Greening the healthcare system one hospital at a time could take a long time. But with regionalization, whole health systems can begin to take on the task of becoming more environmentally friendly; this is now beginning in at least two of British Columbia’s regional health authorities.

The Interior Health Authority (IHA) has established a Green Committee, chaired by their director of plant maintenance and reporting to the Chief Operating Officer (COO) for Strategic and Corporate Services, who also sits on the committee. The committee includes staff from many different sectors and is linked to both the Quality Council and the Infection Control Committee. The IHA approach is to focus first on changing practices and let the policies evolve as they develop experience and get buy-in. To help in this, they will soon be increasing their capacity to communicate with staff.

The IHA’s facilities have won awards for their energy efficiency practices in the past, such as for the use of lake water cooling for the Kelowna General Hospital. Now they are incorporating energy-efficiency criteria in their purchasing tenders and, even more significantly, have established a policy that all their new facilities will be LEED-certified to at least the Bronze level, and better if possible. Indeed, in tendering for the new mental health centre in Kamloops, the IHA is aiming for Gold-level LEED certification. COO Chris Mazurkewich comments that “going green is 3% more expensive in capital costs, but we expect payback in operating savings over a few years.”

Beyond energy conservation, the IHA has taken a number of other steps to become more environmentally friendly: phasing out mercury thermometers; increasing recycling (for which a staff member in Kelowna won a local Award, as well as saving thousands of dollars in a landfill costs); sending out integrated earnings and expense statements to staff electronically, saving paper, envelopes and cheques; looking at establishing green criteria for purchasing of housekeeping supplies. Another significant environmental initiative has been to increase markedly the use of video conferencing. Initially introduced to improve safety by reducing the need for staff to drive long distances for education or administration purposes, especially in winter, video conferencing also reduces energy use and the emission of pollutants and greenhouse gases. The use of telemedicine, and in particular the remote reading of x-rays, also confers the same benefits on patients.

As often happens with “greening” programs, the IHA’s approach, he adds, will be to focus more on “design for health.” A senior manager recently attended the 2003 conference of the Center for Health Design in Florida and returned enthused about the possibilities. Already discussions are beginning on the need to increase green space and quiet space for patients, staff and visitors; says Mazurkewich, “making buildings healthy for our own people and the people we serve is the next area for us to focus on.”

The Northern Health Authority (NHA) would agree; for the NHA, a sustainable healthcare environment is one that is environmentally responsible, people-centred and economically viable, which is a version of what many in the private sector, government and the community sector refer to these days and as the “triple bottom line.”

Early in 2003, Northern Health’s executive team established a sustainability team with a half-time coordinator. During 2003, the coordinator, Joanne Houghton, who is also a population health nutritionist, held many focus groups with Northern Health employees and community partners across the region – a region spanning two-thirds of northern British Columbia. Participants helped to develop the NHA’s vision of a sustainable healthcare environment and shared what they’re already doing, sometimes on their own initiative and even at their own expense. For example, a maintenance engineer at Fort St. John Hospital bought earthworms to compost kitchen waste to make soil for the rooftop garden he hopes to see built, using waste heat from the hospital ventilation system to heat it. At a larger scale, Northern Health is working with the City of Prince George to develop a co-energy plant and district heating system, using wood waste to heat the hospital and other public buildings. The wealth of ideas and practical experience garnered from the focus groups has led to the creation of a soon-to-be-published best-practice manual for the NHA, which will doubtless be of interest to others in BC and across Canada.

As a result of the obvious interest and commitment among staff, Northern Health has now established a sustainability program, managed by Ms. Houghton, who reports to the 12-person sustainability advisory committee. In November 2003, an action planning workshop resolved to focus on three themes: green buildings, people-centred care (including both patients and staff) and supporting local sustainable food systems (at Prince George Regional Hospital, for example, local foods already make up 10% of food served). As is the case in the IHA, a key part of their strategy is to raise awareness among staff; this will include awards that will encourage innovation and recognize staff contributions to sustainability. A second key step is to complete an environmental impact assessment of Northern Health’s activities, while a third priority will be to develop a proposal for funding energy conservation projects. Notes Joanne Houghton, “I am struck by the breadth of vision, the diversity of partners,
the leadership, the commitment, and the innovation at all levels within Northern Health. These elements will be instrumental to our success in reducing our impact on the environment.”

Both these health regions have shown an impressive commitment to the greening of healthcare in 2003, and are well positioned to significantly reduce their environmental impact over the coming years. If every health region in Canada follows their lead, the idea of greening Canada’s health system will come closer to reality.

*LEED™ is a green building environmental assessment tool that can be used to review the performance of buildings. LEED was created by the United States Green Building Council (USGBC) and stands for Leadership in Energy and Environmental Design. A Canadian version of LEED is under development. www.raic.org/LEEDCANADADRAFT.pdf

About the Authors
Chris Mazurkewich can be reached at Chris.Mazurkewich@interiorhealth.ca.
Joanne Houghton can be reached at Joanne.Houghton@northernhealth.ca.
Dr. Trevor Hancock is Healthcare Quarterly’s environmental editor. He is a member of the Board of the Canadian Association of Physicians for the Environment and a founder of the Canadian Coalition for Green Health Care. He can be reached at greendoc@telus.net

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FUN WITH WORDS

In our November 17, 2003 Longwoods eLetter we invited readers to take a word – any word related to healthcare – change one letter and provide a new meaning.
We got some wonderful words. And here are some of the best:

William R. Phillips, Department of Family Medicine, in Seattle, Washington came up with these words:
Memorrhoids: mental block
Triapism: third dose of Viagra
Grossitis: foul mouth
Imfaction: tenaciously held misinformation
Menicillin: STD prevention program

Terry Simpson from Nanaimo, B.C. contributed to the lexicon with the following words:
Measli: an unhealthy breakfast food in tiny portions
Cartilage: where the Romans burned Hannibal’s medical library

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