



HS HEALTH GROUP LTD

Read House, Gilbert Drive, Boston, Lincolnshire, PE21 7TQ
0333 014 7700, admin@hshealthgroup.co.uk, www.hshealthgroup.co.uk

Carbon Reduction Plan (CRP)

Report date: 1st of April 2026

Commitment to achieving Net Zero

HS Health Group Limited is committed to achieving Net Zero Greenhouse Gas (GHG) emissions by 2045. This target includes an interim milestone of reducing our total operational emissions by **80% by 2032**, aligning us directly with NHS England Net Zero timelines.

We deliver NHS-commissioned MSK physiotherapy and First Contact Physiotherapy (FCP) services across Lincolnshire, Northeast Lincolnshire, Hull, and West Berkshire (Reading), operating from 73 premises, the majority of which are hired clinical rooms within NHS general practices and community sites rather than organisation-owned buildings.

We also provide Private GP, ENT, Phlebotomy, Aesthetics, Diagnostics services from our Boston clinic location. Our commitment is to deliver the maximum environmental benefit across all locations and services, whether through direct control or through influence over landlords and hosting practices.

Baseline Emissions Footprint

Baseline emissions are a record of the greenhouse gases that have been produced in the past and were produced prior to the introduction of any strategies to reduce emissions. Baseline emissions are the reference point against which emissions reduction can be measured.

Baseline Year: 2025 (April 2025-March 2026)

Additional Details relating to the Baseline Emissions calculations:

Scope 1 (Direct emissions):

Status: Not currently quantified

HS Health Group Limited does not operate or own a commercial vehicle fleet. The vast majority of our 73 clinical premises are hired rooms within NHS general practices under licence agreements.



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Direct fuel combustion (such as natural gas heating or company cars) is not under our operational control. In accordance with [PPN 06/21 guidance](#), this text serves as our formal justification for the lack of quantified direct Scope 1 combustion figures at this stage.

We will continue to work with hosting practices and landlords to confirm whether any direct combustion sources fall within our operational control, and will quantify and report these once identified.

Scope 2 (Indirect Energy Emissions):

Calculated from annual electricity consumption of 45,000 kWh across our premises, applying the UK Government (DEFRA 2025) average grid electricity conversion factor of 0.192 kgCO₂e/kWh. Scope 2 emissions for the baseline year are 8.6 tCO₂e.

Details: In compliance with public procurement requirements, we track the five mandatory GHG Protocol Scope 3 categories:

Category 4: Upstream Transportation & Distribution: Emissions related to the shipping and delivery of clinical medical supplies and office consumables to our 73 locations. Status: not currently quantified. We do not yet hold supplier delivery/mileage data for this category; this will be sought from our clinical and office supplies contractors and quantified in a future update of this Plan.

Category 5: Waste Generated in Operations: Emissions from clinical waste disposal, sharps, and general recycling across our hub and clinic locations. Calculated from annual waste weight data recorded at our three directly-operated premises in Lincolnshire. Waste generated from GP-hosted clinic rooms is managed under host practices' own waste management and net zero protocols.

Waste emissions for the baseline year are 1.24 tCO₂e. This applies the peer-reviewed clinical waste high-temperature incineration factor of 1.074 kgCO₂e/kg (Rizan et al., 2021, the standard reference for NHS clinical waste, since DEFRA's general company-reporting tables do not include a clinical waste category), and the UK Government (DEFRA 2025) energy-from-waste factor of 0.005 kgCO₂e/kg for general waste (confirmed with our waste contractor) and mixed recycling factor of 0.005 kgCO₂e/kg.

Clinical waste accounts for the great majority of this total (approximately 1.24 tCO₂e of the 1.24 tCO₂e total), reflecting its significantly higher per-kilogram carbon intensity despite being a smaller proportion of total waste volume by weight.

Category 6: Business Travel: Staff travel between our 73 clinical sites via personal vehicles (Grey Fleet) and public transport.



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Category 7: Employee Commuting: Day-to-day travel by our administrative and physiotherapy staff from home to their designated clinic or hosting practice.

Calculated from 9,500 miles of employee mileage, applying the UK Government (DEFRA 2025) average car conversion factor of 0.28 kgCO₂e/mile. Employee commuting emissions for the baseline year are 2.7 tCO₂e. This figure has been estimated using UK national average commuting distance data, applied across our staff pool, and reflects Category 7 (Employee Commuting) only.

This estimate is to be taken as approximate, with a consideration given to the fact that more than 90% of our staff are locally based with minimal travel requirements by design of our service delivery model (staff work from, or close to, the premises where they deliver care).

Category 6 (Business Travel) staff travel between our 73 clinical sites via Grey Fleet vehicles and public transport is not currently quantified separately, as mileage data for inter-site travel is not yet centrally recorded. This will be captured once our planned staff commuting/travel survey (see Planned Carbon Reduction Initiatives) is complete, and will be reported as a distinct figure from Employee Commuting in future updates of this Plan.

Category 9: Downstream Transportation & Distribution: Not applicable to our service delivery model (reported as 0 tCO₂e), as we provide healthcare services directly to patients on-site and do not ship commercial physical goods to consumers.

Baseline Year Emissions	
EMISSIONS	TOTAL (tCO ₂ e)
Scope 1	Not currently quantified - see explanation above
Scope 2	8.6
Scope 3 (Included Sources)	- Employee Commuting - 2.7 - Waste generated in operations - 1.24 - Business travel (Category 6) - not currently quantified (see note above) - Upstream Transportation (Category 4) - not currently quantified (see note above) - Downstream Transportation (Category 9) - not relevant. HS Health Group Limited is a service provider commissioned to deliver NHS physiotherapy services directly to patients on-site; distribution of



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	goods sold to end consumers is not relevant to our operations.
Total Emissions	12.54

Note: the Total Emissions figure above currently excludes Scope 1 and Category 4 (Upstream Transportation and Distribution), as actual data for these sources is not yet available. As we obtain this data, our reported total is expected to increase in the short to medium term, reflecting improved data availability rather than a genuine rise in emissions. A revised baseline will be established once all mandatory categories are fully quantified, to ensure a fair basis for future comparison.

Current Emissions Reporting

To track progress since the baseline year, as Current-year figures had not yet been finalised at the time of publishing this Plan, this will be added once the relevant reporting period data (electricity consumption, waste weight, and travel mileage) has been collated using the same methodology and conversion factors as the baseline year.

Emissions reduction targets

To progress toward Net Zero by 2045, HS Health Group Limited has adopted the following approach:

- To ensure emissions we control directly (our NHS Carbon Footprint) are net zero by 2040.
- To ensure emissions we can influence (our NHS Carbon Footprint Plus, including our supply chain) are net zero by 2045.
- To review and refine this Plan annually as data availability and accuracy improve, particularly in relation to employee commuting and waste, replacing estimated figures with actual measured data.

Carbon reduction projects and measures

The following environmental management measures are in place, or will be applied when performing our NHS contracts, mapped to the NHS Carbon Footprint and Carbon Footprint Plus emissions scopes:

Scope 1



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Fossil fuels: Reduced need for staff and patient travel through provision of a local service with flexible access options, including through local general practices in all Primary Care Networks, or home-based via self-management apps, virtual and other information resources both paper-based and digital. Our locally based workforce reduces the need for staff to travel.

Facilities: Optimising NHS estate through increased utilisation, modern building methods, and programmes implementing efficient energy standards. Our hired service premises are progressively replacing older lighting with energy-efficient alternatives where within our control to do so.

Scope 2

Electricity: Across all service premises, we give preference to electricity providers offering guarantees on green energy provision, where we hold direct control over the electricity contract.

Scope 3

Energy: Reduced unnecessary activity, length of stay, and demand on local acute services. Unnecessary referrals are reduced, and patients admitted for surgical MSK procedures are more often in a state of recovery readiness, leading to shorter stays and reduced need for post-discharge enhanced interventions.

Freight: Wherever practicable and cost-effective, we aim to keep our supply chains local.

Waste: We use paper-light practices and e-communications with patients, referrers, and other services, minimising paper wastage, and reducing use of single-use plastics through supplier choice.

Medicines and medical devices: We support lower reliance on medication by prescribing only when appropriate and focus on reducing low-clinical-value pain injections. Prioritising and optimising self-management support de-medicalisation, reducing the need for clinical intervention.

IT: By order of preference, we refurbish, donate, or recycle IT devices at the end of their lifecycle.

Business travel and commuting: Staff are based locally to service delivery locations and are actively supported to consider alternatives to car travel, including public transport.



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Completed carbon reduction initiatives

The following measures have been completed or implemented within the baseline period. The full carbon reduction achieved by these measures is not yet fully visible within our reporting, due to a lag in data reporting for some aspects.

- Reducing unnecessary activity, including reduced referrals and revisits to local GPs, diagnostics providers and secondary care.
- Locally based workforce model, minimising staff travel by design.
- Paper-light working and e-communications with patients and referrers.
- Preference for sustainable energy providers and local supply chains were within our control.

Planned carbon reduction initiatives

- Complete a full staff commuting distance survey to replace the national-average placeholder figure with actual data.
- Extend waste quantification to any further directly operated premises, and continue working with our clinical waste provider to reduce high-temperature incineration volumes, which account for the great majority of our current waste footprint.
- Engage hosting practices and landlords on electricity sourcing and energy efficiency at hired premises where influence (rather than direct control) applies.
- Appoint a designated Net Zero Lead to own this Plan and its annual review.
- Review supplier and sub-contractor carbon commitments, as part of ongoing supply chain management.

Declaration and Sign Off

This Carbon Reduction Plan has been completed with reference to Procurement Policy Note 006 (PPN 006) - formerly Procurement Policy Note 06/21, and the associated guidance and reporting standard for Carbon Reduction Plans.

Emissions have been reported and recorded in accordance with the published reporting standard for Carbon Reduction Plans and the GHG Reporting Protocol corporate standard¹, and use the appropriate UK Government emission conversion factors for greenhouse gas company reporting².

Scope 1 and Scope 2 emissions have been reported in accordance with SECR requirements, and the required subset of Scope 3 emissions has been reported in accordance with the published reporting standard for Carbon Reduction Plans and the Corporate Value Chain (Scope 3) Standard³.



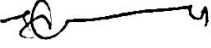
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This Carbon Reduction Plan was reviewed and approved by the Board of Directors (or equivalent management body) on 28/03/2026 and signed off by:

Name: Hema Thota

Title: Managing Director

Signature: 

Date: 01/04/2026

¹ <https://ghgprotocol.org/corporate-standard>

² <https://www.gov.uk/government/collections/government-conversion-factors-for-company-reporting>

³ <https://ghgprotocol.org/standards/scope-3-standard>