

Draft Sustainable Healthcare Module Public Consultation, The Australian Commission on Safety and Quality in Health Care GPO Box 5480, Sydney NSW 2001

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HCCA submission to the Australian Commission on Safety and Quality in Health Care, Draft Sustainable Healthcare Module Public Consultation

The Health Care Consumer's Association appreciates the opportunity to provide feedback on the Draft Sustainable Healthcare Module Public Consultation. For this submission the **Draft Sustainable Healthcare Module** was shared with HCCA staff as well as HCCA members.

The Health Care Consumers' Association (HCCA) recognises the importance of considering the impact climate change, as well as the importance of a sustainable environment on the provision of healthcare. We support the development of a sustainable healthcare module to guide healthcare providers in reducing their environmental footprint, integrating sustainability into clinical practice, and engaging patients and communities to promote a sustainable healthcare system. We hope that this module will be a valuable tool for improving the sustainability and resilience of healthcare systems, as well as supporting the health and well-being of people in the face of climate change.

We would be very pleased to meet with you to discuss this feedback and work with you if helpful.

Yours sincerely

Darlene Cox

Executive Director

31 January 2023



SUBMISSION

ACSQHC Draft Sustainable Healthcare Module

31 January 2023



Background

The **Health Care Consumers' Association (HCCA)** is a health promotion agency and the peak consumer advocacy organisation in the Canberra region. HCCA provides a voice for consumers on local health issues and provides opportunities for health care consumers to participate in all levels of health service planning, policy development and decision making.

HCCA involves consumers through:

- consumer representation and consumer and community consultations;
- training in health rights and navigating the health system;
- community forums and information sessions about health services; and
- research into consumer experience of human services.

HCCA is a Health Promotion Charity registered with the Australian Charities and Notfor-profits Commission.

Introduction and submission overview

The proposed Sustainable Healthcare Module (the Module) is a valuable tool that aims to assist Australian healthcare providers in establishing long-term strategies for improving environmental sustainability. It is imperative for healthcare providers to stay up to date with regards to environmental sustainability in order to safeguard the health and well-being of both patients and communities, as well as to ensure the sustainability of the services they provide. We hope our consumer feedback will contribute to the development of the Sustainable Healthcare Module and assist the Australian Commission on Safety and Quality in Health Care (ACSQHC) in promoting and integrating environmental sustainability within healthcare structures, processes and practices.

In this submission, we offer general comments on the Module, addressing the five questions provided:

- Is there a need for the Module as it applies to health service organisations?
- Do the actions in the Module address the key sustainability and climate-resilience concerns?
- Are the language and the format of the document appropriate?

- How will the actions in the Module support your organisation to mitigate the impacts of climate change, adapt, build climate-resilience and identify opportunities to improve the sustainability of health services?
- Should the Module be assessed by independent external accrediting agencies?

1. General Comments

Consumer feedback noted the statement in ACSQHC consultation documentation that Australia has "one of the best healthcare systems in the world" as unsubstantiated. We suggest that if this is going to be included in the module, there needs to be a footnote or substantiating evidence to support this assertion, or it should be removed, as it is not necessary to the context of a sustainable healthcare module.

1.1. Is there a need for the Module as it applies to health service organisations?

Yes - HCCA recognises the importance of considering the impact of environmental sustainability and climate change on the provision of healthcare. The relationship between the health of consumers, communities, and the planet is well-established. Climate change has the potential to exacerbate existing health issues and create new ones, making it a crucial responsibility of healthcare providers to mitigate these impacts and promote healthy and sustainable communities in the long-term.

As outlined in the Sustainable Healthcare Module, the implementation of a sustainable healthcare framework is essential in promoting the delivery of high-value care while reducing carbon emissions. The Module serves as a valuable guide and form of accountability for healthcare providers to consider the environmental impact of their practices. National, standardised approach to environmental sustainability need to be adopted across Australian health services. This is a pressing concern for the future. ²

Incorporating sustainability and addressing climate change in health care operations not only benefits the community, but also improves the resilience and long-term cost-effectiveness of health care providers. Adopting a national, standardised approach to environmental sustainability in healthcare, as outlined in the Sustainable Healthcare Module, is crucial in addressing the pressing issue of climate change and ensuring the provision of high-quality care for consumer and communities.

In general, the Module presents a clear goal and provides reasonable standards and proposed strategies to guide organisations in addressing important environmental sustainability issues. HCCA and its members are committed to implementing its principles and guidelines to advocate for the mitigation of the impacts of climate change on the provision of healthcare services. We fully support the inclusion of sustainability considerations in strategic planning and clinical decision-making.

Health care organisations also need to be at the table for broad carbon reduction strategic change discussions. Often key areas where action is required to reduce carbon emissions in health are in this broader context eg transferring power generation to alternative energy, planning the transition away from fossil gas, reducing transport and industry dependence on fossil fuels. While individual hospitals can make considerable change in other areas, these broader changes can make a difference faster and with a larger impact.

1.2. Do the actions in the Module address the key sustainability and climate-resilience concerns?

No – while the module covers important actions such as strong leadership, priorities, initiatives, training, and reporting, the 'Out of scope' topics are key contributors to climate change within the health care sector and must not be excluded.

We believe these issues need to be considered within the module to effectively address sustainability and climate resistance concerns. There needs to be emphasis on the fact that services must consider these out-of-scope items as soon as possible. Services should acknowledge and act on their consumption (high emitting energy sources, single use materials, plastic, unsustainable procurement) as well as their production of waste (food, chemical, plastic, biological). Services must be encouraged to consider and prioritise the wider impacts beyond their buildings and workforce.

A more comprehensive module should include topics such as:

- How to create and commit to reduction targets for GHG emissions, waste, water, energy, and chemical reduction using both industry benchmarks and clear timelines
- 2. Guidance on how to carry out quality data collection and transparent reporting in areas such as:³
 - Greenhouse gas emissions (Scope 1,2 & 3)¹
 - Food, chemical plastic and biological waste
 - water use
 - energy use
 - procurement and suppliers

A commitment to regularly reviewing consumption, waste, and emissions in these areas should also be included. This aligns with Action 3 of the module.

3. A clear policy response to health care's carbon footprint. Service-wide policies help standardise practices across all departments, create clear

¹ Scope 1, 2 and 3 emissions refer to the direct emissions produced on site at health service organisations, as well as the emissions produced from supply chains and waste. For more information on this topic please see: <u>FAQ.pdf</u> (ghgprotocol.org)

- expectations of climate action and provide guidance on how to be sustainable within services. There should be policies focusing on sustainable procurement, staff training and waste management. These policies should contain descriptions of key issues and guidance on how to respond to these issues.
- 4. Commitment to reducing indirect emissions. The sustainability module clearly focuses on the direct emissions created. Health care services should be addressing the impact of indirect emissions such as business travel, employee commuting, waste disposal and purchased goods and services. Purchased goods and services can be anything an organisation buys for their operations (Personal, protective equipment, meals, gowns, equipment, beds) or any services they pay for (for example IT storage systems, ordering systems, financial systems, food delivery).

Scope 3 commitments could include:

- Sustainable procurement data collection. Procurement relates to building supplies, medical and personal protective equipment, food, medicine production, textiles, and machinery. It covers all parts of providing healthcare and maintaining facilities and is therefore a large contributor to the health care systems. Data shows that 70% of Australia's health care greenhouse gas emissions are from clinical care and consumables. However, there is currently very little clear data on how much scope 3 purchased goods and services in Australia's health care system contribute to emissions. ⁴ The first step to sustainable procurement is gathering data to understand how to best target emission reduction efforts in this area. We believe the module should be encouraging services to address this knowledge gap. Data from the UK shows that procurement is estimated to contribute 60-80% of GHG emissions in the health system. ⁵ This indicates that procurement of goods is likely to account for a majority of emissions in Australian health care and should be seriously considered as a key issue for climate resilience and sustainability.
- Promoting more sustainable transport options such as incentivising carpooling amongst staff and visitors, ensuring public transport is readily available, making commitments to reducing unnecessary business trips, encouraging broader use of on-line meeting and telehealth services, where appropriate, providing charging stations for EVs.
- Reducing the amount of plastic, hazardous waste and compostable rubbish going to landfill, and reducing the waste of high quality environmental resources e.g. drinking water to flush toilets, could be addressed via switching to more environmentally friendly materials and systems. For example:
 - Single use plastic to compostable drug trays, food packaging

- Chemical cleaning to steam sterilising, where appropriate
- Using rainwater for garden irrigation and toilets
- Reducing food waste via compost systems, room service model or using external systems to reduce waste eg. Go terra, Oz Harvest
- Disposable gowns to reusable textiles

Consumer feedback also highlighted that hospitals should also recognise and address the impact on indirect emissions of multiple commutes made by consumers being turned away from a service, even after attending by prior appointment (this is in addition to the personal impacts where consumers have been required to fast before attendance, which is subsequently postponed, for example). Anecdotal evidence suggests this is not a rare occurrence and that reviewing appointment and notification systems is necessary for improvement.

- 5. A commitment to campaigns around community health due to climate risk e.g. extreme heat, bushfire smoke, pollution, high pollen count days, mental health, pandemics. An understanding about how climate change and health care are affecting public health should also be included in staff training to help facilitate these conversations and campaigns.
- **6.** A commitment to sustainable design if new buildings are constructed. This could include:
 - Moving away from gas as an energy source
 - Using recycled or sustainable building materials
 - Considering ventilation, insulation, passive heating and cooling
 - Including green spaces
 - Disease control measures
- **7. Have a staff member or team responsible for sustainability issues.** While it is fantastic to see clinical staff get involved in grassroots climate action within the workplace, sustainability is a large enough issue that there should be specific staff members or teams assigned to work such as data collection, training, reporting, implementing initiatives, sustainable procurement, waste and energy reduction measures and maintaining sustainability networks. This would further support Action 1, and Action 4 to strengthen the governing body's climate action measures.
- 8. Encouraging health services to implement innovative and integrated models of care. Addressing climate change requires cooperation among government, businesses, academics, and communities to develop connected

solutions that consider the relationship between infrastructure design, health, and climate policy. Integrated and innovative models of care, such as coordination between healthcare areas and providers, changes in clinical guidelines to reflect environmental sustainability, and the use of new technologies, have the potential to deliver benefits in terms of environmental sustainability.^{6,7,8}

9. Links to further information on climate action, reporting and networks.

While health and climate are heavily linked, services should not necessarily be expected to be experts on climate action. To resolve this issue, services should be encouraged to join networks and consult resource hubs such as the <u>Global Green and Healthy Hospitals (GGHH)</u>, GGHH Pacific Region and <u>Health Care without Harm</u>. They should also be encouraged to compare their efforts to global climate change measures eg. <u>Science Based Targets Initiative</u>, <u>Carbon Disclosure Project</u>. While the Consultation Paper for this module highlighted innovative initiatives in the field of sustainable healthcare across Australia, services should be creating ambitious and international standard goals and commitments in response to the climate crisis. Considering the extreme climate risk Australia faces, services should be encouraged to aim high.

1.3. Are the language and the format of the document appropriate?

The notion of sustainability encompasses various dimensions, including economic, environmental, ethical, and social sustainability. The Module should clearly define the scope of sustainability being addressed and this should be reflected in the title of the module. Furthermore, consumers have expressed concern that emphasis on environmental sustainability will detract from the prioritisation of quality and safety measures in healthcare. It is therefore important that the module clearly demonstrate the correlation and importance of environmental sustainability and quality and safety in healthcare and the positive impact this can have on the well-being of consumers.⁹

We support the concept of standardised assessment and healthcare providers monitoring progress over time. The format of the table presented in the Module needs to be restructured to improve clarity and we make the following suggestions¹⁰:

- Renaming the column for "actions" to be "goals" or "desired outcomes"
- Adding a separate column explicitly for indicators, which outlines how each strategy can be measured for better monitoring and evaluation.

HCCA strongly supports the intent to include consideration of sustainability in strategic planning and clinical decisions as identified in Action 1, but we note there is repetition in the strategies listed.

Action 4 could be reworded to "Collects feedback from the workforce on training to improve sustainability outcomes and how that has impacted their practice" in order to emphasise the importance of gathering feedback from the workforce in order to

evaluate the impact of sustainability training on their practice, and to improve sustainability outcomes.

It is recommended that the module clearly define the term "health service organisations" within the glossary or explanatory note. The module should clarify whether it targets the same organisations that national standards apply to, and specifically mention which types of health service providers are included, such as general practices, community pharmacies, hospitals, day surgeries, community health centres, among others. If the scope of the module is limited to certain health services, it should be clearly stated that other parts of the health system, including pathology labs, private imaging, general practice, and private allied health, also have a responsibility to address environmental sustainability^{11,12}.

It is important that the language used in the module is inclusive and respectful of all individuals who may engage with the health system. For example, the term "consumers" instead of "patients" should be used when referring to individuals who access health services. ¹³

Where consumers or carers have a disability or mobility limitations from injury, disease or caring responsibilities, their specific needs e.g. transport, parking and access, need to be considered carefully in sustainability planning to ensure they are not disadvantaged.

1.4. How will the actions in the Module support your organisation to mitigate the impacts of climate change, adapt, build climate-resilience, and identify opportunities to improve the sustainability of health services?

The Sustainable Healthcare Module serves as a foundation for HCCA to identify the commission's main environmental sustainability priorities and to facilitate the overall goal of incorporating sustainability and climate resilient practices within existing structures and processes in the healthcare system, while ensuring partnerships with consumers and other key stakeholders. As a health consumer advocacy organisation HCCA plays a vital role in promoting environmental sustainability in the healthcare system. The module has potential to support HCCA in the following ways:

- Raise awareness: by educating healthcare consumers and providers about the importance of sustainable practices in the healthcare system. As well as informing local communities and consumers about ongoing environmental sustainability activities.
- Advocate for policy change that encourages healthcare providers to adopt measures that facilitate environmental sustainability, such as purchasing products and services that have a lower environmental impact and holding healthcare providers accountable for their impact on the environment.
- **Promote sustainable practices**, this may include providing guidance and resources to healthcare providers to enact the various suggested strategies and encouraging the adoption of green technologies and practices.
- Support research and development efforts in environmental sustainability
 within the healthcare and the impact various activities have on the quality and
 safety of healthcare for consumers.
- Collaborate with stakeholders, most importantly consumers, to ensure that
 the safety and quality of care is maintained while promoting environmental
 sustainability. This may include involving consumers in decision-making
 processes and gathering feedback to ensure that sustainable healthcare
 practices align with consumer needs and preferences.
- Identify HCCA's own areas of strength and weakness and highlight areas for further action.

1.5. Should the Module be assessed by independent external accrediting agencies?

HCCA does not have a position on accreditation. However, as a general rule we would support accreditation processes to be external and independent.

References

¹ Malik A, Lenzen M, McAlister S, McGain F. The carbon footprint of Australian health care. The Lancet Planetary Health. 2018;2(1):e27-e35

² Bragge P, Armstrong F, Bowen K, Burgess M, Cooke S, Lennox A, Liew D, Pattuwage L, Watts C, Capon T. Climate Change and Australia's Health Systems: A Review of Literature, Policy and Practice. Monash Sustainable Development Evidence Review Service, BehaviourWorks Australia, Monash University. Melbourne, October 2021. Available at: https://www.racp.edu.au/advocacy/policy-and-advocacy-priorities/climate-change-and-health

³ Australian Medical Association 2019, *Environmental Sustainability in Health Care - 2019*, Australian Medical Association, viewed 25 January 2023, https://www.ama.com.au/position-statement/environmental-sustainability-health-care-2019>.

⁴ Pickles K and Haddock R. (2022). Decarbonising clinical care in Australia. Deeble Issues Brief No 48. Australian Healthcare and Hospitals Association, Australia, p. 8

⁵ Practice Greenhealth, Health Care without Harm, Global Green and Healthy Hospitals, Sustainable Procurement in Health Care Guide, p.5

⁶ World Health Organization. Regional Office for Europe. (2017). Environmentally sustainable health systems: a strategic document. World Health Organization. Regional Office for Europe, https://apps.who.int/iris/handle/10665/340375.

⁷ See Note 3

⁸ Environmentally sustainable healthcare position statement 2016, The Royal Australasian College of Physicians, <environmentally-sustainable-healthcare-position-statement.pdf (racp.edu.au)>.

⁹ Naylor, C & Appleby, J 2012, *Sustainable health and social care*, The King's Fund, London, pp. 1–28, viewed 25 January 2023, <https://www.kingsfund.org.uk/publications/sustainable-health-and-social-care>.

¹⁰ Department of Health. Victoria, A n.d., *Environmental sustainability strategy 2018-19 to 2022-23*, State Government of Victoria, Australia, https://www.health.vic.gov.au/publications/environmental-sustainability-strategy-2018-19-to-2022-23.

¹¹ Shum, P. L., Kok, H. K., Maingard, J., Zhou, K., Van Damme, V., Barras, C. D., Slater, L.-A., Chong, W., Chandra, R. V., Jhamb, A., Brooks, M., & Asadi, H. (2022). Sustainability in interventional radiology: are we doing enough to save the environment? *CVIR Endovascular*, *5*(1), 1–13. https://doi.org/10.1186/s42155-022-00336-9

¹² Anand SK, Culver LG, Maroon J. Green Operating Room—Current Standards and Insights From a Large North American Medical Center. *JAMA Surg.* 2022;157(6):465–466. doi:10.1001/jamasurg.2022.0140.

¹³ Who is a health consumer? and other definitions 2022, Health Consumers NSW,

< https://www.hcnsw.org.au/consumers-toolkit/who-is-a-health-consumer-and-other-definitions/>.