement & Finance.

Case Study

Staff-led sustainability groups are turning local expertise into practical savings for carbon, waste and cost. Across MFT, teams are showing that local sustainability works best when it is shaped by the people who know their services.

The Manchester Medical Microbiology Partnership (MMMP) formed a sustainability group last year, bringing together around ten members from departments including Bacteriology, Virology, the Vaccine Evaluation Unit, the Meningococcal Reference Unit and the Sero-epidemiology Unit. They set their shared priorities: cut plastic waste, improve recycling, reduce electricity use and support everyday behaviour change. One standout action was reducing 22 Virology ultra-low temperature freezers from minus 80°C to minus 70°C, saving nearly £4,900 and 4.6 tCO₂e by reducing electricity demand.

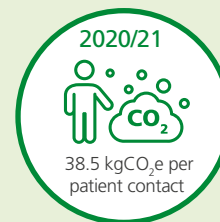
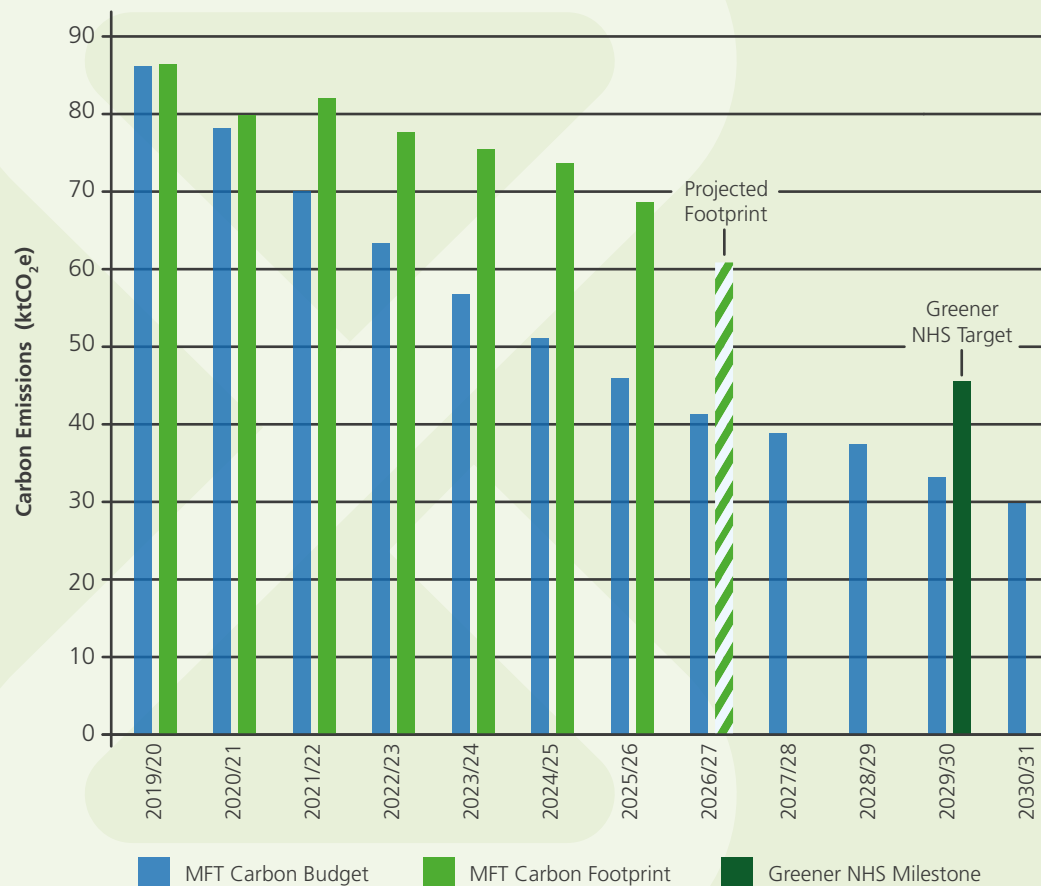
"It is very rewarding to use specialised knowledge of laboratory operations to make a difference." James Barnes, Deputy Laboratory Manager in Virology.

In Research and Innovation, sustainability was built into the 2024–2029 strategy, with Eve Koutidou leading a small team of Sustainability Advocates who meet regularly to coordinate action across research activity. The team are driving the inclusion of sustainability into existing decision making and evaluation processes for research and innovation, and they have also used their links with outpatient units to trial reducing unnecessary blue couch roll use in favour of better cleaning practices.



Carbon Footprint

Figure 1: MFT Carbon Footprint & Annual Carbon Budget



In 2025/26, our Carbon Footprint (those emissions we directly control) dropped by 7.1% compared to 2024/25, saving 5,200 tCO₂e. This is the largest drop in 5 years and continues the overall downward trend since the 2019/20 baseline (Figure 1). Moreover, our carbon footprint per patient contact has nearly halved compared to 2020/21, as we are treating a greater number of patients while shrinking our emissions¹.

Looking ahead, projected emissions for 2026/27 suggest a likely reduction of 5,900 tCO₂e, equivalent to a 9% drop compared to this year (25/26). This takes into account planned projects including grant-funded energy decarbonisation, roll out of reusable sharps containers, and the continued decarbonisation of the national electricity grid.

However, our emissions remain above the annual carbon budget, and we are uncertain whether we will achieve the Greener NHS target² level of emissions by 2029/30. Despite the impressive achieved and predicted reductions, they may still fall short of our ambitious targets. The position therefore reflects both progress and challenge.

While we are making meaningful progress, the speed of reduction needed to stay within the carbon budget is much greater than our current pace. MFT has established a strong foundation for delivering improvements and reducing emissions across energy, waste, anaesthetics and models of care. However, further acceleration will be required if the Trust is to remain as close as possible to its carbon budget and meet its longer-term net zero ambitions. This is consistent with the wider position across Greater Manchester where emissions reductions are not keeping pace with the regional science-based carbon budget. MFT will continue to identify, prioritise and deliver the actions with the greatest potential to reduce emissions, while working with partners locally and nationally to support the wider conditions needed for progress.

Footnotes

- For more detailed look at the changes in the Carbon Footprint, the Carbon Footprint per Patient Contact and carbon footprinting methodology, see [Appendix C](#).
- The Greener NHS Target is a reference to the milestone defined in the [Delivering a Net Zero National Health Service](#) report. It states that for the NHS Carbon Footprint, there is "an ambition for an 80% reduction (compared to a 1990 baseline) by 2028 to 2032". The target represented on this page has been calculated by MFT following the Greener NHS methodology, and assigned to financial year 2029/30. For further information on the Carbon Budget and the Greener NHS Target, see [MFT Green Plan 2 Net Zero Appendix 2: Carbon Budget](#)

Carbon Footprint Plus

Figure 2: MFT Carbon Footprint Plus Composition 2025/26

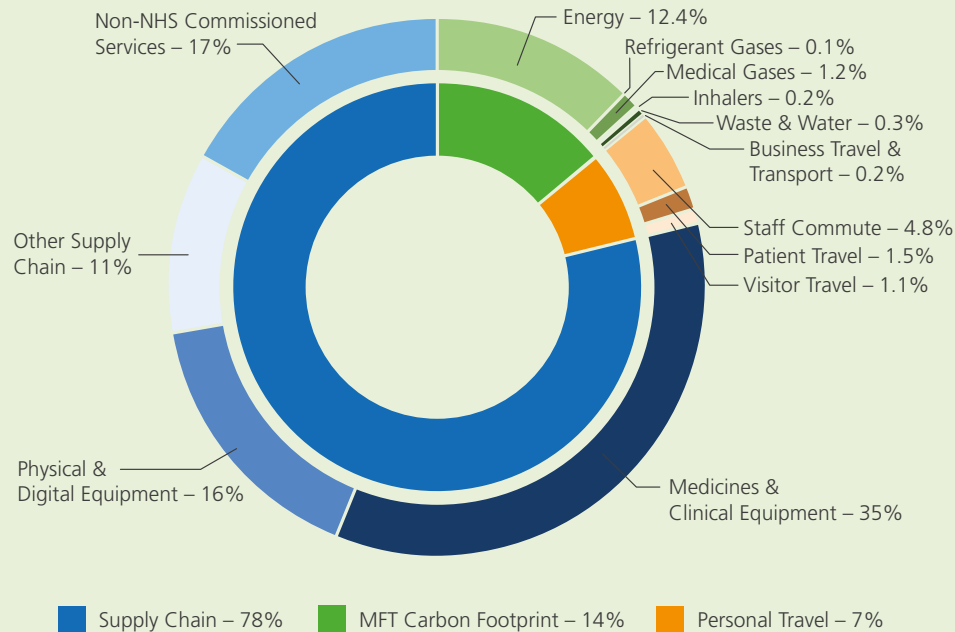
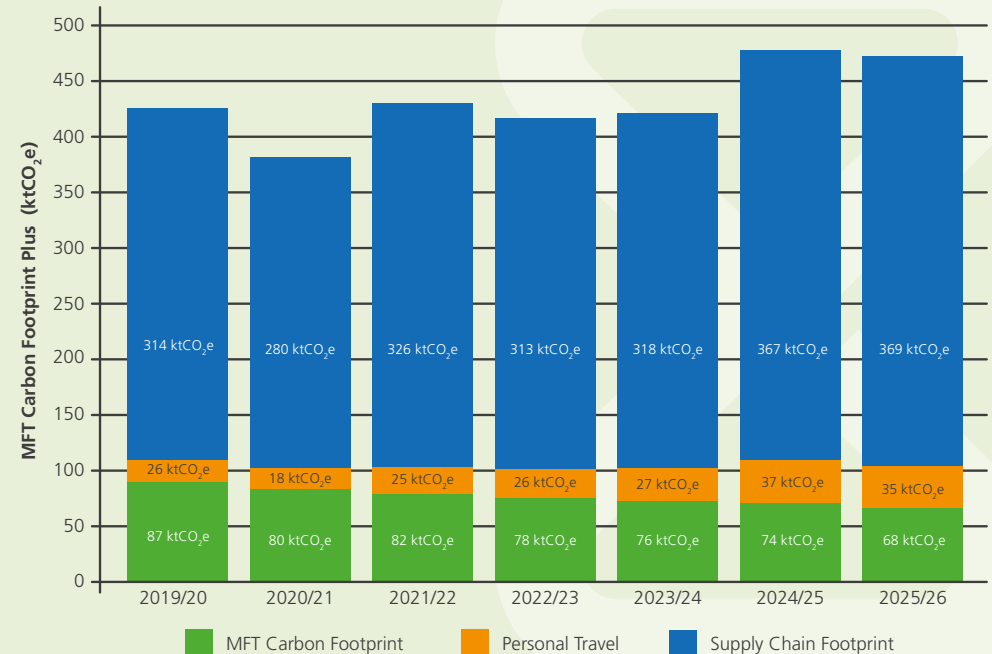


Figure 3: MFT Carbon Footprint Plus from Baseline



The Carbon Footprint Plus represents all the emissions we are in direct control of (the MFT Carbon Footprint) and those we can influence (Personal Travel & Supply Chain).

By far the largest part of the Carbon Footprint Plus is from supply chain (78%). These emissions are from producing and delivering the goods and services we buy. Due to the method of calculation, the supply chain footprint is not suitable for year on year comparison, but it does give us a good understanding of the scale of the footprint and the areas of spend that are responsible

for the most carbon. The figures for 2025/26 show that emissions remain the greatest from medicines and clinical equipment, capital spend on our estates and digital infrastructure, and commissioned health services.

Improvements in the modelling of Personal Travel have led to a jump in the footprint during the last two years. This is also partly down to the increased numbers of staff and patients travelling to site each year. Carbon reductions in this area come from influencing and enabling more active travel incentives (with the co-benefit of improving health) and the movement of care

closer to home to reduce the number of miles travelled, as well as the carbon per mile travelled.

Within our Carbon Footprint, energy is responsible for the largest proportion of emissions and the biggest in-year savings, followed by anaesthetic gases. We are reaping the rewards of our energy efficiency investments moving from fossil fuels to electricity, and previous work decommissioning nitrous oxide manifolds.

Footnotes

- For more detailed look at the changes in the Carbon Footprint, the Carbon Footprint per Patient Contact and carbon footprinting methodology, see [Appendix C](#).
- Updated carbon factors have been used for 2024/25 and 2025/26 of the Personal Travel and Supply Chain Footprint.

Conclusion

There has been a lot of activity to be proud of over the first year of our new Green Plan.

Teams and colleagues from across MFT have shown energy, creativity and determination in turning sustainability ambition into action. An increasing number of the wonderful case studies in this report highlight the benefits of sustainability on improving patient experience, supporting better health outcomes, and reducing inequalities. Greener clinical practice, better waste management, further energy decarbonisation, greater digital innovation, increased rates of sustainable travel, supporting nature recovery and building stronger governance ensures that the work taking place at our Trust is making a real and visible difference.

The results are impressive. Our Carbon Footprint has dropped 7% in one year, saving 5,200 tCO₂e, and our carbon footprint per patient contact is nearly half the size it was in 2020/21. We have seen impressive savings from work across our estates and within our clinical practice, and by building sustainability into everyday care, services and decision-making, we are expecting even greater savings next year.

This is excellent progress, and it belongs to the many teams and individuals who have made change happen in busy, complex services. Thank you to everyone who has contributed.

This report also reminds us we cannot stop here. Our emissions remain above the annual carbon budget, and our Green Plan actions need consistent effort. Every member of staff has a part to play. The biggest gains will be seen when we consider what can be done differently, when we learn about the challenges of climate change to find novel solutions, when we use resources wisely, and when colleagues bring sustainability into every role.

We are doing well – and now we want to do more, go faster, and keep working together for a healthier, more sustainable future.



Appendix A: Green Plan Progress at a Glance

The tables below show a breakdown of the progress achieved at the end of the first Green Plan. Each Area of Focus is categorised as having achieved good, moderate or limited / no progress from 2022 to 2025. Each headline objective and supporting objective is marked as complete, partially complete or incomplete.

If you would like further information about MFT's sustainability programme, please engage with your local sustainability lead, division director, or contact the MFT Sustainability Team for support (TimeToAct@mft.nhs.uk)

Progress Key:

● Not Started ● Behind ● On Track ● Complete



Net Zero Clinical Transformation

Headline Objective:

Supporting Actions:

Embed sustainability into clinical pathway design.	Engage with existing frameworks of quality improvement and transformation to incorporate sustainability and the "triple bottom line" value assessment. (e.g. Quality Improvement, Value for Patients, GIRFT)	●
	Run a focused sustainability campaign each year to address and support pathway improvements in service areas that are carbon hotspots.	●
Build capacity to reduce the carbon intensity of pathways.	Support sustainability research, innovation and technology adoption at MFT.	●
	Engage with healthcare students to incorporate sustainability into mandatory Quality Improvement projects as part of education.	●
Move towards digitally enabled pathways where clinically appropriate.	Increase the use of virtual and tele outpatient appointments to deliver care in a lower carbon setting, and reduce unnecessary patient & visitor travel to sites.	●
	Increase the use of Hospital@Home to deliver care in a lower carbon setting.	●



Digital Transformation, Research & Innovation

Headline Objective:

Supporting Actions:

Embed sustainability into strategy, processes and purchasing within Digital and Research & Innovation.	Assess new digital, research and innovation programmes for environmental impact.	●
	Improve the monitoring & return rates of Trust owned digital equipment.	●
	Maximise the opportunity for supplier takeback schemes & extending the lifetime of digital equipment through procurement practice.	●
	Maximise the opportunity for supplier takeback schemes & reuse of excess items related to the delivery of research and innovation.	●
Identify, maximise and measure benefits enabled by HIVE & MyMFT which deliver sustainability co-benefits.	Utilise HIVE to streamline services & create prompts and behaviour change through digital functionality.	●
	Reduce estates related carbon through the shutdown of obsolete medical records warehouses.	●
	Ensure all new digital innovations are compliant with HIVE	●
Use improved data and analysis to optimise sustainability reporting.	Share more accessible sustainability information by creating a Sustainability Dashboard with site-level sustainability metrics.	●
	Use a digital estate twin to optimise energy services and explore climate adaptation measures.	●

Appendix A: Green Plan Progress at a Glance



Supply Chain & Procurement

Headline Objective:

Supporting Actions:

Maximise the sustainability outcomes from existing policies, procedures and frameworks within procurement.

Embed sustainability into the Procurement Policy & Procedures Handbook.

Improve monitoring of supplier's social value commitments & carbon reduction plan progress.

Engage with MFT suppliers to complete the Evergreen Assessment and increase their maturity level.

Embed the Net Zero Supplier Roadmap, including adopting new methods for reporting on supply chain carbon emissions & environmental progress.

Expand responsible use of resources in the procurement & use of products, including reducing the reliance on single-use products.

Investigate and enact further return and reuse programmes for suitable equipment.

Assess new products for environmental impact & re-use potential.

Expand the ward coverage of the inventory management system Genesis, to better manage consumables stock and reduce waste.



Medicines

Headline Objective:

Supporting Actions:

Research and act on sustainable solutions to lower the carbon footprint of medicines with complex use cases and high carbon emissions at the point-of-use.

Explore and enact opportunities for reducing the carbon footprint of mixed nitrous oxide & pure nitrous oxide whilst maintaining excellent patient experience.

Reduce the carbon intensity of inhalers by improving staff awareness of improved asthma control for patients through training on inhaler technique and adherence to NICE guidelines.

Explore opportunities for responsible and lower carbon waste disposal routes of medication, including inhaler recycling.

Complete an initial accreditation using the Royal Pharmaceutical Society "Greener Pharmacy" Toolkit. Improve the score for each site during the course of this Green Plan.

Reduce the wastage associated with medicines.

Roll out the "Your Medicines Matter" campaign to encourage patients to bring their medications into hospital to reduce unnecessary overprescribing & medicines waste.

Explore and enact opportunities to reduce over- or repeat-prescribing within the hospitals.

Reduce the amount of packaging waste associated with medicines.

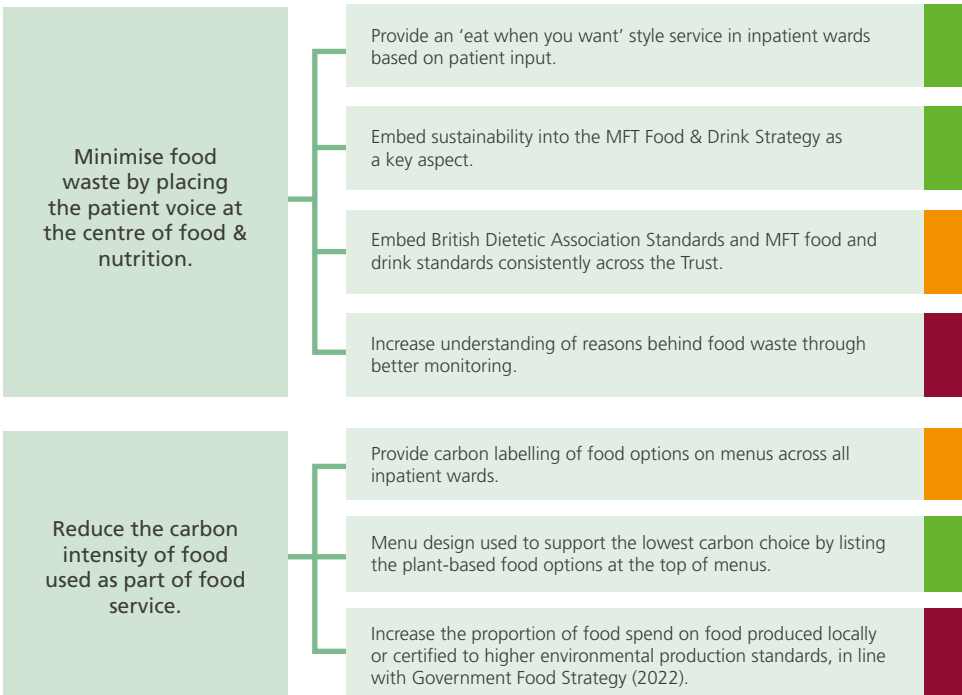
Appendix A: Green Plan Progress at a Glance



Food & Nutrition

Headline Objective:

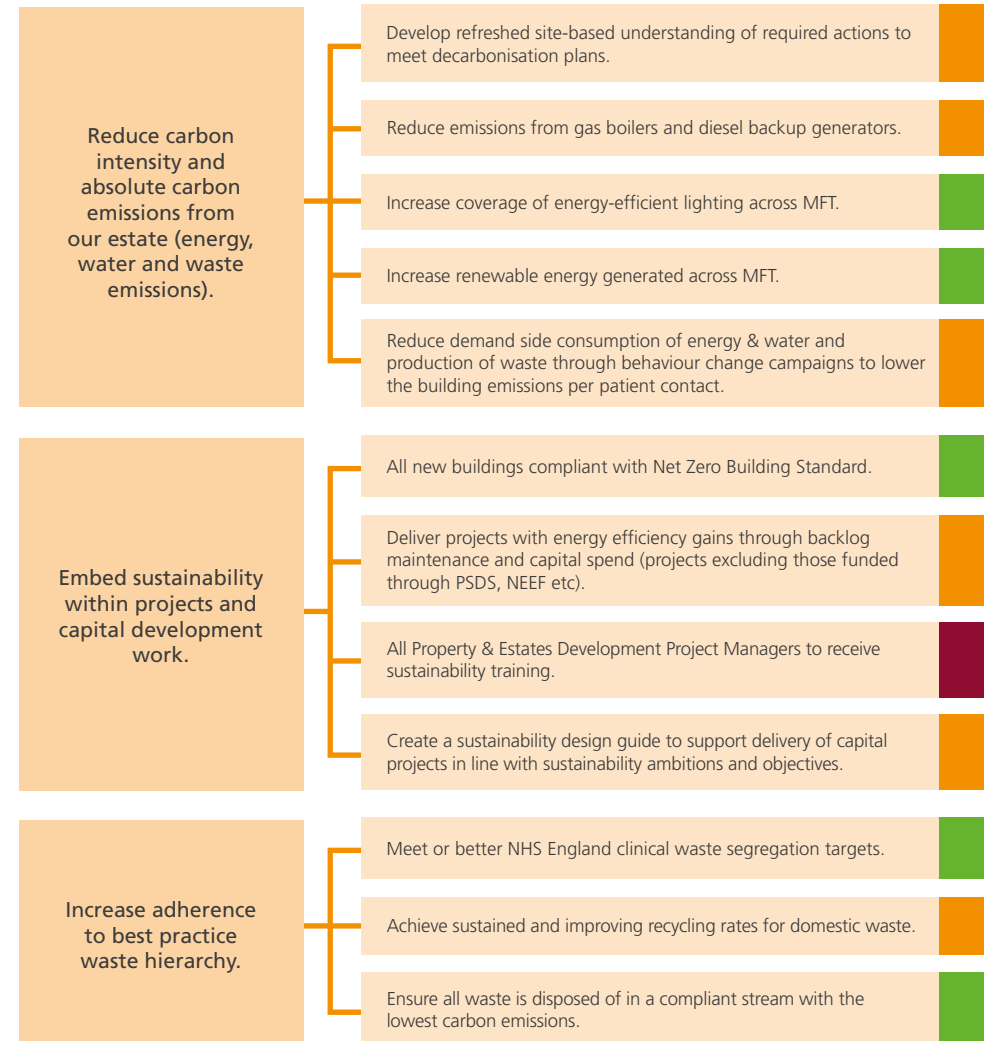
Supporting Actions:



Estates & Facilities

Headline Objective:

Supporting Actions:



Appendix A: Green Plan Progress at a Glance



Travel & Transport

Headline Objective:

Reduce carbon intensity of the Trust fleet.

Supporting Actions:

Continue to increase the ratio of Ultra Low Emission Vehicles (ULEVs) and Zero Emission Vehicles (ZEVs) owned or leased by MFT.

Reduce carbon intensity of business travel.

Establish a site- and role-based understanding of business travel patterns, benchmarking across MFT.

Explore implementing sustainable travel solutions with teams across the Trust.

Create a business understanding of the benefits of increased cycle mileage rates.

Reduce carbon intensity of commuting for staff, patient & visitor travel.

Improve staff access to electric vehicle market.

Provide a range of sustainable travel staff benefits.

Increase uptake in sustainable travel modes for staff commuting.

Work with partners to deliver sustainable travel improvements across the city region.



Climate Change Adaptation

Headline Objective:

Ensure MFT is continuing to embed climate change adaptation within business as usual and business planning practices.

Supporting Actions:

Create guidance resources to build climate change risk into service-level business continuity plans.

Review and report progress against the NHS Climate Adaptation Framework on an annual basis.

Establish site-specific understanding of climate risks and vulnerabilities using Greater Manchester Combined Authority Climate Change Risk Assessment tool and other appropriate resources.

Comply with adaptation provisions within the NHS Core Standards for emergency preparedness.

Increase clinical awareness and preparedness for the impacts of climate change on the population served by MFT.

Secure Public Health England engagement with services and disciplines to review future risks and population impacts.

Establish service-specific & population-focused understanding of future climate risks morbidities, and vulnerabilities, using guidance from national & international professional bodies.

Identification of basic training for key staff to undergo on climate change risk and adaptation.

Climate change adaptation in healthcare is discussed regularly by the population health committee.

Appendix A: Green Plan Progress at a Glance



Green Spaces & Biodiversity

Headline Objective:

Manage green and natural spaces within the MFT estate to support nature recovery.

Supporting Actions:

Establish local site management groups for the external areas to determine best practice management while promoting and increasing biodiversity.

Create a Trust-wide approach to the delivery of biodiversity net gain as part of capital projects (BNG).

Empower staff to utilise green and natural spaces to improve health and wellbeing.

Nature-based or social prescribing activities to take place at MFT sites.

Improve staff health and wellbeing outcomes through the provision of high-quality green spaces.



Workforce, Networks & Systems Leadership

Headline Objective:

Continue to educate and engage as much of the workforce as possible about the net zero ambitions of the NHS and sustainable healthcare.

Supporting Actions:

Increase the completion rate of online sustainability e-learning modules, including targeting key staff groups, for example the Green Plan Oversight Group, Research & Innovation, Procurement & Finance.

Work with education teams and leads in service areas that are carbon hotspots to deliver bespoke sustainability training and workshops, for example operating theatres.

Widely promote work through events and expand the uptake of the Sustainability Advocates role to further disseminate information.

Complete an initial accreditation using the Royal Pharmaceutical Society "Greener Pharmacy" Toolkit. Improve the score for each site during the course of this Green Plan.

Build the capacity of the workforce to engage with and embed sustainability within everyday working practice.

Senior Leaders to embed sustainability into Clinical Groups objectives in annual plans.

Appoint a designated board-level net zero lead, generally an existing executive director, to oversee Green Plan delivery with clearly identified operational support.

Assess opportunities for hybrid roles, apprenticeships and fellowships that will help deliver the Green Plan.

Appendix B: KPI Dashboard

- **Carbon:** Our absolute & normalised carbon footprints have dropped by the largest percentage in 5 years, signifying a faster rate of decarbonisation. Personal Travel footprint has reduced in line with staff commuting. The Supply Chain represents the largest proportion of the Carbon Footprint Plus, accounting for 78% in 2025/26.
- **Buildings & Utilities:** Gas consumption dropped slightly, while electricity stayed the same versus 2024/25, suggesting lower overall demand. The carbon intensity of the grid dropped by 11%, magnifying the carbon savings. Continued solar panel installs have led to the dramatic increase in renewable generation. Refrigerant gas leaks remain very volatile year-on-year.
- **Medicines & Anaesthesia:** The reduction in consumption of pure Nitrous Oxide and consistent use of Gas & Air has led to a lower medical gases footprint. Total inhaler prescriptions increased by 10% and the carbon footprinting method was updated. 82% of inhalers issued were higher carbon MDIs, consistent with 2024/25.
- **Waste:** Total tonnage decreased despite an 8% increase in patient contacts. Reusable sharps bins weight is no longer measured, hence drop in healthcare reuse, and provision of recycling bins is increasing the Non-healthcare recycling. The combined impact of waste initiatives are drastically reducing the waste carbon footprint and footprint per patient contact.
- **Travel:** Accuracy of business travel accounting have improved, causing an increase in mileage. Improved vehicle efficiency and more electric vehicles has limited the footprint increase. Staff commuting distance has dropped based on the latest staff travel survey & virtual appointments have limited the rise in patient & visitor mileage, despite an increase in patient contacts.

Theme	KPI	Unit	2019/20*	2024/25	2025/26	Trend from Prev Year (25/26 vs 24/25)	Trend from Baseline (25/26 vs 19/20)
Carbon	MFT Carbon Footprint	tCO ₂ e	86,708	73,361	68,391	↓ -7%	↓ -21%
	Community Carbon Footprint	tCO ₂ e	25,790	37,010	35,163	↓ -5%	↑ 36%
	Supply Chain Carbon Footprint	tCO ₂ e	314,274	317,529	369,325	N/A**	N/A**
	MFT Carbon Footprint Plus	tCO ₂ e	426,772	417,492	472,879	N/A**	N/A**
	<i>Normalised MFT Carbon Footprint</i>	<i>Kg CO₂e / patient contact</i>	<i>32.02</i>	<i>22.60</i>	<i>19.47</i>	↓ -14%	↓ -39%
Building & Utilities	Natural Gas Consumption	kWh	180,188,024	200,110,233	191,333,610	↓ -4%	↑ 6%
	Electricity Consumption	kWh	95,032,414	71,960,670	71,980,201	0%	↓ -24%
	On-site Renewable Generation	kWh	99,799	697,816	870,753	↑ 25%	↑ 773%
	Water Consumption	m ³	800,124	744,266	780,929	↑ 5%	↓ -2%
	Refrigerant Gas Leaks	Kg	91	273	173	↓ -37%	↑ 90%
	<i>Normalised Energy & Water Carbon Footprint</i>	<i>Kg CO₂e / patient contact</i>	<i>25.30</i>	<i>19.50</i>	<i>16.83</i>	↓ -14%	↓ -33%
Medicines & Anaesthesia	Volatile Anaesthetic Gases Carbon Footprint	tCO ₂ e	1,674	333	313	↓ -6%	↓ -81%
	Medical Gases Carbon Footprint	tCO ₂ e	10,704	6,340	5,575	↓ -12%	↓ -48%
	Inhaler Carbon Footprint	tCO ₂ e	727	523	818	↑ 56%	↑ 13%
Waste	Total Waste Tonnage	Tonnes	7,932	9,044	8,629	↓ -4%	↑ 9%
	Healthcare Waste	Tonnes	3,613	4,166	3,918	↓ -6%	↑ 8%
	Healthcare Reuse & Recycling	Tonnes	57	97	13	↓ -86%	↓ -77%
	Non-Healthcare Waste	Tonnes	2,972	3,260	3,134	↓ -3%	↑ 5%
	Non-healthcare Reuse & Recycling	Tonnes	1,290	1,521	1,564	↑ 6%	↑ 21%
	<i>Normalised Total Waste</i>	<i>Kg waste / patient contact</i>	<i>2.93</i>	<i>2.78</i>	<i>2.46</i>	↓ -11%	↓ -16%
Travel	Total Fleet Mileage	km	697,041	470,042	367,996	↓ -51%	↓ -47%
	Total Business Travel Mileage	km	7,888,127	4,288,831	6,871,823	↑ 60%	↓ -13%
	Modelled Staff Commuting Mileage	km	146,295,961	170,655,790	154,870,134	↓ -9%	↑ 6%
	Modelled Patient & Visitor Travel Mileage	km	99,625,822	104,703,263	106,942,423	↑ 2%	↑ 7%

* Figures include North Manchester General Hospital. ** NHS England guidance recommends procurement carbon footprinting methodology is not suitable for year-on-year comparison, but instead demonstrates the magnitude of the Supply Chain Carbon Footprint compared to the MFT Carbon Footprint.

Appendix C: Carbon Footprint Changes & Methods

Figure 4: Carbon Footprint & Personal Travel Changes 2024/25 to 2025/26

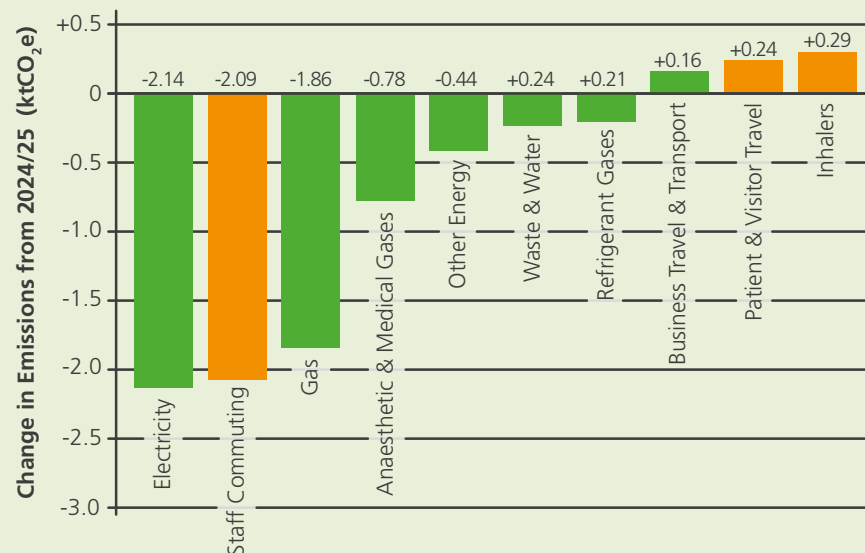
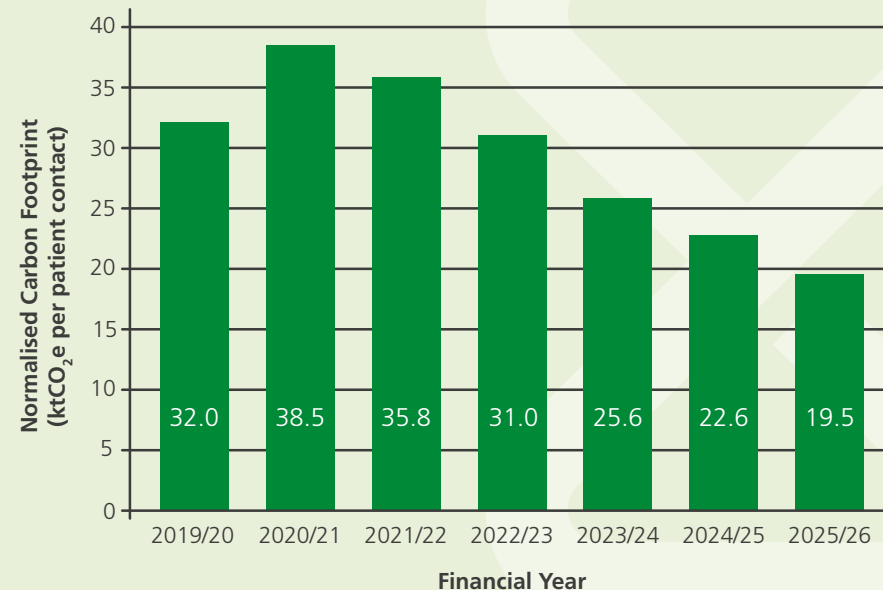


Figure 5: Annual Carbon Footprint per Patient Contact



To monitor progress towards our net zero ambitions, we measure and present our carbon impact in line with the [Delivering a Net Zero National Health Service](#) methodology, the best available to us at the time of calculation.

The 2025/26 Carbon Footprint, Carbon Footprint Plus, remaining Carbon Budget, and projected 2026/27 emissions have been updated compared to those reported in the MFT 2025/26 Annual Report. This is because of access to more complete energy data, refrigerant gas data, fleet data and the release of more accurate carbon factors for future projections.

Carbon Footprint: Uses annual [DESNZ Greenhouse gas conversion factors](#) and Greener NHS approved carbon factors for relevant year. The method for accounting for inhalers was brought in line with Greener NHS methodology in 2025/26.

Personal Travel: The method for estimating these emissions was updated in 2024/25. Staff commuting distance is now modelled based on the biannual staff travel survey (rather than national estimates) and the Health Outcomes of Travel Tool is used to model patient and visitor distances. Annual DESNZ factors are now applied to all distances, rather than fixed 2019 carbon factors used in previous method. As a result of these

changes, we are more confident in the accuracy of emissions, however we are still comparatively less confident in the accuracy of this section of the Carbon Footprint Plus than other sections, given the reliance on modelling from average data sets.

Supply Chain: Emissions are measured through changes in spend and spend based emission factors, but this method means the footprint calculated is not suitable for annual comparison. From 2024/25, the greenhouse gas emissions factors were updated to the [DEFRA greenhouse gas spend-based multipliers](#), rather than the static 2011 factors previously used.

Find Out More

If you have any questions, or would like to find out more about the work that we are doing please contact us via email: TimeToAct@mft.nhs.uk

View the [MFT Green Plan](#)

Staff can find practical sustainability advice from MFT on the [Time To Act Sharepoint Page](#)

See our [Sustainable MFT Linktree](#) for further resources

Watch our webinar service at the [Sustainable MFT Vimeo playlist](#)

MFT's Taskforce on Climate-Related Financial Disclosures can be found within our [Green Plan 2 Net Zero Appendix 4](#)

This document was produced by the Sustainability Team at Manchester University NHS Foundation Trust:

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