

Decarbonising clinical care in Australia

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The Australian healthcare sector is a significant contributor to national carbon emissions, contributing to poor population health outcomes through its own pollution. Policy and investment action is needed at the national level to address the carbon footprint of clinical care, including low value care. Action for effective policy and practice change will require identifying barriers and enablers to action.

However, there is limited evidence to enable health services to accurately monitor usage and evaluation of emissions reduction initiatives, to guide clinical decisions and a transition to low carbon clinical care, and to inform health policy.

Recommendations

- A focus on reducing unnecessary and low value care is needed to prevent patient harm, financial costs, and preventable carbon emissions. Triple Bottom Line (health, environment, financial) assessments can be utilised to identify impact of care, while the Atlases of Health Variation (ACQSHC) can be harnessed to identify disinvestment opportunities.
- The establishment of nationally coordinated data collection, monitoring, and reporting of the health sector's carbon footprint is required to better understand the environmental impact of clinical care. By implementing a national minimum dataset, government can introduce regulatory frameworks to facilitate environmental performance standards.
- Authorities should move to include carbon costs in health technology assessment processes, as part of the value assessment of products, services, and pathways. Authorities should require technologies to comply with emissions thresholds to promote change and develop a process for disinvestment in low-value goods and services.
- Healthcare suppliers should be regulated to measure the carbon footprint of their products and undergo accreditations to meet sector-wide standards. By preferencing carbon-neutral suppliers, this will drive more sustainable procurement and help decarbonise the healthcare supply chain.
- The establishment of a national healthcare sustainability unit is needed to overcome fragmented, localised efforts to collect data and enact change. The unit will facilitate coordinated monitoring, reporting and evaluation of emissions and emissions reductions initiatives, and can support change through resource provision and training in carbon health literacy.

