# State of sustainability in the healthcare sector

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### **Disclosures**

- Board co-chair of Healthcare Without Harm & Practice Greenhealth
- No financial conflict of interest









## **Objectives**

- Describe the health sector's contribution to climate change
- Explain health sector's opportunities for climate action and leadership
- Give examples of opportunities for physicians and trainees to get involved





## Global health care climate footprint



https://noharm-uscanada.org/ClimateFootprintReport







## **Health Care's Climate Footprint**

	Health care country/region emissions by ranking	Total country/region emissions by ranking
1	United States	China
2	China	United States
3	European Union	European Union
4	Japan	India
5	Russia	Russia
6	Brazil	Japan
7	India	Brazil
8	South Korea	Canada
9	Canada	South Korea
10	Australia	Mexico
	Mexico (11)	Australia (17)

Table 1: Top ten health care carbon emitters compared to total top ten emitters





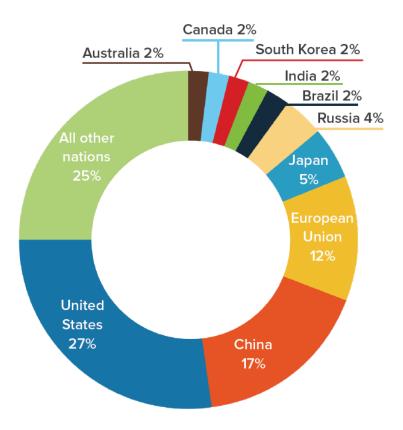
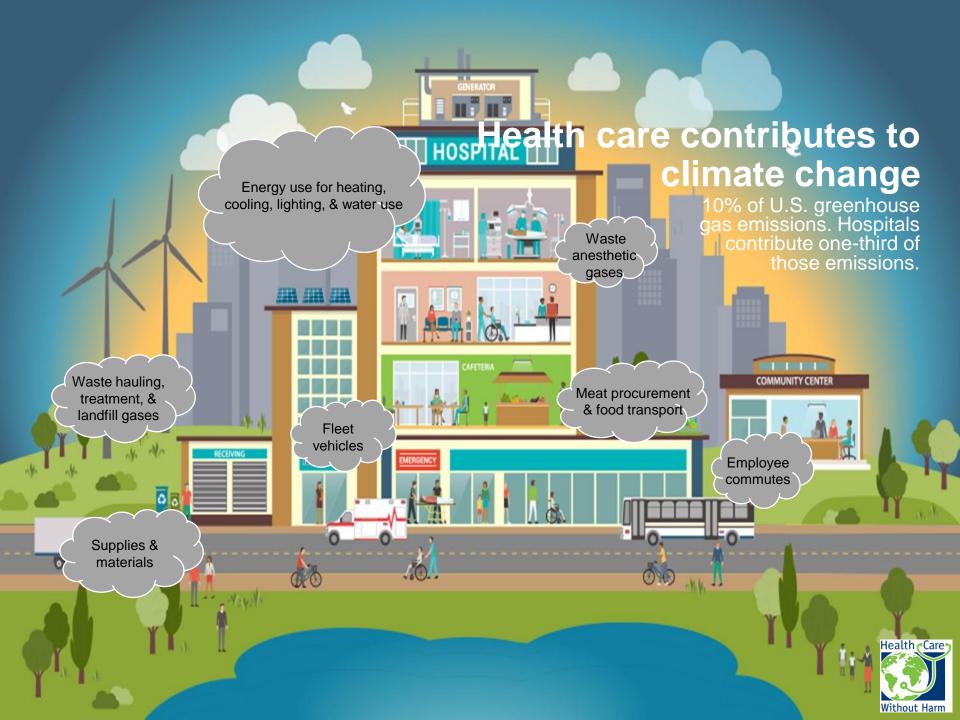


Figure 8: Top ten emitters as percentage of global health care footprint.



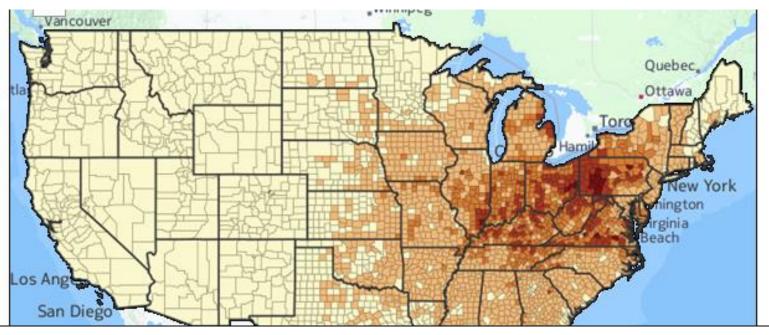




# Our carbon footprint



## Our energy use directly impacts public health

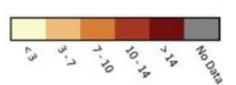


\*Healthcare is 2nd most energy-using sector in the U.S.:

Consume 10% of energy used in U.S. commercial buildings Spend \$8 billion/year (Department of Energy)

~\$600 million/yr in healthcare costs related to increased respiratory disease burden

National Mortality Effects from Existing Powerplants (Annual Persons, per 100,000)



Annual Mortality Due to Individual Power Plants (Persons)







# **Energy efficiency saves operating costs**



Do we have an energy efficiency goal?
What is our facility's Energy Star score?
Have we undertaken common energy efficiency measures
(e.g. retrocommissioning, lighting retrofits, computer power mgmt, behavior change)?
What OR energy efficiency measures have we implemented (LED lights, ventilation)?
Do we have a green building policy that specifies goals for energy performance?



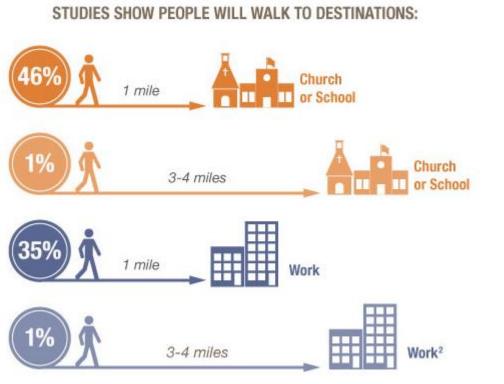


200 participants representing 18,000 health care facilities in 31 countries





### Better Transportation Options = Healthier Lives





Do we have incentives for commuting via public transit, walking, biking, carpooling? Do we have flexible parking options for those who can use alternatives to single-carcommuting sometimes?

Do we have incentives for employees to live near where they work?

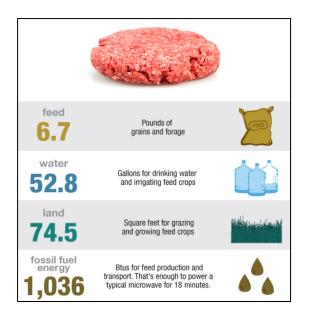
# Supply chain

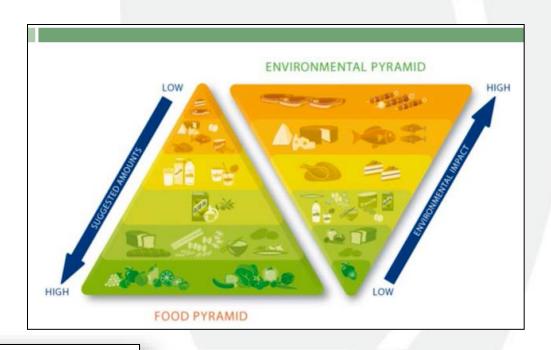
- Supply chain is the 2nd largest expense in health care following labor and may overtake labor by 2022 (Strategic Marketplace Initiative, 2014)
- Purchasing volume of the top 4 health care group purchasing organizations is over \$189 billion (Becker's Hospital Review, 2017)





## Healthier food purchasing





# THE **COOL FOOD** PLEDGE

Helping companies, universities, hospitals, and public facilities provide diners more of what they want while slashing food-related greenhouse gas emissions

https://noharmuscanada.org/coolfoodpledge

Decrease meat purchasing by 20% from baseline Focus on decreased red meat on menus Local purchasing [Antibiotic stewardship]

# Waste

- U.S. hospitals generate 14,000 tons of waste/day<sup>1</sup>
- 20-25% is plastic waste <sup>1</sup>
- 15% is infectious or hazardous waste <sup>2</sup>
- >30% from OR <sup>2</sup>
- 10-15% is food waste <sup>2</sup>

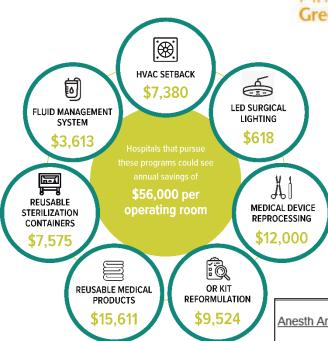


- 1. <a href="https://www.hprc.org/hospitals">https://www.hprc.org/hospitals</a>
- 2. <a href="https://practicegreenhealth.org">https://practicegreenhealth.org</a>



## **Greening the OR**





Though a tiny percentage of a hospital's total physical footprint, operating rooms have a huge impact on hospital budgets. Operating rooms, on average:

- •Drive up to 60 percent of a hospital's revenue
- •Are responsible for 40 to 60 percent of the organization's total supply costs
- •Produce more than 30 percent of a facility's waste and two-thirds of its regulated medical waste
- •Can consume three to six times more energy per square foot than anywhere else in the facility

Anesth Analg. 2012 May; 114(5):1086-90. doi: 10.1213/ANE.0b013e31824f6940. Epub 2012 Apr 4.

Life cycle greenhouse gas emissions of anesthetic drugs.

Sherman J1, Le C, Lamers V, Eckelman M.

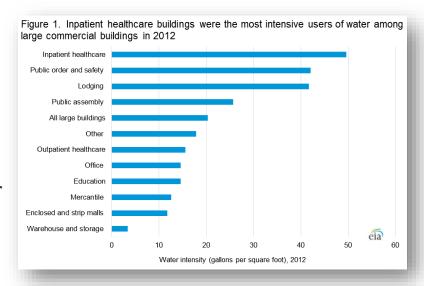
Author information

Desfluorane 20x as potent of a GHG as sevofluorane Waste anesthetic gas capture HVAC setback LED surgical lighting retrofits Waste management



# Water

- Inpatient health care facilities are water intensive
- Contributes to climate change because of energy required to distribute, heat and chill water



https://www.eia.gov/consumption/commercial/reports/2012/water/



# Pharmaceuticals

- U.S. is largest consumer of pharmaceuticals worldwide (Wee, 2017)
- Pharmaceutical packaging is a \$20 billion dollar industry. Most is recyclable. (Zadbuke, Shahi, Gulecha & Padalkar, 2013)
- Pharmaceutical industry has larger carbon footprint than automotive industry (Belkhir & Elmeligi, 2019)
- Contribute to health care's carbon footprint, 21% of health care's carbon footprint in UK with N20 inhalers representing 4.3% (Sustainable Development Unit, 2012)





# On the front line of climate change and pandemics







## Primary Protection: Enhancing Health Care Resilience for a Changing Climate



Disaster preparedness & climate change impacts Supply chain resilience Investing in community resilience





U.S. Department of Health and Human Services

https://toolkit.climate.gov/





# Dedication to place – a call to action

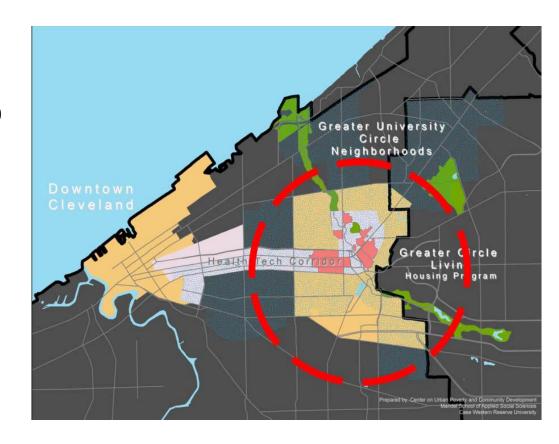
#### **Greater University Circle**

Median household income of \$18,500

24% Unemployment

#### **Infant Mortality**

- Ohio 6.4/1000 (Caucasian)
- Ohio 14/1000 (African- American)
- Cuyahoga County 8.7/1000
- University Circle 18.6/100





# **GUC** institutions

- 17 major institutions, 60K full-time jobs (1/8 all jobs in Cuyahoga County)
- Cleveland Clinic (CCF) & University Hospitals (UH) largest employers in the county
- In 2005, \$3BN in institutional development was being planned ->
- Cleveland Foundation convened "anchor institutions" (UH, CCF, Case Western Reserve University, City of Cleveland) to create "Greater University Circle Initiative" (GUCI)
  - How can we leverage economic power of these institutions to build inclusive wealth & healthy neighborhoods in GUC?
- Live Local, Hire Local, Buy Local



# Sustained culture change

Community benefits	Institutional benefits
Improved community wellbeing	increases charitable giving and enhances staff morale
An engaged and empowered local community	facilitates community buy-in for insti- tutional agendas and creates long-term community partners and institutional allies
Ongoing commitment to community building	helps justify tax exemptions and improves relationships with government leaders
New jobs created by sourcing locally	reduces an institution's carbon footprint and improves sustainability
Increased capacity of local suppliers to meet supply chain needs	creates a resilient, flexible, and customized supply chain



#### **Episodic medical service**

• Reactive, symptom-focused care



#### Total health care

- Team-based care
- Integrating social, behavioral and environmental health determinants
- Leverage opportunities for upstream intervention



#### Traditional health care

- · Isolated from the community
- Come-to-us mentality



## Community-integrated anchor institution

- Multi-sector collaboration
- Anchor that supports community well-being – live local, buy local, hire local





## U.S. Health Care Climate Council Members

**AdvocateAuroraHealth** 





































**UC** Health



# Health Care Climate Council

Health system leaders driving the transformation to climate-smart health care



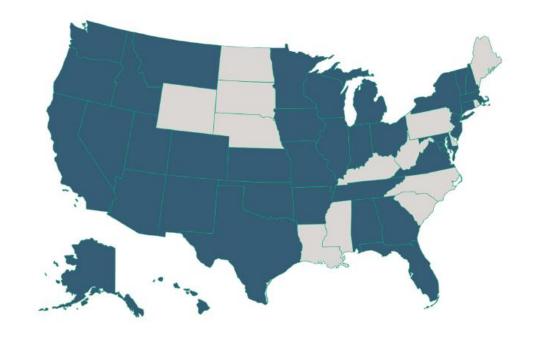
500 hospitals

75 million patients served annually

1 million employees

Over \$215 billion in annual operating revenue

**36** states







As the only sector with healing as its mission, health care has an opportunity to use its ethical, economic, and political influence to create ecologically sustainable, equitable, and healthy communities.







PLATINUM

## **About**

Text

Climate change is one of the most important issues of our time and has major health and healthcare implications. As some of the most respected professionals in America, doctors and nurses have a crucial part to play in raising awareness of the public about these issues. To facilitate the medical community's awareness raising efforts, the Medical Society Consortium on Climate Change and Health (the Consortium) brings together associations representing 400,000 clinical practitioners to carry three simple messages:

- Climate change is harming Americans today and these harms will increase unless we act;
- The way to slow or stop these harms is to decrease the use of fossil fuels and increase energy efficiency and use of clean energy sources; and
- These changes in energy choices will improve the quality of our air and water and bring immediate health benefits.

This is especially important to vulnerable Americans and communities who are experiencing a disproportionate impact today from climate change.

https://medsocietiesforclimatehealth.org/

HOME > ADVOCACY > ADVOCACY IN ACTION > CLIMATE CHANGE TOOLKIT

**MEETINGS & COURSES** 



# Climate Change Toolkit

Resources to help reduce energy use and greenhouse gas emissions in

Physicians can play a substantial role in addressing climate change by advocating for climate mitigation policies and educating themselves about climate change and how it affects public a the potential health threats it may pose to their community.

To learn more about how climate change affects health, see Climate Change and Health: A Po American College of Physicians 🖾. The paper lays out the evidence of how our changing plan impacting and will continue to impact human health.

ACP has developed a Climate Change and Health Action Plan to help our members take initiat

# Health Care Without Harm Physician Network





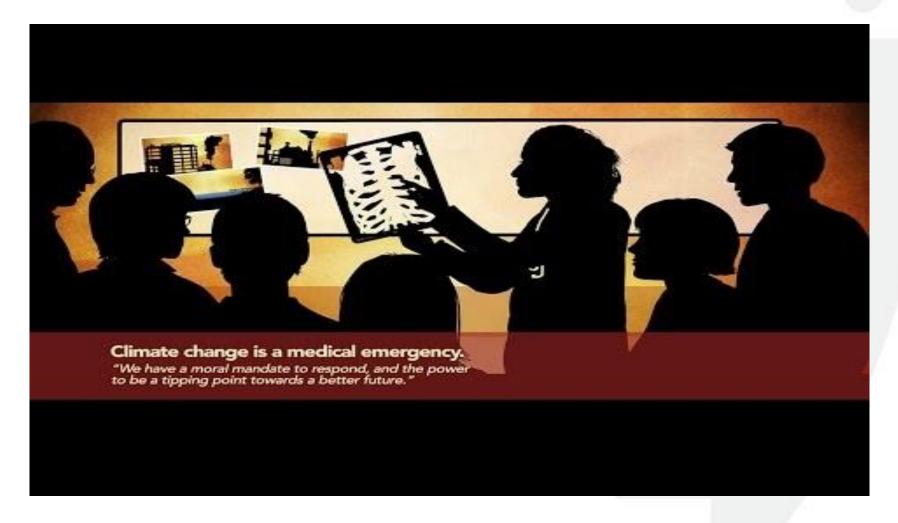
https://noharm.org/physiciannetwork



# MEDICAL STUDENTS FOR A SUSTAINABLE FUTURE (MS4SF)

- We are medical students across the U.S. dedicated to action around the health impacts of climate change, with projects in the following areas:
  - **Research** in climate & health, connecting members with available mentors
  - Advocacy for environmentally just policies in the interest of future patients
  - Curriculum development for medical students to integrate climate & health
  - **Climate-smart** green healthcare system practices
  - Plant-based health emphasizing wellness through sustainably-sourced food
  - Connect with MS4SF to view member publications, project profiles, advocacy updates, ways to partner with us, and get involved!
    - Email: ms4sf.med@gmail.com
    - Website: ms4sf.org
    - Twitter, Instagram, & Facebook: @MS4SF



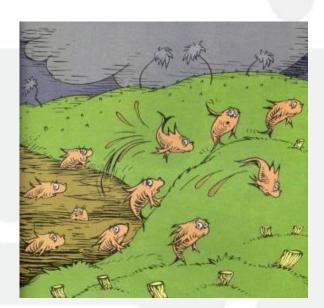






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## Thank you!

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