Sustainability in critical care

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Sustainable healthcare practice





Satisficing = satisfy + suffice

 Being satisfied that personcentred, quality healthcare is achieved while sufficing with the minimum amount of financial, environmental and social resource

(Baid 2019, 2021; Simon 1997)



Satisficing for sustainability in critical care practice: a constructivist grounded theory PhD Thesis – University of Brighton (Baid 2019)



Social sustainability Staff health and wellbeing

- Healthy staff with job satisfaction are an important resource for sustainable healthcare
- Critical view of resilience: personal resilience vs organisational / system resilience

(Baid 2018; Traynor 2017, 2018; Turner 2014)





Social sustainability and ethical procurement

Human rights and fair trade in healthcare supply chain

See video on YouTube: Human cost of healthcare Ethical Procurement for General Practitioners and Clinical Commissioning Groups

Ensuring the protection of labour rights in medical supply chains







Financial sustainability





What does planetary health have to do with critical care?



Planetary health crisis











Heat waves Drought Storms Fires Floods

Planetary health crisis

Canada wildfires: At least 30,000 households in British Columbia told to evacuate

C 20 August





Flooded London hospitals ask patients to stay away

③ 26 July 2021 · **₱ Comments**





Planetary health crisis

SEPTEMBER 8, 2023

UK experiencing longest September heat wave



Environmental sustainability issues









Planetary health Social justice Public health Healthcare delivery

Parry-Jones, J. and Baid, H., 2023. Moving environmental sustainability from the fringe to the centre ground in critical care. *ICU Management & Practice*, 23(3), pp.110-113.

Planetary health issues

Climate change Ocean acidification and pollution Freshwater withdrawals Chemical pollution Nitrogen and phosphorous loading Air pollution Ozone layer depletion Resource scarcity Land conversion Biodiversity loss Social justice issues War and civil conflict Forced mass migration Poverty Inequality Overconsumption Modern slavery Unethical labour practices

Public health issues

Cardiovascular disease and instability from heat and climate change Respiratory disease from air pollution and increased allergens Malnutrition and gastrointestinal disorders from food insecurity Kidney injury and dehydration from water shortages Injury and polytrauma from disasters and poor working conditions Infections from vector ecology changes and poor water/food quality Mental health impact and post-traumatic stress disorder



Healthcare delivery

Environmental footprint Financial cost Social impact



Preventing and adapting to planetary health crisis



What is the environmental impact of health care?



Health sector footprint

- Healthcare climate footprint = 4.4% of global net emissions
- If healthcare was a country, it would be the 5th largest emitter of greenhouse gases



HEALTH CARE'S CLIMATE FOOTPRINT

HOW THE HEALTH SECTOR CONTRIBUTES TO THE GLOBAL CLIMATE CRISIS AND OPPORTUNITIES FOR ACTION

ARUP





Health Care Without Harm Climate-smart health care series Green Paper Number One

Produced in collaboration with Arup September 2019

The carbon footprint of treating patients with septic shock in the intensive care unit

Forbes McGain, Jason P Burnham, Ron Lau, Lu Aye, Marin H Kollef and Scott McAlister

Critical Care and Resuscitation • Volume 20 Number 4 • December 2018

- Life cycle assessment of care for ICU patients with septic shock:
 - Energy, machines, consumables, waste
- 10 patients in US and 10 patients in Australia
- Energy made up a significant proportion of carbon footprint but relied on coal:
 - US electricity mix 88% black coal, 5% natural gas, 7% renewable
 - Australia electricity mix 86% brown coal, 4% natural gas, 10% renewable

Averages	US-ICU	Aus-ICU
Energy (kWh/day)	272	143
Single use items (kg/day)	3.4	3.4
Carbon footprint (kg CO ₂ -e/day)	178	88
Energy contribution to carbon footprint (%)	87	76
Equivalent total daily carbon footprint of 1 ICU patient with septic shock	3-5 Americans	1.5 Australians

Environmental footprint of ICU

Prasad, P.A., Joshi, D., Lighter, J., Agins, J., Allen, R., Collins, M., Pena, F., Velletri, J. and Thiel, C., 2022. Environmental footprint of regular and intensive inpatient care in a large US hospital. *The International Journal of Life Cycle Assessment*, pp.1-12. https://doi.org/10.1007/s11367-021-01998-8

- Life cycle assessment comparing the daily environmental footprint of acute inpatient unit with ICU
- Acute inpatient unit 49 beds
- ICU 12 beds
- Single tertiary private hospital in US

	Acute inpatient unit	Intensive care unit
Solid waste (kg/day)	5.5	7.1
Carbon footprint (kg CO ₂ -e/day)	45	138

Biggest contributors:

Consumables, building energy, capital equipment, food services, and staff travel

Material flow analysis and hotspots

Hunfeld, N., Diehl, J. C., Timmermann, M., van Exter, P., Bouwens, J., Browne-Wilkinson, S., de Planque, N., & Gommers, D. (2023). Circular material flow in the intensive care unit-environmental effects and identification of hotspots. *Intensive care medicine*, *49*(1), 65–74. https://doi.org/10.1007/s00134-022-06940-6

- Evaluation of one Dutch intensive care unit
- 56 beds mixed medical-surgical ICU
- 2839 patients admitted to ICU in 2019
- Average length of stay = 4.6 days

- Material mass inflow/year = 247,000 kg
- Incinerated waste/year = 50,000 kg
- Environmental impact/patient daily:
 - 17 kg mass
 - 12 CO₂-e (did not include energy)
 - 300 L water usage

Environmental hotspots:

Non-sterile gloves, isolation gowns, bed liners, surgical masks and syringes (including packaging)

Healthcare life cycle assessment database

https://healthcarelca.com/database

HealthcareLCA database disciplines ~ gallery search charts tutorials about ~ **A DATABASE OF** ENVIRONMENTAL ASSESSMENTS WITH **HEALTHCARE** Explore database

Policy and strategy for environmental sustainability



NHS England Carbon footprint





NHS Wales



NHS Scotland



WHO Budapest Declaration – July 2023

- Signed by ministries across Europe as a commitment to address health dimensions of triple environmental crisis:
 - 1. Climate crisis
 - 2. Biodiversity loss
 - 3. Environmental pollution
- Aiming to make health care systems and facilities climate resilient and environmentally sustainable
- Aligned to COP Health Programme regional community of practice of European countries working together
- UK also signed up for a new <u>Environment and Health</u> <u>Process (EHP) Partnership for Health Sector Climate Action</u>

Need for more research and education about sustainable healthcare was atheme throughout the WHO-Europe 7th Ministerial Conference on Environment and Health

COP Health Programme

• Promoting change to protect the health of people and the planet including:

- Building climate resistant health systems
- Developing low carbon sustainable health systems
- Adapation research for health
- Inclusion of health priorities in Nationally Determined Contributions
- Raising the voice of health professionals as advocates for stronger ambition on climate change











Statement on environmental sustainability

The BACCN recognises that the climate emergency is a health emergency.





Putting policy into actions for sustainable critical care



1. PREVENTION

promoting health and preventing disease by tackling the causes of illnesses and inequalities

3. LEAN SERVICE DELIVERY

streamlining care systems to minimise wasteful activities

Four principles of SUSTAINABLE HEALTHCARE

Mortimer, F. The Sustainable Physician. Clin Med 10(2). April 1, 2010. p 110-111. http://www.clinmed.rcpjournal.org/ content/10/2/110.full



CENTRE for SUSTAINABLE HEALTHCARE

2. PATIENT SELF-CARE

empowering patients to take a greater role in managing their own health and healthcare

4. LOW CARBON ALTERNATIVES

prioritising treatments and technologies with a lower environmental impact.



SusQI framework







- Sustainability within a quality improvement model
- Free resources and case studies on SusQI website
- Combines health, financial, environmental and social outcomes within QI process



Circular economy principles



Barbariol, F., Baid, H.2023. Introduction to an intensive care recycling program. *Intensive Care Medicine* 49(3): 327–329.



If it can't be reduced, reused, repaired, rebuilt, refurbished, refinished, resold, recycled or composted, then it should be restricted, redesigned or removed from production.

Avoid – Reduce – Reuse – Recycle – Rethink – Research

Baid, H., Damm, E., Trent, L. and McGain, F., 2023. Towards net zero: critical care. *BMJ*, *381*:e069044



Environmental Sustainability in Canadian Critical Care: A Nationwide Survey Study on Medical Waste Management *Alec Yu and *Iman Baharmand

Sustainability initiatives in intensive care units

- Reduction of stocking quotas of disposable equipment
- Reusing items after decontamination
- Recycling non-medical equipment
- Moving supply carts/nursing carts outside rooms
- Systemic change to ordering, organisation, arrangement

Barriers to sustainability in intensive care units

- Lack of buy-in from frontline staff
- Infection prevention and waste management policies •

 81 ICUs responded out of 286 hospitals in Canada (28.3%) Case – 16 bedded ICU Unused supplies discarded • \$140-\$170 / patient • \$140,000 / year • 3,715 kg of waste Intervention 80% reduction in waste of unused items \$110,000 annual savings

Healthcare Quarterly Vol.23 No.4 2021

- National survey via Canadian Critical Care Network

ICU recommendations – practical examples







Recycling and waste segregation













ICS and IPS – Gloves posters

GLOVES OFF in critical care

You don't need to wear gloves when preparing most IV drugs

Intensive

Care

Society



>100 disposable gloves used per patient every day in ICU .'

Be glove aware and only wear them when you need to.

You don't need to wear gloves for IV drug preparation unless you're preparing cytotoxic drugs or monoclonal antibodies.





Be glove aware and only wear them when you need to.





Resources for sustainable critical care





WHO GUIDANCE FOR CLIMATE-RESILIENT AND ENVIRONMENTALLY SUSTAINABLE HEALTH CARE FACILITIES



A beginners guide to Sustainability in the ICU



Critical Care Susnet

	Join in the conversation!		
	Create a post	Create a resource	Create an event

- Free online network hosted by Centre for Sustainable Healthcare and supported by Intensive Care Society and British Association of Critical Care Nurses
- Online discussion board ask questions, share experiences, advertise events
- Bi-monthly sharing hours (free on Zoom) speakers + open discussion
- <u>https://networks.sustainablehealthcare.org.uk/critical-care-sustainability-network/</u>



- Campaign for nurses to educate colleagues about climate change and human health
- Networking and resources





NIHR – Climate change and sustainability

Sustainable health and care

'<u>Delivering a Sustainable</u> <u>Health and Care System</u>'. The evidence produced will support practical, realworld solutions for health and care systems.

sustainability@nihr.ac.uk

Current funding opportunities

- Research and Innovation for Global Health Transformation call (closed on 29 June 2022)
- Delivering a Sustainable Health and Care System Themed Call for NIHR domestic programmes
- James Lind Alliance Priority Setting Partnership on <u>Greener Operations: Sustainable</u>
 <u>Peri-Operative Practice</u>

NHS Health Research Authority environmental sustainability strategy

The NHS Health Research Authority (HRA) is an important partner in UK health and care research. Its environmental sustainability strategy: Making environmental sustainability the norm, outlines ways to meet the challenges of climate change.



GREater ENvironmental sustainability in Intensive Care Units

 Multi-disciplinary initiative aiming to develop evidence-based guidance for reducing the environmental footprint of intensive care practice

• blogs.brighton.ac.uk/sustainablecriticalcare

waste management infection prevention human factors quality improvement sustainability carbon footprinting implementation science behaviour change materials science design climate change





Collection

My Green ICU

Submission status	Open for submission from	Submission deadline
Open	20 December 2022	Ongoing

Healthcare pollutes the earth's air, land, and water, contributing approximately 5% of worldwide anthropogenic greenhouse gases (GHGs). Critical care medicine is a hospital carbon hotspot with continuous staff activity, resource use, and energy demands. Some studies and suggestions from intensive care societies provide helpful guidance for critical care physicians keen to commence with practical measures to reduce their ICU carbon footprint. We complement such advice with a suite of sustainability strategies to be introduced by expert contributors in Intensive Care Medicine. ICM is committed to planning a greener and more sustainable ICU environment for the future. — show less

Special issue



- Nursing in Critical Care journal will be publishing a special issue on environmental sustainability
- Submission deadline extended until **1 Dec 2023**
- Consider publishing an article!

People Power

Right now, eight million tonnes of plastics end up in the oceans every year...the actions of just one of us may seem to be trivial and to have no effect. But the knowledge that there are thousands of, hundreds of thousands of people who are doing the same thing – that really does have an effect.

DAVID ATTENBOROUGH

EVERYDAYPOWER



Global warming will not end by Earth finding a shade under the trees but under our hands joined together.

Imagining sustainability

Imagine a machine that uses solar energy to remove carbon from the air and turns it into a beautiful, strong and sustainable building material.



Imagine a person who can effectively troubleshoot concurrent complex problems, while simultaneously using technical and non-technical skills as a safety-critical professional.

Oh wait...that's what critical care nurses are.

And there are a lot of us!

