

22.06.22

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The Hon. Chris Picton
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Parliament House
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Via email: ministerforhealth@sa.gov.au

Dear Minister Picton,

RE: Climate health strategy

I am writing on behalf of the Royal Australasian College of Surgeons (RACS) South Australian State Committee regarding climate change and the important and real actions that must be taken in hospitals and operating theatres to mitigate waste and reduce climate changing gas emissions.

I do not believe that I need to summarise the data on climate change and the consequences for the natural world, humanity and our economy if we do not take action. Nor is it necessary to provide evidence of the public understanding and desire for action in this area; the recent federal election outcome has made the position of the Australian public very clear. If there has been a time of uncertainty, scepticism or procrastination on this subject, that time has clearly passed in the minds of most people.

Hence policy and actions that curb waste or emissions will be viewed positively by the vast majority, whereas a policy vacuum will be seen for what it is and called out for the dangers it poses for us all. At a national level RACS has an established Environmental Sustainability in Surgical Practice Working Party (ESSPPW) who have led RACS' advocacy efforts in this area in recent years. The ESSPPW have joined with other medical colleges in writing to the previous federal government asking for them to:

- 1) Commit to an ambitious national plan to protect health by cutting Australia's greenhouse gas emissions, aligned to science-based targets, this decade. Such a plan would include:

policies that acknowledge the health benefits of renewable energy and accelerate the transition;

significantly increasing Australia's Nationally Determined Contribution to the Paris Agreement at UN climate negotiations (COP26), in line with limiting global warming to 1.5°C.
- 2) Develop a national climate change and health strategy to facilitate planning for future climate health impacts; and
- 3) Establish a national Sustainable Healthcare Unit to support environmentally sustainable practice in healthcare and reduce the sector's own significant emissions.

Most recently the ESSPPW contributed to RACS [Federal election position statement](#). As part of this document the College encouraged all parties to provide leadership in supporting and implementing policy initiatives that would assist the health sector in reducing its carbon footprint.



Committed to
Indigenous health

These broad national commitments and the support of medical colleges in this regard are important and the purpose of this letter is to focus on the last item above, ie the contribution to waste and greenhouse gas emissions by the health sector itself. A study published in 2018 estimated that health care in Australia contributes to 7 per cent of the entire country's carbon emissions, with around half of this contribution coming from hospitals alone. Within hospitals, operating theatres are three to six times more energy intensive than the rest of the hospital, operating theatre waste is significant and anaesthetic gases have potent greenhouse effects. As a result, RACS, the lead body representing surgery and surgeons in Australia, has an important role to play in advocating for a more environmentally responsible health-care sector.

The United Kingdom's National Health Service (NHS) has already taken the lead in this area and its ambitions and plans are [freely available](#). The NHS has set a goal of net zero emissions by 2040, even asking their entire supply chain for their climate credentials and making purchasing choices on the basis of those credentials. Their plans are detailed and wide-reaching, well beyond the scope of this letter, but I would welcome the opportunity to discuss this further with representatives from the Department for Health and Wellbeing and the Department for Environment and Water, together with other relevant medical colleges in SA to formalise a climate action plan for healthcare in SA.

I do not think that we need to re-invent the wheel and can likely continue the work of the ESSPWP and borrow ideas from other organisations such as the NHS, but ultimately like all such plans it would need to have a real world focus, be relevant to the South Australian situation and have clearly set out, aspirational, yet achievable targets. Like the NHS, Australian public hospitals combined are large organisations that have large purchasing powers with large supply chains. They therefore have considerable financial power to bring about change across the whole industry. Ultimately, my hope is that with federal college and political support, South Australia can lead the way in developing a National Plan.

Whatever targets and plans are considered, I am aware that "sustainable" also means economically sustainable, since health already makes up a significant percentage of government spending and emphasise that appropriate standards and quality must be adhered to so that patient care is not compromised. However, these necessities still leave large scope for improvement.

I have also sent a separate letter to the Chief Executive Officers of South Australian private hospitals, and I look forward to the opportunity to discuss this matter further.

Regards,

Mr David King
Chair, RACS SA State Committee

cc: Ms Lynne Cowan, Acting Chief Executive of the Department for Health and Wellbeing
cc: Mr John Schultz, Chief Executive at Department of Environment and Water
cc: The Hon Susan Close, Minister for Climate Environment and Water
cc: The Hon. David Speirs, Leader of the Opposition and Shadow Minister for the Environment
cc: Mrs Ashton Hurn, Shadow Minister for Health
cc: Ms Tammy Franks, Leader of the Greens
cc: Professor David Fletcher, Chair RACS ESSPWP