

Greenhouse Gas Emissions Report & Carbon Reduction Plan

Reporting Entity: TXM Healthcare Group.

Prepared in accordance with: BS EN ISO 14064-1:2019 and Procurement Policy Note (PPN) 06/21

Reporting Period: 1 January 2025 – 31 December 2025



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Introduction

Description of TXM Healthcare Group.

TXM Healthcare Group, comprising TXM Healthcare Group Limited, Merco, and Specialist Locum Network, is a specialist healthcare recruitment and workforce solutions provider operating across the NHS and private healthcare sectors throughout the United Kingdom. The Group is committed to delivering high-quality staffing solutions through collaboration, expertise, and long-term partnership building.

By leveraging the combined strengths, industry knowledge, and extensive networks of its specialist brands, TXM Healthcare Group connects skilled healthcare professionals with rewarding career opportunities while supporting healthcare providers in delivering exceptional patient care. The organisation places significant value on trust, integrity, and service excellence, ensuring sustainable relationships with clients, candidates, and communities.

In addition to delivering healthcare workforce solutions, TXM Healthcare Group is committed to responsible and sustainable business practices. The Group recognises the importance of reducing its environmental impact and actively works to understand, measure, and manage carbon emissions across its operations. Through ongoing monitoring, continuous improvement initiatives, and targeted carbon reduction measures, TXM Healthcare Group aims to support the UK's transition towards a net-zero economy while maintaining the highest standards of service delivery.

Our Mission

To be a trusted and valued partner to both the NHS and private healthcare sectors, supporting healthcare staffing needs while being recognised as a partner of choice for quality, reliability, and service excellence.

Our Values

Quality

Quality is at the heart of everything we do. We are committed to delivering staffing solutions that consistently meet and exceed client expectations. Through robust processes, regular audits, continuous improvement programmes, and client feedback, we maintain the highest standards of compliance, efficiency, and service delivery.

Enthusiasm

We are passionate about supporting the healthcare sector and take pride in delivering exceptional results. Our dedicated team works proactively to address workforce challenges, providing innovative and effective solutions that ensure healthcare providers have access to the right talent when it is needed most.

Partnerships

Collaboration is fundamental to our success. We work closely with healthcare organisations, professionals, and communities to create mutually beneficial relationships. By sharing expertise, fostering trust, and supporting collective goals, we deliver positive outcomes for clients, candidates, and patients alike.

Sustainability and Carbon Reduction

At TXM Healthcare Group, we are committed to sustainable business practices and reducing the environmental impact of our operations. Through ongoing monitoring, measurement, and reporting, we seek to understand and manage greenhouse gas emissions across all areas of the business.

Our baseline emissions were established in 2024 to align with TXM Healthcare Group's operational activities and provide a consistent benchmark for measuring year-on-year emissions performance. Since the baseline year, emissions have varied across reporting categories, reflecting changes in workplace occupancy, business travel, employee commuting patterns, and wider operational activities.

Scope 1 emissions have reduced due to the nature of our recruitment and workforce solutions business, whilst Scope 2 emissions continue to be managed through improved energy efficiency and responsible energy consumption practices. Scope 3 emissions represent the most significant area of impact and are therefore a key focus of our carbon reduction strategy, particularly in relation to employee commuting, business travel, and supply chain activities.

Through continuous improvement, stakeholder engagement, and targeted carbon reduction initiatives, TXM Healthcare Group remains committed to supporting the transition to a low-carbon economy and achieving its long-term Net Zero objectives.

Location

TXM Healthcare Group is headquartered in Milton Keynes, United Kingdom, and supports healthcare organisations and healthcare professionals across the UK through its specialist recruitment and workforce solutions services.

Responsibility for GHG reporting

Rhian Nicholas, Operations Director, holds overall responsibility for the reporting of greenhouse gas (GHG) emissions arising from company operations.

TXM Healthcare Group engages Robinson Management Services Ltd. to support the collection and analysis of GHG data, as well as to assist with reporting in accordance with ISO 14064-1 and PPN 06/21 requirements.

GHG report purpose & objectives

This report outlines the processes used to collect, convert, and report annual greenhouse gas (GHG) emissions.

TXM Healthcare Group publishes this document to provide transparent disclosure of its GHG emissions to stakeholders, in line with the commitments set out in the company's environmental policy and strategy.

It also serves as a tool for measuring, monitoring, and managing the organisation's environmental performance.

Report period covered & reporting frequency

This report is produced on an annual basis and is published in PDF format on the company website: <https://txmhealthcare.com/>

The current report covers the reporting period from 1 January 2025 to 31 December 2025 and sets out the methodology used to prepare environmental performance data for this period.

Base year

For ISO 14064 verification purposes, the period from 1 January 2024 to 31 December 2024 represents the first year of fully verified data and is therefore designated as the base year. While historical emissions data exists, 2024 has been selected as the baseline year as it represents the first reporting period where emissions were quantified in accordance with ISO 14064-1 and independently verified. This provides a robust and consistent benchmark against which future emissions performance and carbon reduction progress can be measured. The baseline has been established in accordance with ISO 14064-1 requirements.

Base year review

In the event of significant structural changes such as a merger or acquisition, TXM Healthcare Group will undertake a base year review and recalculation. This process ensures that any material changes to organisational boundaries, calculation methodologies, or identified errors are accurately reflected.

Outcomes of any base year review will be incorporated into future reporting periods.

Data included in this report

This report covers the seven greenhouse gases defined under the Kyoto Protocol, in line with ISO 14064-1 requirements:

Greenhouse Gas Type	Chemical Symbol
Carbon Dioxide	CO ₂
Methane	CH ₄
Nitrous Oxide	N ₂ O
Nitrogen Trifluoride	NF ₃
Sulphur Hexafluoride	SF ₆
Perfluorocarbons	PFCs
Hydrofluorocarbons	HFCs

Verification activities

This GHG emissions report has been prepared in accordance with BS EN ISO 14064-1:2019, which provides guidance on the quantification and reporting of greenhouse gas emissions and removals at an organisational level.

The report includes all required disclosures, with non-mandatory elements excluded where deemed not relevant, in line with the principle of materiality.

TXM Healthcare Group has appointed Robinson Management Services Ltd. to conduct independent second-party verification in accordance with ISO 14064-3 and PPN 06/21.

The purpose of this verification is to ensure that reported GHG emissions and removals are reviewed objectively and impartially.

The verification statement is included in the [appendix](#) to this report.

Declaration and sign off.

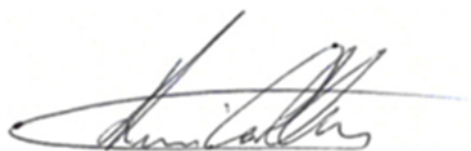
This Carbon Reduction Plan has been completed in accordance with ISO14064-1, PPN 06/21 and associated guidance and reporting standard for Carbon Reduction Plans.

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 uses the appropriate 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 have been reported in accordance with the published reporting standard for Carbon Reduction Plans and the Corporate Value Chain (Scope 3) Standard³.

This Carbon Reduction Plan has been reviewed and signed off by the board of directors (or equivalent management body).

Signed on behalf of TXM Healthcare Group.



Keiron Gallimore
Group CEO.

Prepared and approved in July 2026 for FY2025 emissions.

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>

GHG disclosure policy statement

To guarantee that the GHG assertion held within the annual GHG disclosure is a true and fair account, the principles of relevance, completeness, consistency, transparency, and accuracy shall be applied.

- **Relevance:** Ensure the GHG inventory appropriately reflects our GHG emissions and serves the decision-making needs of users – both internal and external to the company. Relevant information is identified as potentially necessary for inclusion in the mainstream report, for the purpose of communicating the extent to which we contribute to and are affected (now or in the future) by environmental impacts. GHG emissions shall be treated as material in all cases as a contributor to climate change.
- **Completeness:** Account for and report on all GHG emission sources and activities within the chosen inventory boundary, with disclosure and justification for any specific exclusion. Disclosures are complete if it includes all information that is necessary for an understanding of the matter that it purports to represent and does not leave out details that could cause information to be false or misleading to users.
- **Consistency:** Use consistent methodologies to allow for meaningful comparisons of emissions over time. Transparently document any changes to the data, inventory boundary, methods, or any other relevant factors in the time series. Consistency refers to the use of the same standards, policies, and procedures over time. Comparability enhances the value of information to users; consistency is the means to achieve that objective.
- **Transparency:** Address all relevant issues in a factual and coherent manner, based on a clear audit trail. Disclose any relevant assumptions and make appropriate references to the accounting and calculation methodologies and data sources used.
- **Accuracy:** Ensure accurate and up-to-date records through the development and introduction of procedures to form a reporting framework aligned to the GHG Protocol. The quantification of GHG emissions shall systematically neither over nor under actual GHG emissions, as far as can be judged, and uncertainties shall be reduced as far as practicable. Information shall be verifiable, i.e. characterised by supporting evidence that provides a clear and sufficient trail from monitored data to the presentation of environmental information. The information should be sufficiently accurate to enable users to make decisions with reasonable assurance as to the integrity of the reported information.

TXM Healthcare Group are therefore committed to:

- Subjecting the chosen inventory boundary to regular internal review.
- Continual improvement and update of our policy and procedures to ensure we meet and comply with changes to the GHG Protocol and best practice GHG reporting.
- Regular re-assessment of GHG emission sources or development of action plans to identify and address gaps in data.
- Management of systematic processes to ensure that we meet all relevant provisions within the GHG Protocol standards.

- Inclusion of all relevant GHG emissions and enable meaningful comparisons in GHG information.
- Disclosure of sufficient and appropriate GHG information to allow intended users to make decisions with reasonable confidence.
- Recording, management and reporting of dependable and timely GHG information.
- The reduction of bias and uncertainties as far as is practical.
- Appropriate levels of independent verification and/or assurance.

Organisational boundaries

To define the organisation's boundaries, an operational control approach has been adopted. This approach most accurately reflects the company's activities by focusing on the operations over which it exercises control and provides the greatest opportunity to effectively manage and reduce GHG emissions.

Country	Location	Facility Size	No. of Staff	Activities	Included in scope of GHG Report
UK	Milton Keynes, MK12 5TS	Managed office	31	Recruitment services	Yes

Reporting boundaries

TXM Healthcare Group aims to report all direct (Scope 1) and indirect upstream and downstream (Scopes 2 and 3) greenhouse gas (GHG) emissions and removals, in accordance with ISO 14064-1 and PPN 06/21 requirements.

For the current reporting period, the table below summarises the inclusion of relevant emission categories:

Direct and indirect GHG emissions categorisation Summary (From ISO14064-1 Annex B)	Emissions Scope	Included / Excluded
Direct GHG emissions and removals	1	Included
Direct emissions in tonnes of Co2 from biomass	1	Excluded – No biomass used
Indirect GHG emissions from imported energy	2	Included
Indirect GHG emissions from transportation and other upstream activities	3	Included
Indirect GHG emissions from products used by an organisation	3	Excluded – No products manufactured
Indirect GHG emissions from services used by organisation	3	Included
Examples of subcategorization and identification of associated sources and sinks	3	Included
Indirect GHG emissions associated with the use of products from the organisation	3	Excluded - Not applicable to a healthcare recruitment business.
Indirect GHG emissions from other sources	3	Included

TXM Healthcare Group has quantified direct GHG emissions, where possible, by individual gas type, including CO₂, CH₄, N₂O, NF₃, SF₆, and other relevant greenhouse gases (e.g. HFCs and PFCs), expressed in tonnes of CO₂ equivalent (CO₂e).

Any exclusions where emissions could not be identified or quantified are explained and justified later in this document.

The organisation defines significant emissions as those that:

- Represent the largest quantities in tonnes of CO₂e.
- Offer the greatest potential for emissions reduction.
- Have the highest levels of uncertainty or estimation variance.

Significant emissions are highlighted within the GHG emissions summary section.

Documentation control

All GHG-related records are maintained within the organisation's document management system (e.g. SharePoint) and are subject to formal document control, version management, and audit tracking procedures.

GHG inventory summary of emissions & removals

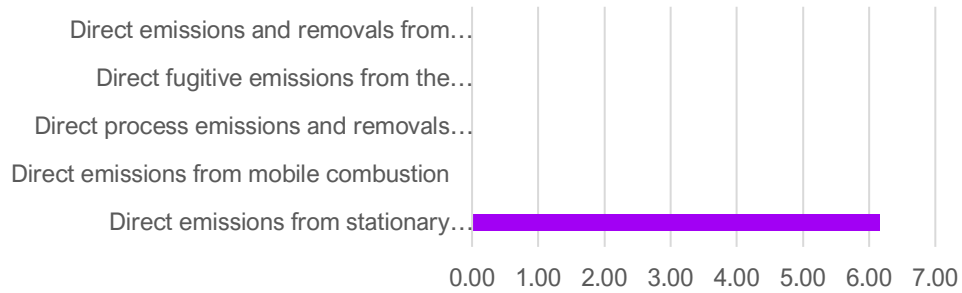
	Reporting Company		TXM Healthcare Group Ltd.									
	Person Responsible for the report		Rhian Nicholas									
	Reporting Period Covered		1st January 2025 to 31st December 2025									
	Organisational Boundaries		See attached GHG Report and Appendix									
	Reporting Boundaries		See attached GHG Report									
Emissions (All data is presented in Tonnes)	Significant (S) / Not Significant (NS)		Carbon Dioxide	Methane	Nitrous Oxide	Nitrogen Trifluoride	Sulphur Hexafluoride	Perfluorocarbons tonnes (Weighted)	Hydrofluorocarbons (Weighted)	Quantitative Uncertainty	Qualitative Uncertainty	
		CO2e	CO2	CH4	N2O	NF3	SF6	PFC	HFC			
Global Warming Potentials (IPCC Fourth Assessment Report) 100 Years				1	25	298	17200	22800	4000	5000		
	Total emissions in tonnes CO2e		57.58	16.78	0.06	0.08	0.00	0.00	0.00	0.00		

1.0	Category 1: Direct GHG emissions and removals		6.16	6.14	0.01	0.00	0.00	0.00	0.00	0.00		
1.1	Direct emissions from stationary combustion	S	6.16	6.14	0.01	0.00	0.00	0.00	0.00	0.00	2%	A
1.2	Direct emissions from mobile combustion											
1.3	Direct process emissions and removals arising from industrial processes											
1.4	Direct fugitive emissions from the release of greenhouse gases in anthropogenic systems											
1.5	Direct emissions and removals from land use change and forestry											
	Direct emissions in tonnes of Co2 from biomass											
	Indirect emissions in tonnes CO2e (2)											
2.0	Category 2: Indirect GHG emissions from imported energy (3)		10.77	10.64	0.05	0.07	0.00	0.00	0.00	0.00		
2.1	Indirect emissions from imported electricity	S	10.77	10.64	0.05	0.07	0.00	0.00	0.00	0.00	2%	A
2.2	Indirect emissions from imported energy											
3.0	Category 3: Indirect GHG emissions from transportation		39.14	27.81	0.03	0.15	0.00	0.00	0.00	0.00		
3.1	Emissions from upstream transport and	NS	0.44	0.44	0.00	0.0	0.00	0.00	0.00	0.00	10%	B

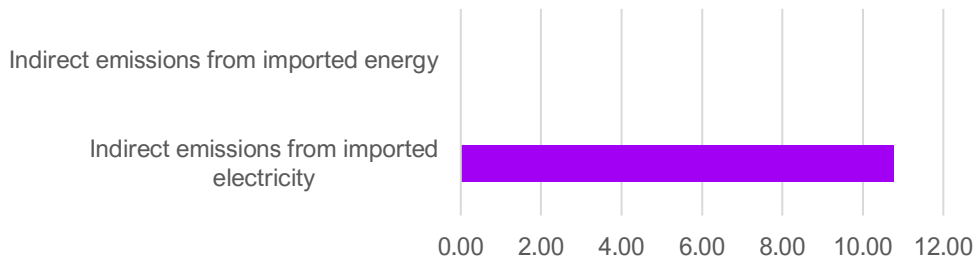
	distribution of goods											
3.2	Emissions from downstream transport and distribution of goods											
3.3	Emissions from employee commuting	S	24.86	24.70	0.02	0.14	0.00	0.00	0.00	0.00	10%	B
3.4	Emissions from client and visitor transport											
3.5	Emissions from business travel	NS	1.56	1.55	0.00	0.01	0.00	0.00	0.00	0.00	10%	B
3.6	Emissions from fuel and energy related activities	S	12.28	1.12	0.00	0.01	0.00	0.00	0.00	0.00	2%	A
4.0	Category 4: Indirect GHG emissions from products used by the organisation		1.51	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
4.1	Emissions from purchased goods											
4.2	Emissions from capital goods											
	Emissions from Services											
4.3	Emissions from the disposal of solid and liquid waste	NS	1.51								2%	A
4.4	Emissions from the use of assets											
4.5	Emissions from the use of services that are not described in the above subcategories											
5.0	Category 5: Indirect GHG emissions associated with the use of TXM products											
5.1	Emissions or removals from the use stage of the product											

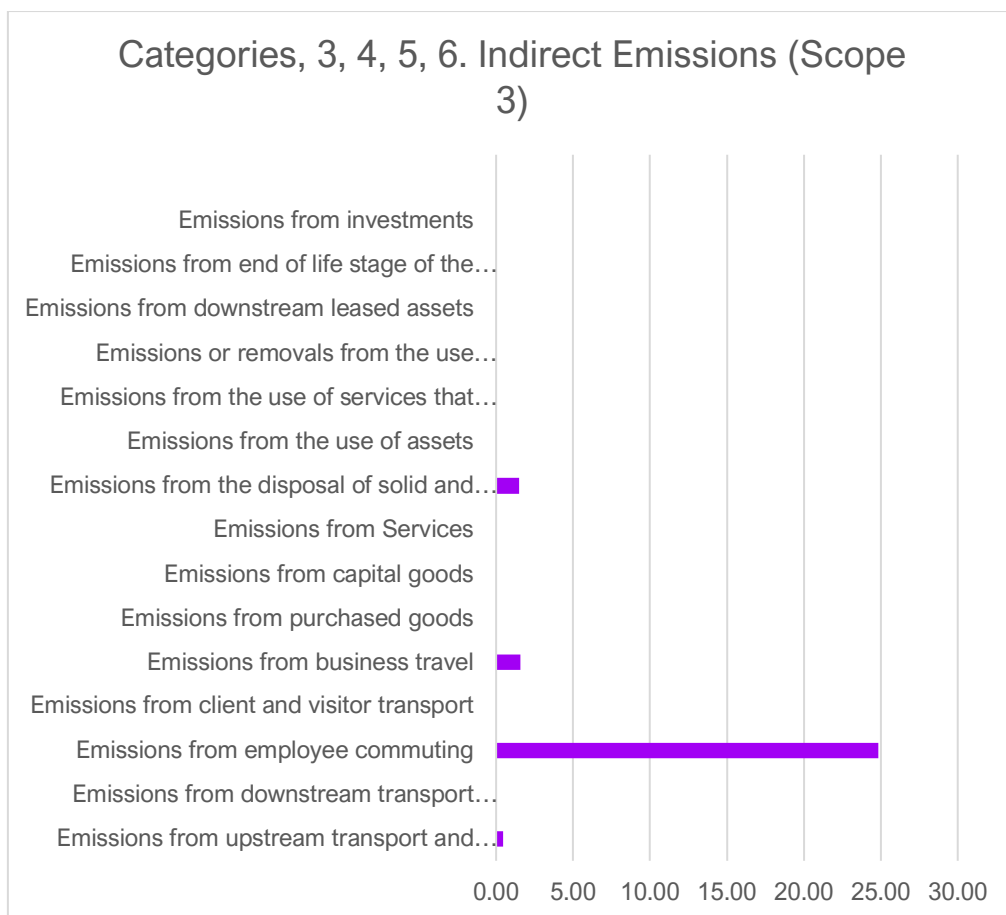
5.2	Emissions from downstream leased assets											
5.3	Emissions from end-of-life stage of the product											
5.4	Emissions from investments											
6.0	Category 6: Indirect GHG emissions from other sources											
Removals (4)												
Direct removals in Tonnes CO2e		0						Tonnes CO2e				
Storage (5), (6), (7)												
Total storage as of end of year in Tonnes CO2e									0	Tonnes CO2e		
Carbon Financial Instruments (8)												
Total Renewable electricity purchased in kWh								0	kWh			
Renewable electricity purchased in kWh with contractual instruments compliant with ISO14064-1 annex E								0	kWh			
Renewable electricity purchased in kWh with contractual instruments <u>NOT</u> compliant with ISO14064-1 annex E								0	kWh			
Offsets from any GHG schemes in Tonnes CO2e								0	Tonnes CO2e			
Other Related Information												
Performance tracking (Emissions and removals by metric, e.g. Tonnes CO2e per annual revenue)									See body of GHG Report			
Base year GHG emission, removals, and stocks; and adjustments to base year									See body of GHG Report			
Disclosure of most significant sources, sinks and reservoirs									See body of GHG Report			
Statement of emission (CO2e) per unit of relevant units									See body of GHG Report			
Statement of emission reduction initiatives									See body of GHG Report			
Significance criteria									See body of GHG Report			
Uncertainty assessment									See body of GHG Report			
Notes												

Category 1: Direct GHG Emissions & Removals (Scope 1)



Category 2: Indirect Emissions from Imported Energy (Scope 2)





Scope 1, Scope 2 & selected Scope 3 emissions

Emission Factors

For Scope 1, Scope 2, and selected Scope 3 greenhouse gas (GHG) emissions involving chemical transformation processes (e.g. combustion from fixed or mobile sources) and indirect emissions from electricity consumption, emissions are calculated using the standard approach. This involves multiplying activity data (such as electricity consumption or distance travelled) by an appropriate emission factor to estimate total GHG emissions:

$$\text{tCO}_2\text{e} = \text{Activity Data} \times \text{Emission Factor}$$

For emission sources that do not involve chemical transformation processes (e.g. fugitive emissions), or where greenhouse gases other than CO₂ are produced, emissions are converted into tonnes of CO₂ equivalent (tCO₂e) using Global Warming Potential (GWP) values from the IPCC Fourth Assessment Report (AR4):

$$\text{tCO}_2\text{e} = \text{Activity Data} \times \text{GWP}$$

TXM Healthcare Group uses the UK Government's GHG conversion factors to convert activity data into tCO₂e. These factors are published annually in June by the Department for Energy, Security and Net Zero and are available here:

<https://www.gov.uk/government/publications/greenhouse-gas-reporting-conversion-factors-2025>

For the reporting period 1 January 2025 to 31 December 2025, the 2025 emission factors have been applied, which remain valid until 1 June 2026.

The table below outlines the methodologies used to calculate environmental performance metrics subject to external verification, with a summary provided for each metric.

Methodology for calculating Scope 1 emissions.

Source	Data measurement & recording	GHG emissions quantification	Estimates & Assumptions
B.2 Category 1: Direct GHG emissions and removals	Invoices are provided by the utility suppliers. TXM Healthcare Group occupies 75% of the building; therefore, 75% of the total utility usage is allocated to TXM Healthcare Group.	Emissions are calculated by applying DESNZ emission factors (kgCO ₂ e/kWh) to gas consumption.	Primary data used, no estimates or assumptions required
	Supplier service reports.	Emissions are calculated by multiplying the mass of refrigerant leaked (kg) by the corresponding Global Warming Potential (GWP) to derive tCO ₂ e.	No refrigerant leaks were recorded during the reporting period.

CO₂ Emissions from Biomass

Source	Data measurement & recording	GHG Emissions Quantification	Estimates & Assumptions
Not applicable as no relevant emission sources have been identified for the reporting period.	Not applicable as no relevant emission sources have been identified for the reporting period.	Not applicable as no relevant emission sources have been identified for the reporting period.	No biomass fuels are used.

Methodology for calculating Scope 2 emissions.

Source	Data Measurement & Recording	GHG Emissions Quantification	Estimates & Assumptions
B.3 Category 2: Indirect GHG emissions from imported energy	Invoices are provided by the utility suppliers. TXM Healthcare Group occupies 75% of the building; therefore, 75% of the total utility usage is allocated to TXM Healthcare Group.	Emissions are calculated by applying DESNZ emission factors (kgCO ₂ e/kWh) to electricity consumption.	Primary data used, no estimates or assumptions required

Methodology for calculating Selected Scope 3 emissions.

Source	Data Measurement & Recording	GHG Emissions Quantification	Estimates & Assumptions
B.4 Category 3: Indirect GHG emissions from transportation	Activity data is collected from suppliers, logistics providers, or internal records, including distance travelled (unit), freight weight (tonnes), and transport mode. Where primary data is unavailable, industry-average assumptions are applied.	GHG emissions are quantified based on the transportation of purchased goods using activity data such as distance travelled (km), mass of goods (tonnes), and transport mode. Emissions are calculated by applying appropriate emission factors (kgCO ₂ e per tonne-km) to the estimated tonne/kilometres.	Average emission factors were applied due to lack of detailed vehicle-specific data and distance travelled in km used.

		Where primary data is unavailable, emissions are estimated using average emission factors.	
	Employee commuting data is measured using a company travel survey. The survey captures commuting distance (km), frequency (e.g., days per week), and mode of transport for employees. Data is aggregated to estimate total annual commuting distance by transport mode. Records are maintained in a central dataset (e.g., spreadsheet or database) with appropriate documentation of assumptions, calculation methods, and data sources.	Emissions are calculated using a distance-based method: total commuting distance (km), derived from employee travel surveys, multiplied by relevant emission factors (kgCO ₂ e/km) for each mode of transport.	Assumptions include working days per year and average commute consistency.
	Business travel data is obtained from internal records and includes total distance travelled.	Emissions are calculated using a distance-based method by multiplying total distance travelled by appropriate emission factors (kgCO ₂ e/km) based on transport mode or average vehicle assumptions.	Company-provided travel data. Vehicle specific and average emission factors applied where vehicle-level data is unavailable
	Fuel and electricity consumption data used within the GHG inventory were utilised as the basis for calculating fuel and energy related emissions. No separate activity data was collected for this emission source.	Emissions were calculated by applying relevant fuel lifecycle, transmission and distribution loss, and energy supply chain emission factors to reported fuel and electricity consumption data.	Emissions were derived from reported fuel and electricity consumption and the application of published emission factors. Where energy consumption was estimated, the same assumptions and allocation methodologies were applied in the calculation of fuel and energy related emissions.
B.5 Category 4: Indirect GHG emissions from products and services used by an organisation	Invoices are provided by the utility suppliers. TXM Healthcare Group occupies 75% of the building; therefore, 75% of the total utility usage is allocated to TXM Healthcare Group.	Emissions are calculated by applying relevant emission factors (kgCO ₂ e per m ³ or tonne) based on waste treatment method (e.g., landfill, recycling, incineration).	Primary data used, no estimates or assumptions required
B.6 Category 5: Indirect GHG emissions associated with the use of products from the organisation			
B.7 Category 6: Indirect GHG emissions from other sources			

Exclusions / Sinks

Source	Scope	Justification for exclusion / notes
c) Direct process emissions and removals from industrial processes.	1	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
e) Direct emissions and removals from land use, land use change, and forestry (LULUCF),	1	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
a) Bioenergy	1	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
b) Biofuel	1	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
c) Biogas	1	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
b) Indirect emissions from imported energy, including GHG emissions related to the production of energy consumed by the organisation through a physical network (steam, heating, cooling, and compressed air), excluding electricity.	2	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
b) Emissions from downstream transport and distribution for goods.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
b) Emissions from capital goods are emissions from goods that are purchased and amortized by the organisation.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
a) Emissions or removals from the use stage of the product include the expected total lifetime emissions from all relevant products sold.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
b) Emissions from downstream leased assets include those from the operation of assets that are owned by the reporting organisation and leased to other entities during the reporting year.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.

c) Emissions from end-of-life stage of the product include the emissions associated with the end of life of all products sold by the reporting organisation in the reporting year.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
d) Emissions from investments are targeting private or public financial institutions.	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.
B.6 Category 5: Indirect GHG emissions associated with the use of products from the organisation	3	All excluded categories are considered not relevant due to the organisation operating as a service-based business with no associated activities.

Changes to quantification methodologies previously used.

During the 2025 reporting period, the methodology used to quantify gas and electricity consumption emissions remained consistent with the approach applied in the 2024 baseline year. Emissions were calculated using utility consumption data and the relevant UK Government greenhouse gas conversion factors. Maintaining a consistent methodology supports meaningful year-on-year comparisons and ensures the reliability and transparency of reported emissions. Ongoing data validation and review processes have further strengthened confidence in the accuracy of the emissions inventory.

Impact of Change

The methodology used to quantify greenhouse gas emissions remained consistent between the 2024 baseline year and the 2025 reporting period, ensuring comparability of reported emissions over time. Emissions were calculated using the same data collection processes, calculation methods, and applicable greenhouse gas conversion factors.

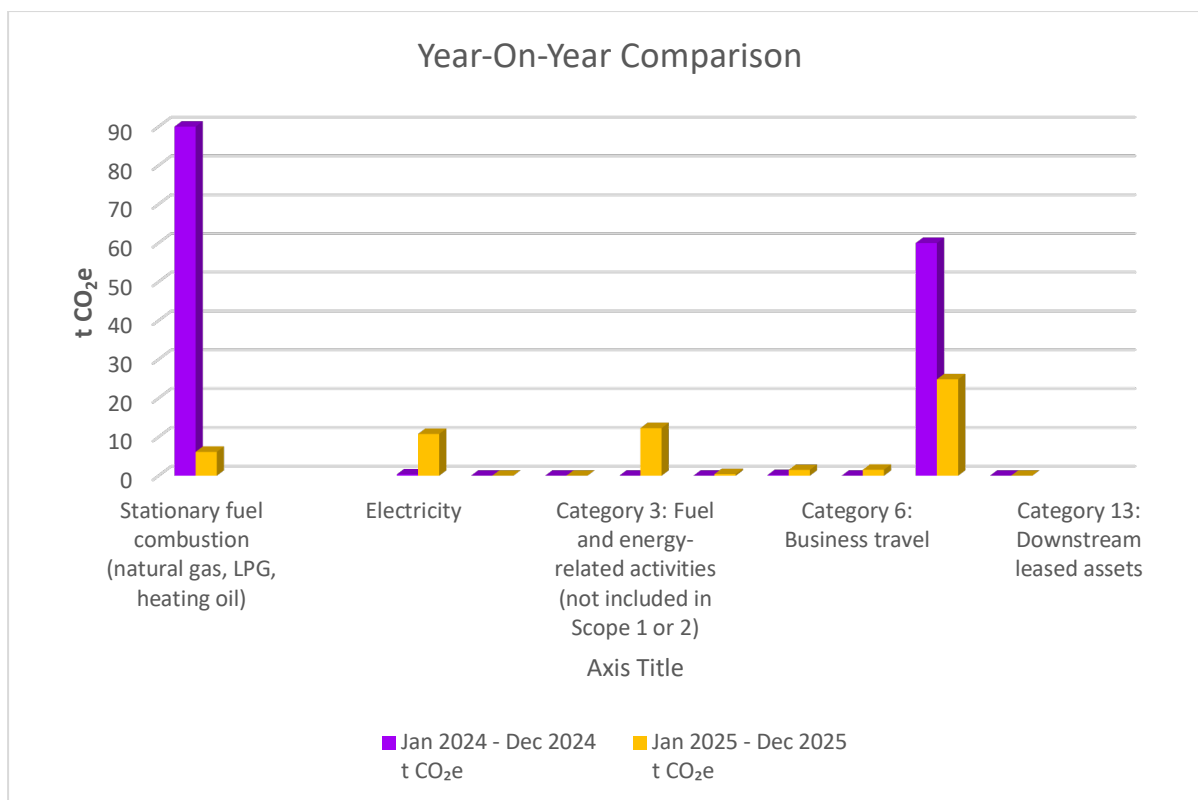
Differences between the 2024 and 2025 reported emissions are therefore primarily attributable to changes in operational activities and business practices, including variations in employee commuting, business travel, workplace occupancy, and energy consumption patterns. The consistent application of the reporting methodology provides confidence that changes in emissions reflect genuine changes in organisational performance rather than changes in quantification methods.

TXM Healthcare Group will continue to apply consistent reporting methodologies and maintain robust data management processes to support accurate emissions monitoring and effective tracking of progress against carbon reduction targets and Net Zero commitments.

Emission differences between reporting periods

The reduction in reported emissions between the 2024 baseline year and the 2025 reporting period is primarily attributable to changes in operational activities and working practices across the organisation. While historical emissions data exists, 2024 was selected as the baseline year as it represents the first reporting period for which emissions were quantified in accordance with the ISO 14064-1 methodology and independently verified. This provides a robust and consistent benchmark against which future emissions performance and carbon reduction progress can be measured.

		Baseline Year	Submission Year
Scope	Category	Jan 2024 - Dec 2024 t CO ₂ e	Jan 2025 - Dec 2025 t CO ₂ e
Scope 1	Stationary fuel combustion (natural gas, LPG, heating oil)	90	6.16
Scope 1	Mobile fuel combustion (company-owned vehicles)		
Scope 1	Fugitive emissions (refrigerants, air conditioning gases)		
Scope 2	Electricity	0.36	10.77
Scope 3	Category 1: Purchased goods and services	0	0
Scope 3	Category 2: Capital goods	0	0
Scope 3	Category 3: Fuel and energy-related activities (not included in Scope 1 or 2)	0	12.28
Scope 3	Category 4: Upstream transportation and distribution	0	0.44
Scope 3	Category 5: Waste generated in operations	0.17	1.51
Scope 3	Category 6: Business travel	0	1.56
Scope 3	Category 7: Employee commuting & Homeworking	60	24.86
Scope 3	Category 8: Upstream leased assets	0	0
Scope 4	Category 13: Downstream leased assets		
		150.53	57.58



Scope 1 emissions decreased from **90.00 tCO₂e** in the 2024 baseline year to **6.16 tCO₂e** in 2025. This reduction was primarily driven by improved consumption measurement following the installation of a new utility meter, together with changes in building occupancy and operational energy demand during the reporting period.

The availability of more accurate consumption data has provided a clearer understanding of the organisation's actual gas usage and has improved the reliability of the emissions inventory. As reporting methodologies remained consistent between periods, TXM Healthcare Group considers the reduction to reflect genuine changes in consumption and improved data quality rather than changes to the quantification approach.

Electricity-related emissions increased from **0.36 tCO₂e** in the 2024 baseline year to **10.77 tCO₂e** during the 2025 reporting period. This increase is primarily attributable to improvements in data quality and reporting accuracy rather than a significant increase in underlying operational emissions. The 2024 baseline electricity figure was derived using estimated consumption data based on a partial six-month period and therefore did not reflect a full year of operational activity. During 2025, a full twelve months of electricity consumption data was available, enabling emissions to be calculated using actual recorded usage and improving the accuracy and completeness of the organisation's emissions inventory.

In addition, electricity consumption was influenced by increased use of office air conditioning and heating systems, together with greater utilisation of electric vehicle charging facilities. As a result, the 2025 figure provides a more representative reflection of normal operational electricity demand. Despite the increase in electricity-related emissions, overall organisational emissions reduced significantly during the reporting period due to substantial reductions in other emission sources, particularly natural gas consumption and employee commuting emissions.

While improvements in data availability and quality have enhanced the accuracy of the 2025 emissions inventory, the same quantification methodology and emission factor approach have been applied across both reporting periods. TXM Healthcare Group therefore considers the reported

results to provide a reasonable basis for year-on-year comparison and for monitoring progress against its carbon reduction targets and Net Zero commitment.

Managing uncertainties & assumptions

The quantification of greenhouse gas (GHG) emissions is subject to inherent uncertainties arising from data availability, estimation techniques, and the application of emission factors. These uncertainties are considered and managed in accordance with ISO 14064-1 principles.

Assumptions

Assumptions applied within the GHG inventory are based on best available data and recognised methodologies, and include:

- Use of secondary data and standard emission factors where primary data is unavailable.
- Assumptions relating to operational activity, including working days, commuting patterns, and travel behavior.
- Estimation of incomplete activity data using conservative and representative proxies

All assumptions are clearly documented, applied consistently, and reviewed periodically to ensure continued appropriateness.

Uncertainty Management Approach

TXM Healthcare Group applies a structured approach to minimise and manage uncertainty, including:

- Prioritisation of primary, activity-specific data where available
- Use of authoritative emission factors (e.g. UK Government GHG Conversion Factors)
- Implementation of data validation and reasonableness checks to identify anomalies.
- Maintenance of documented methodologies, data sources, and calculation approaches to support transparency and auditability
- Application of conservative estimation methods to mitigate the risk of under-reporting

Uncertainty is assessed qualitatively, and no material misstatements are considered to arise from identified data limitations.

Data Limitations and Materiality

Data gaps and limitations are addressed using documented estimation techniques. These are not considered material to the overall GHG inventory and do not significantly impact decision-making or reported emissions totals.

A materiality threshold is applied in line with organisational judgment and verification requirements to ensure that any omissions or inaccuracies do not influence the integrity of reported emissions.

Continuous Improvement

TXM Healthcare Group is committed to ongoing improvement of data quality and reduction of uncertainty through:

- Enhanced data collection processes
- Increased use of primary data sources
- Supplier engagement where relevant
- Periodic methodology review

This approach supports continual alignment with ISO 14064-1 principles of accuracy, completeness, consistency, transparency, and relevance, and ensures the GHG inventory remains robust and fit for verification.

GHG reduction initiatives & internal performance tracking

GHG reduction initiatives

TXM Healthcare Group is committed to achieving Net Zero greenhouse gas (GHG) emissions by 2045, in alignment with TXM Group's sustainability objectives. To support this commitment, the business has established an interim target to reduce its carbon emissions by 80% by 2030, with a particular focus on Scope 3 emissions, which represent the largest proportion of the organisation's carbon footprint.

To achieve these targets, TXM Healthcare Group has implemented and continues to develop a range of carbon reduction initiatives across its operations, workforce, and supply chain.

Travel and Transportation

Reducing emissions associated with employee commuting and business travel remains a key priority. Initiatives include:

- Adoption of hybrid and flexible working arrangements to reduce commuting requirements.
- Promotion of cycle-to-work schemes and active travel options.
- Encouragement in car sharing among employees where practical.
- Increased use of video conferencing and virtual collaboration tools to reduce business travel.
- Consideration of lower-carbon transport options when travel is required.
- Introduce a "train-first" policy for domestic business travel.
- Set approval thresholds for air travel and require justification where lower-carbon alternatives are available.
- Provide EV salary sacrifice schemes for employees.
- Track and report travel emissions by journey, distance, vehicle type, and fuel.
- Encourage the use of public transport through season ticket loans.

Workplace and Operations

The organisation is committed to improving the environmental performance of its workplaces through:

- Offering virtual meeting solutions.
- Investment in energy-efficient office equipment and LED lighting.
- Digital-first and paperless working practices to reduce resource consumption.
- Enhanced recycling facilities and waste segregation processes.
- Regular reviews of energy consumption to identify and implement efficiency improvements.
- Responsible for procurement of office equipment and consumables where possible.
- Source renewable electricity through green energy tariffs.
- Prioritise offices and coworking spaces with strong environmental credentials (BREEAM, LEED, or EPC A/B ratings).
- Reduce standby energy consumption by smart power management.

- Introduce sustainable procurement standards for office supplies and IT equipment.
- Extend the lifespan of IT assets through refurbishment and reuse programmes.
- Purchase energy-efficient laptops and monitors as standard.
- Use cloud providers with published Net Zero and renewable energy commitments.
- Implement IT equipment recycling and take-back schemes.
- Reduce unnecessary data storage and digital waste, which contributes to data centre energy demand.

Employee Engagement and Behaviour Change

Recognising that people play a vital role in reducing emissions, TXM Healthcare Group promotes:

- Sustainability awareness and carbon reduction training programmes.
- Employee engagement campaigns focused on reducing environmental impacts.
- Awareness of electric vehicle (EV) adoption and other low-carbon transport solutions.
- Continuous education to encourage environmentally responsible behaviors across the workforce.
- Establish a network of Sustainability Champions across the business.
- Include sustainability objectives within annual performance reviews where appropriate.
- Launch internal carbon reduction campaigns and challenges.
- Provide employees with guidance on reducing homeworking energy consumption.
- Offer volunteering days for environmental projects and community initiatives.
- Recognise and reward employees who contribute innovative carbon reduction ideas.

Supply Chain and External Engagement

As Scope 3 emissions form a significant part of the organisation's carbon footprint, TXM Healthcare Group is collaborating with suppliers and stakeholders to drive improvements by:

- Reviewing supplier environmental performance and carbon reduction commitments.
- Encouraging key suppliers to monitor and reduce their own emissions.
- Considering sustainability criteria within procurement and supplier selection processes.
- Supporting local environmental initiatives, including tree planting, habitat restoration, and community sustainability projects.
- Collaborating with customers, suppliers, and partners to identify opportunities for reducing emissions across the wider value chain.
- Request annual carbon data from key suppliers.
- Introduce supplier sustainability questionnaires during onboarding and renewal processes.
- Set minimum environmental standards for preferred suppliers.
- Prioritise local suppliers where feasible to reduce transport emissions.
- Collaborate with suppliers to develop carbon reduction plans.

- Encourage suppliers to adopt Science Based Targets or Net Zero commitments.

Policy Development and Compliance

- Establishing and maintaining environmental management policies aligned with ISO 14001 requirements and best practices.
- Implementing operational procedures that improve energy efficiency, minimise waste, and optimise the use of resources across office-based activities.
- Introducing policies that support low-carbon travel, including hybrid working arrangements, public transport incentives, and the transition to electric vehicles where practical.

These initiatives represent a comprehensive and integrated approach to sustainability, embedding environmental responsibility throughout our operations and supply chain while driving continuous improvement towards our carbon reduction objectives.

TXM Healthcare Group will continue to monitor, review, and enhance these initiatives to ensure progress towards its 2030 reduction target and long-term Net Zero commitment by 2045.

Internal performance tracking

TXM Healthcare Group is committed to regularly monitoring and reviewing its carbon reduction performance to ensure progress towards its interim target of an 80% reduction in emissions by 2030 and its long-term Net Zero commitment by 2045. Performance monitoring activities include:

- Annual calculation and reporting of Scope 1, Scope 2, and relevant Scope 3 greenhouse gas emissions.
- Measurement of emissions performance against the 2024 baseline year.
- Review progress against the linear reduction trajectory to ensure the organisation remains on track to achieve its 2030 emissions target.
- Monitoring of key emission sources, including employee commuting, business travel, office energy consumption, and homeworking emissions.
- Tracking business travel activity by transport mode, distance travelled and associated carbon emissions.
- Review of energy consumption data for office and coworking locations where information is available.
- Monitoring supplier engagement with sustainability and carbon reduction requirements.
- Identification and assessment of new carbon reduction opportunities as the business grows and evolves.
- Periodic review of assumptions, methodologies, and emission factors to ensure continued compliance with ISO 14064-1 and PPN 06/21 requirements.
- Reporting of emissions performance and progress to senior management through the annual Greenhouse Gas Emissions Report and Carbon Reduction Plan.

This approach enables TXM Healthcare Group to maintain transparency, support continual improvement, and ensure accountability for achieving its carbon reduction commitments.

Emissions reduction targets

TXM Healthcare Group remains committed to achieving Net Zero greenhouse gas emissions by 2045, in alignment with the NHS and TXM Healthcare Group's sustainability objectives and five years ahead of the UK Government's 2050 Net Zero target.

Following the significant reduction achieved during 2025, total organisational emissions decreased from **150.53 tCO₂e** in the 2024 baseline year to **57.58 tCO₂e**, representing a reduction of approximately **62%**.

Building on this progress, TXM Healthcare Group remains committed to achieving an **80% reduction in emissions by 2030**, equivalent to reducing annual emissions to approximately **30.1 tCO₂e** against the 2024 baseline. To achieve this, the organisation will continue to focus on reducing emissions associated with energy consumption, business travel, employee commuting, and procurement-related activities through the implementation of the carbon reduction initiatives outlined within this report. Progress towards this target will be reviewed annually and adjusted where necessary to reflect operational changes and emerging opportunities for further emissions reductions.

Projected Emissions and Key Assumptions

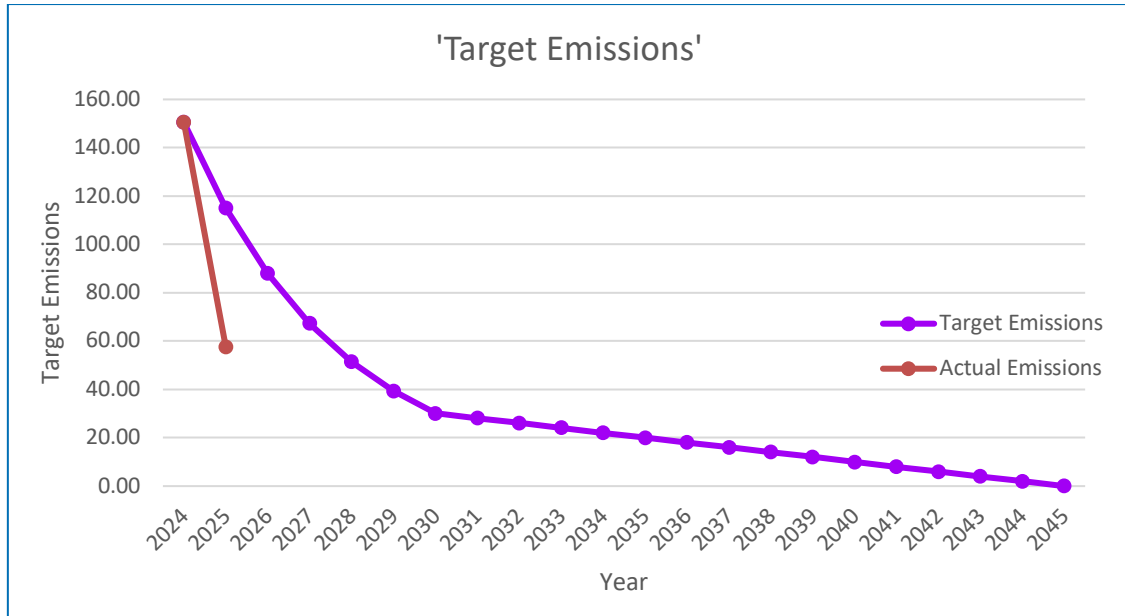
Future emissions performance will be influenced by several factors, including business growth, operational requirements, employee working practices, and external changes such as electricity grid decarbonisation and updates to emission factors.

The emissions projection is based on the following assumptions:

- Organisational and reporting boundaries remain broadly consistent.
- Hybrid and flexible working arrangements continue where operationally appropriate.
- Energy consumption remains at or below current levels through ongoing efficiency measures.
- Business travel is managed in line with operational requirements and carbon reduction objectives.
- Planned carbon reduction initiatives are implemented and maintained.
- No significant methodological changes materially affect year-on-year comparisons.
- External factors, including UK grid decarbonisation and published emission factors, continue broadly in line with current expectations.

TXM Healthcare Group will review its carbon reduction targets periodically to ensure they remain appropriate, achievable, and aligned with the NHS and organisation's Net Zero commitment by 2045. These assumptions are subject to periodic review and may be updated to reflect changes in organisational structure, operational activity, or external conditions.

Progress against these targets can be seen in the graph below:



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: 2024	
Additional Details relating to the Baseline Emissions calculations.	
2024 is the first year of reporting using the ISO14064-1 methodology, therefore this year has been chosen as the baseline year to measure future improvement in GHG emissions against.	
Baseline year emissions: 2024 = 150.53 tCO₂e	
EMISSIONS	TOTAL (tCO ₂ e)
Scope 1	90
Scope 2	0.36
Scope 3 (Included Sources)	60.17
Total Emissions	150.53 tCO₂e

Verification Summary

Item	Detail
Reporting Standard	BS EN 14064-1:2019
Verification Standard	BS EN ISO 14064-3:2019
Verification Body	Robinson Management Services Ltd
Assurance Level	Limited Assurance
Materiality Threshold	5%
Reporting Period	1 January 2025 to 31 December 2025
Organisational Boundary	Operational Control Approach
Verified Scope 1 Emissions	6.16 tCO ₂ e
Verified Scope 2 Emissions	10.77 tCO ₂ e
Verified Scope 3 Emissions	40.65 tCO ₂ e
Total Emissions Verified	57.58 tCO ₂ e

Appendices

ISO14064-3 GHG Verification Statement – Limited Assurance

Robinson Management Services Ltd (Robinson Management Services) has been contracted by TXM Healthcare Group for the independent verification of direct and indirect carbon dioxide equivalent emissions (CO₂e) as provided in data provided by the company for the FY 2025 calendar year reporting period to a limited level of assurance.

This verification exercise has been performed to the ISO 14064-3 standard.

Roles And Responsibilities

The management of TXM Healthcare Group is responsible for the organisation's GHG information system, the development and maintenance of records and reporting procedures in accordance with that system, including the calculation and determination of GHG emissions information.

It is RMS's responsibility to express an independent GHG verification opinion on the emissions as provided in the 2025 submission for the period 1st January 2025 to 31st December 2025.

Description of Activities

The organisational boundary was established following the operational control approach. TXM Healthcare Group undertake their activities from offices in the UK.

Emissions typically arise from:

- Gas consumption in Milton Keynes office
- Electricity consumption in Milton Keynes office.
- Fuel related activities.
- Upstream transport and distribution.
- Water consumption and waste related activities.
- Business travel.
- Employee commuting emissions.

Objectives

The objectives of this verification exercise were, by review of objective evidence, to confirm whether any evidence existed that the GHG emissions as declared in the organisation's GHG assertion were not: accurate, complete, consistent, transparent and free of material error or omission in accordance with the criteria outlined below.

Criteria

Criteria against which the verification assessment was undertaken in line with the following reporting standard:

- ISO 14064-3:2019; Greenhouse gases — Part 3: Specification with guidance for the verification and validation of greenhouse gas statements.

Level Of Assurance and Materiality

The level of assurance agreed is that of limited assurance. A materiality level of 5% was applied. Note that assessment of compliance and materiality was undertaken against the stated calculation methodology.

Conclusion & Verification Opinion

We planned and performed our work to obtain the information, explanations, and evidence that we considered necessary to provide a limited level of assurance based on the process and procedures conducted. We conducted our verification with regards to the GHG assertion of TXM Healthcare Group, which included assessment of the GHG information system and monitoring and reporting methodology.

This assessment included the collection of evidence supporting the reported data and multiple checks relative to the provisions of the legislation, reporting standard and calculation methodologies referenced in the verification criteria. This statement shall be interpreted with the GHG assertion of TXM Healthcare Group as a whole. Robinson Management Services' approach is risk-based, drawing on an understanding of the risks associated with calculating GHG emission information and the controls in place to mitigate these risks. Our examination included assessment, on a limited sample basis, of evidence relevant to the reporting of emission information. Based on the data and information provided by TXM Healthcare Group and the processes and procedures conducted, Robinson Management Services concludes with limited assurance there is no evidence that the GHG assertion:

- Is not materially correct.
- Is not a fair representation of the GHG emissions data and information; and
- Is not prepared in accordance with the criteria listed above.

It is our opinion that TXM Healthcare Group has established appropriate systems for the collection, aggregation, and analysis of quantitative data for determination of these GHG emissions for the stated period and boundaries.

The GHG information for the period 1st January 2025 – 31st December 2025 is verified by Robinson Management Services to a limited level of assurance, consistent with the agreed verification scope, objectives, and criteria.

100% of emissions by scope are verified as follows: Reporting Period: 1st January 2025 - 31st December 2025.

- Scope 1 Reported Emissions: **6.16 tonnes CO₂e**
- Scope 2 (location based) Reported Emissions: **10.77 tonnes CO₂e**.
- Scope 3 Reported Emissions: **40.65 tonnes CO₂e**

Observations

- Based on our work, Robinson Management Services considers that material GHG sources are appropriately identified and reported on.
- All errors in reported data identified during the verification process have been duly corrected.

Attestation: [Paul Robinson. Lead Verifier On behalf of Robinson Management Services Ltd.](#)

No member of the verification team has a business relationship with TXM Healthcare Group, its directors or employees beyond that required of this assignment. We conducted this verification independently and to our knowledge there has been no conflict of interest.