

Webinar speakers chart progress of global initiatives toward greener health care

By NICOLE FARRELLY

Can healthy people thrive on a sick planet? That was the topic of discussion at “Global Green and Healthy Hospitals Network — Catholic Health Care’s Opportunity,” a CHA webinar that drew more than 100 participants last month.



Society currently sits at the intersection of the right to health and the right to a healthy environment, said Josh Karliner, a webinar presenter and global projects director for Health Care Without Harm, an international coalition of hospitals and health care systems. Health Care Without Harm’s goal is to implement healthy alternatives to health care practices that pollute the environment and contribute to disease.

The use of certain chemicals, overconsumption of resources, obesity and climate change are significant concerns when it comes to the health of the planet, Karliner said. As large consumers of energy and generators of waste, hospitals and health care systems contribute to the environmental stress.

Three presenters joined Karliner in discussing how hospitals and health care systems around the world are helping to reduce negative impacts on the environment. They included Camille Grippon, director of ecology and global ministries at Bon Secours Health System, Marriottsville, Md.; Sr. Mary Ellen Leciejewski, OP, ecology program coordinator for San Francisco-based Dignity Health; and Seema Wadhwa, director of the Healthier Hospitals Initiative. The Healthier Hospitals Initiative is a coalition of 11 of the largest U.S. health systems, Health Care Without Harm, the Center for Health Design and Practice Greenhealth.



A boy dumps trash outside Bir Hospital in Katmandu, Nepal, prior to the hospital's adoption of greener waste management practices.

The Healthier Hospitals Initiative acts as a resource for hospitals and health care systems seeking to reduce waste, choose less toxic products and make healthier and smarter purchasing decisions.

According to the World Health Organization, the environment has a significant impact on health. There is a direct correlation between environmental decline and the rise of disease, Karliner said. He noted the irony of hospitals and health care systems seeking to help prevent and cure disease while also contributing to environmental pollution that can lead to health problems.

Wadhwa said hospitals are the second most intensive user of energy by building type. The panel discussed how hospitals and health care institutions can go from being a part of the problem to a part of the solution.

For instance, in the U.S., Gunderson Lutheran in La Crosse, Wis., is pursuing an aggressive plan to be completely carbon neutral, removing as much carbon dioxide from the environment as they put in, by 2014, Karliner said. In addition to improving the efficiency of its plant, it uses solar panels and wind turbines to generate clean energy. Gunderson Lutheran’s renewable energy partnership with City Brewery is expected to generate 8 percent to 10 percent of the electricity used on the health system’s campuses. Waste from the brewing process is treated at La Crosse’s wastewater treatment facility. The treatment process creates biogas that is captured, cleaned and sent through an engine that generates electricity. The electricity is transferred to Gunderson’s power grid.

U.S. hospitals aren’t the only ones engaging in better environmental practices. In Santiago, Chile, Hospital Clínico de la Universidad de Chile was the first public health facility to install solar panels. As a result, it saw a savings of \$100,000 a year in water heating costs, a reduction of 270 tons of carbon dioxide emissions and a reduction of 108,000 liters of oil usage per year, Karliner said.

Bir Hospital is in Katmandu, Nepal, one of the world’s poorest countries, with an annual per capita income of less than \$650. It implemented a health care waste management plan that includes practices such as waste segregation, autoclaves that kill pathogens with high temperature and pressurized steam, and the construction of a biodigester to process food wastes in a system that harnesses methane gas for energy.

“We estimate that the gas produced from the biodigester has an annual value of \$1,000,” said Ruth Stringer, international science and policy coordinator for Health Care Without Harm. “That might not sound like a

lot, but its construction only cost \$4,500. So it will turn waste into a resource and reduce the climate impact of the hospital at the same time.”

In addition, what once was a courtyard littered with trash, now is a recycling garden with features built from materials reclaimed from the waste stream, including a fountain made from dialysis equipment and plastic containers, that sits atop of the biodigester. Since currently there is no safe disposal route for it in Nepal, the hospital contains mercury waste in an isolated location.

In the U.S., the Healthier Hospitals Ini-

tiative plans to help hospitals leverage over \$20 billion in combined purchasing power to press for environment-friendly products, Wadhwa said.

“While one system can have a major impact, by coming together and saying these are the products we want to see in our hospitals or these are the products we don’t want to see, we’re setting the stage in the entire market,” she said.

Wadhwa referenced conversations between the Healthier Hospitals Initiative and *Plastics Today*, a publication that covers plastics news and developments.

“What they picked up was that we’re signaling to the market that we have a desire to make change, and we’re having the effect we want where the manufacturing world is shifting to make products and to fit the needs that are required for a future of healthier hospitals,” Wadhwa said.

To view CHA resources on environmentally sound practices, visit www.chausa.org/Environmental_Responsibility.

nfarrelly@chausa.org