European Committee of the Regions

CoR INTERREGIONAL GROUP ON HEALTH & WELL-BEING

"The sustainability and greening of the EU healthcare systems"

Thursday, 30 November 2023, 13:30 – 14:30

In-person meeting

Minutes

13:30 Welcome and introduction by the Chair, Birgitta Sacrédeus

The Chair of the Interregional Group, **Birgitta Sacrédeus**, welcomed all the participants and explained that the meeting was organised to debate the importance of the green transition in the healthcare sector and the role of regions in reducing the environmental impact of the sector in the EU. The event was structured around two speeches from **Arianna Gamba**, Director of Programmes at Healthcare Without Harm Europe, and **Marco Di Donato**, Policy and Project Officer at the European Regional and Local Health Authorities network (EUREGHA).

13.40 "How to work towards greener and more sustainable healthcare systems?" by Arianna Gamba

Arianna Gamba focused her contribution on the **environmental challenges** faced by the healthcare sector and presented the work and the vision of **Health Care Without Harm Europe** to promote and build a more sustainable and greener health sector in Europe. After setting out the context of the three **planetary crises** currently ongoing (climate change, pollution and exposure to toxic chemicals, and loss of biodiversity) and reporting data on the impact on humans and the whole ecosystem, she dived into the interactions between those factors and the healthcare systems. The **health sector** is one of the major contributors to the climate crisis, producing **5.2% of global net emissions**, and the risk is that the sector's emissions could triple by 2050, taking into account direct (e.g. stationary and mobile combustion, waste on-site treatment, fugitive emissions) and indirect emissions (e.g. purchased electricity and heat, patients' and employees' commuting, inhalers, pharmaceuticals, food and catering, etc.). During the presentation, particular attention was paid to the **use of plastic**, especially in terms of single-use: she stressed how having a correct hygiene procedure is more effective in preventing, for example, infections rather than the use of disposable medical plastic. This is confirmed by a study conducted in India and the UK and cited by Ms Gamba, stressing how the emissions from cataract operations due to single-use are much lower in India, and the infection rate is lower than in the UK. Among all the other factors, she briefly touched upon the problem of patients'

exposure to endocrine-disrupting chemicals through medical plastics and the incidence of pharmaceutical agents on Antimicrobial Resistance (AMR).

Then, Ms Gamba dedicated the second part of her contribution to a presentation of **Healthcare Without Harm Europe**, a network of 192 members from 25 countries across the WHO Europe region operating through four action networks: **hospitals** (including also regions as stakeholders), **doctors**, **nurses**, and **pharmacists**. The aim of the organisation is to innovate medical practices and influence and transform global, European, and local health policies towards greener approaches and practices. The organisation is active in three different programmes: Climate-smart healthcare, Circular Healthcare, and Safer Pharma. The strategic goal of **Climate-smart Healthcare programme** is to transform the European healthcare sector into a net zero carbon and climate-resilient sector that protects public health from climate change and accelerates the transition to a low-carbon economy. The **Circular Healthcare programme** has the objective of having European healthcare systems that drive markets towards toxic-free products that conserve finite resources, minimise waste, and contribute to the ethical supply chain and circular economy. Lastly, the **Safer Pharma programme** aims to minimise pharmaceutical pollution and its contribution to the development of AMR. Each of these programmes has a set of action areas that the organisation is carrying out.

14.00 "Example from Apulia Region (IT): the new Hospital 'San Cataldo' in Taranto" by Marco Di Donato

Marco Di Donato provided some information about the new **Hospital San Cataldo in Taranto**, in **Apulia Region** (IT), by sharing a presentation prepared by Eng. Tommaso Carrera, Head of the Technical Area at the Local Health Agency of Taranto, who was not able to join the event in person.

Mr Di Donato explained the steps and approach that led the Region and the Local Agency to build the hospital following **environmental guidelines and rules** both in its construction phase and organisational aspects. The hospital is located outside the city centre on a piece of land identified by the Region for that specific scope some years before the tender was opened. The construction works started in December 2020 and the end is foreseen for June 2024, with activation of hospital services as of December 2025. The investment amount was € 312.500.000, with almost two-thirds invested in construction works and the rest in equipment and furniture. For both these expenses, the Local Agency took into account environmental requirements (for example, by relying on short-supply chain materials and furniture). The project was developed taking into account the national action plan on **Green Public Procurement** (PANGPP) approved with a Ministerial Decree in 2017, taking into considering the following aspects: the possession of **registration in the Environmental Management System** (tool provided by the European Union) by potential contractors during the selection process,

the integration of the building in the natural landscape, arrangement of green areas, reduction of land consumption and maintenance of soil permeability, energy supply, energy balance and coverage percentages thanks to renewable energy sources, and the reduction of the impact on the surface and underground hydrographic system. During the selection process, the contractor was selected based on its commitment to **use recycled materials** above the thresholds set by the tender requirements (e.g. use of concrete with a minimum content of recycled material > 5%, use of bricks for walling and floors with a minimum content of recycled material > 10%, use of recycled or reused plastic components > 30%, etc.). To **reduce as much as possible the consumption of land**, the hospital was developed in height but, as located in the countryside, it was kept a balance and limit in this regard to respect and better insert the structure in the natural landscape. Moreover, around 81,000 m2 out of 226,297.30 m2 of the total surface of intervention were allocated to a **public green area**, with the use of autochthonous and non-allergenic plants. Lastly, the materials used to cover the surface of different areas guarantee a permeable surface at 60%.

Particular attention was devoted to the energy balance, with a notable percentage of coverage thanks to **renewable energy sources**, with the objective of achieving a "**nearly zero energy building**" and obtaining the A3 energy classification according to the Apulia Region provisions. More specifically, the two main sustainable energy sources are 2 trigenerators and 2 photovoltaic fields for the production of electricity and thermal energy from gas and sunlight.

As a last point, the project includes the **reuse of rainwater and wastewater** through a collection and treatment system that takes into account the principles of sustainability and reduction of environmental impacts. Part of the rainfall captured by the roofs is indeed accumulated in dedicated tanks for reuse as water for firefighting, irrigation, or hospital's toilet flushing systems.

After the presentation of the good practice from Apulia Region, **a video by the Welsh National Health Service** (NHS) was displayed, providing a quick overview of the approach, work and areas of focus behind the **Health and Social Care Climate Emergency Programme** in Wales aiming at reducing the climate impact of the National Health Service.

14.15 Open debate and closing remarks by the Chair, Birgitta Sacrédeus

The audience addressed a question concerning the cost of purchasing reusable objects. Ms Gamba stressed the difference between price and cost: although the purchasing of single-use objects can have lower prices, the costs for the hospital and the whole system will be higher. In this respect, she brought the example of a hospital in Newcastle (UK), where single-use plastic plates have been replaced by ceramic plates: the price of ceramic plates was higher than the plastic ones, but the cost has recovered in two months thanks to the reusable nature of the object.

Michele Calabro', EUREGHA Director, informed the audience that EUREGHA is looking at the topic of **green skills** of the healthcare workforce through the EU-funded project **BeWell**. He asked Ms Gamba which category of healthcare professionals seems more ready to embrace this mindset shift to embrace the green transition. Ms Gamba explained that the level of awareness depends on the country. In the UK, for example, healthcare managers and leaders committed to have a target net zero in the sector by 2040.

Ms Sacrédeus asked about the use of gloves in hospitals. **Ms Gamba** explained that **gloves** are the most purchased common items across the hospitals, but she said that sometimes there are huge discrepancies in the use of gloves if we compare healthcare facilities with the same numbers in terms of patients, healthcare professionals and visitors. One of the most successful campaigns in this regard is the gloves-are-off campaign of the Great Ormond Street Hospital in London

After the open discussion, **Ms Sacrédeus** thanked the speakers and the participants and announced that the Interregional Group will meet on the 1st of February 2024 for its constitutive meeting to set the thematic priorities for debates in 2024.

14.30 Close of meeting