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2016 saw renewed growth and development for our HCWH Europe office in Brussels. Increased income enabled the office to hire additional staff, meant that we could tackle existing policy areas in greater depth, as well as renewing our interest in other work areas such as sustainable and healthy food.

We also welcomed a number of new members from around Europe – all of which I would like to warmly welcome to the HCWH Europe network.

Much progress was made on chemicals, in particular the adoption of the Medical Devices Regulation, which includes important provisions to protect people’s health and the environment.

Along with other organisations, we advocated for a phase out of mercury (dental amalgam) in dental fillings in 2016: as a result of our work, the EU agreed on a phase out of amalgam for children and pregnant and breastfeeding women - falling short of a complete phase out, but an important step nonetheless.

In 2016 HCWH Europe also established the first European Healthcare Climate Council – made up of healthcare professionals, healthcare organisations, and other leading institutions – to leverage the voice of the healthcare sector to show leadership in terms of tackling one of the biggest threats to the environment and health currently facing us: climate change.

Pharmaceuticals in the environment was another key area of work for 2016. In September, we hosted a one-day workshop, Pharmaceuticals in the environment: Make ideas work!, bringing together over 60 experts and policy-makers to discuss strategies and policies to reduce pharmaceuticals in the environment throughout Europe.

In 2016 we also resumed our work on sustainable and healthy food – in order to tackle the environmental problems resulting from the production, transport, and waste of food for the healthcare sector.

We released two publications concerning healthy and sustainable food and food waste towards the end of the year – in November we released our Food waste in European healthcare settings brochure, followed by our Fresh, healthy, and sustainable food: Best practices in European healthcare report in December.

Finally, in October we held Europe’s leading conference on sustainable healthcare – CleanMed Europe - in Copenhagen. The successful conference saw over 250 participants from 26 countries and five continents come together to discuss a diverse range of topics related to sustainable healthcare in Europe.

Although there is much more work to be done over the coming years, the organisational developments and the increased staff capacity of HCWH Europe over the past year has given the organisation a solid base on which to build future work to protect the environment and human health in close collaboration with our members.

After a year in which political and social instability has put the environment at greater risk than at any other time in recent years, it is important that we – the healthcare sector – step up and lead from the front in terms of tackling the issues of toxic substances in healthcare, carbon-intensive hospitals and services, pharmaceutical pollution, carbon emissions associated with food production, and food waste.

Dr. Hanns Moshammer, Medical University of Vienna, Chair of the Board, HCWH Europe
Health Care Without Harm (HCWH) Europe is a non-profit coalition of hospitals, healthcare systems, healthcare professionals, local authorities, research/academic institutions, and environmental and health organisations. The organisation currently has 76 members in 26 countries of the WHO European Region that includes 17 Member States of the European Union.

HCWH Europe brings the voice of healthcare professionals to the European policy debate about key issues - chemicals, climate change and health, sustainable procurement, pharmaceuticals, sustainable food, and waste.

The organisation is a recognised stakeholder at the European Chemicals Agency (ECHA), as well as the European Medical Agency (EMA), and participates in a number of EU Commission working groups.

In addition, HCWH Europe is a member of ECOS (The European Environmental Citizens Organisation for Standardisation), an associate member of CAN (Climate Action Network) Europe, and a network member of the EDC-free Europe coalition.

The organisation also participates in UN processes, such as SAICM (Strategic Approach to International Chemicals Management), the Minamata Convention on mercury, and the UNFCCC (United Nations Framework Convention on Climate Change).

In 2016, HCWH adopted a new vision, mission, and set of goals, which run throughout the organisation worldwide.

**VISION & MISSION**

**VISION**

Healthcare mobilises its ethical, economic and political influence to create an ecologically sustainable, equitable and healthy world.

**MISSION**

Transform healthcare worldwide so that it reduces its environmental footprint, becomes a community anchor for sustainability and a leader in the global movement for environmental health and justice.

**OVERARCHING GOALS**

**TRANSFORM THE SUPPLY CHAIN:**

Establish and globalise procurement criteria and leverage healthcare’s purchasing power to drive policies and markets for ethically produced, healthy, sustainable products and services.

**PROTECT PUBLIC HEALTH FROM CLIMATE CHANGE:**

Reduce healthcare’s carbon footprint, foster climate resilient health systems, mobilise the health sector to address climate change as a public health issue, and advocate for solutions that accelerate a transition to clean, renewable energy.

**BUILD LEADERSHIP FOR ENVIRONMENTAL HEALTH:**

Inspire, mobilise and support healthcare’s leadership to promote environmental sustainability, human rights, and the right to health in order to achieve large-scale transformational change.

**PROGRAMME GOALS**

- **Buildings**
- **Chemicals**
- **Energy**
- **Food**
- **Pharmaceuticals**
- **Transportation**
- **Waste**
- **Water**

PHOTO CREDITS: (from left to right) Aidan Long, Paola Hernandez, Tim Eden, Anna Schütz, Lloyd Evans, Andrea Cristina Gaeta, Anja Leetz, Adela Maghear, Grazia Cici, Sarah Diamond, Philippe Vandenabeele and Carla Aires (not pictured)
MEMBERS

In 2016, HCWH Europe continued to strengthen its relationships with existing members and add new ones. At the very successful CleanMed Europe 2016, we had the pleasure of connecting with new potential members and launching projects with existing ones.

In addition, HCWH Europe partnered with the HCWH Global Green and Health Hospitals (GGHH) network to automatically extend GGHH membership to all eligible HCWH Europe members. This continued collaboration allows HCWH Europe members greater access to the worldwide network of hospitals who are working to reach specific goals to improve our climate and reduce our environmental impact.

Armenia
- Armenian Women for Health and a Healthy Environment (AIAWHE)
- Women for Green Way for Generations

Austria
- ETA Umweltmanagement GmbH
- Otto Wagner Hospital / Centre of Social Medicine / Sozialmedizinisches Zentrum Otto Wagner-Spital und Pflegezentrum
- The Institute for Sustainable Healthcare (INESS) / Institut für Nachhaltigkeit im Gesundheitswesen
- Vienna Health Care Institutions Association (KAU) / Wiener Krankenanstaltverband KAU

Belarus
- Foundation for Realisation of Ideas / Fond Realizacii Idey
- EcoSphere IPA

Belgium
- Belgian Platform Environment and Health / Vlaams Platform - Milieu en Gezondheid
- Kliniek Eeftak

Bosnia
- ARNIKA Association / Sdružení Arnika

Czech Republic
- Environmental Impact.
- World Wide Fund for Nature / Fundace Zahrada

Denmark
- AMNIKA Association / Sdružení Arnika
- Danish Platform for Sustainable Healthcare

France
- Association of independent doctors for the Environment and Public Health / Association des Médecins indépendants pour l'environnement et la santé publique
- CDG (Committee for Sustainable Development in Healthcare / Comité pour le Développement Durable en Santé)
- Committee for Environmental Health / Comité Santé Environnement (CSES)
- National Centre for Independent Information on Waste (CNID) / Centre national d’information indépendante sur les déchets
- Le Centre Hospitalier de Nîmes

Germany
- BUND - Friends of the Earth Germany / Bundes für Umwelt und Naturschutz Deutschland e.V.
- BUND - Friends of the Earth Berlin / BUND Berlin e.V.
- European Institute for Transfer of Technology, Info-Management and Communication (ETIC) - Europäisches Institut für Technologietransfer, Informationmanagement und Kommunikation
- Institute for Environmental Medicine and Health Care, Freiburg / Institut für Umweltmedizin und Krankenhaushygiene Freiburg Universität

Hungary
- Recycled

Ireland
- Cork University Hospital
- HSE Estates (South)
- Irish Doctors Environmental Association (IDEA)
- Organisation for Ecologically Sustainable Waste Management

Italy
- Agenzia Luccarese per l’Energia ed il Recupero della Risorse (ALERR)
- Waste and Environment Foundation / Stichting Afval & Milieu
- Ecobuoy Foundation
- Stichting Huis Arade
- Women In Europe for a Common Future (WECF)

Macedonia
- Macedonian Association of Doctors for the Environment (MADE) / Medecins pour l’Environnement - République de Macédoine

Netherlands
- Clean Production and Energy Efficiency Center / Producere Pura e Efficienza Energetica
- North Eastern Regional Health Authority / Helse Sør-Øst RHF
- Life Youth Foundation / Fondation Life
- Friends of the Earth-Slovenia / Priatelia Zeme (SPZ)

Norway
- Friends of the Earth Norway / Friends of the Earth (Føyninga Framhald)
- Woman In Europe for Common Future (WECF)

Republic of Moldova
- Clean Production and Energy Efficiency Center / Producere Pura si Eficienta Energetica

Romania
- South-Eastern Regional Health Authority / Helse Sør-Øst RHF
- Life Youth Foundation / Fondation Life

Russian Federation
- Balkal Environmental Wave / Balkalskaya Ekologicheskaya Volna
- Kaliningrad Children and Youth Involved / Mari NGO

Slovenia
- Friends of the Earth-Slovenia / Priatelia Zeme (SPZ)

Sweden
- Swedish Doctors for the Environment / Läkare för Miljön
- Stockholm County Council / Stockholms läns landsting
- Uppsala University Departments of Clinical Microbiology and Earth Sciences / Uppsala Universitet
- Västra Götalandsregionen / Region Västra Götaland

Switzerland
- European Institute of Environmental Medicine / EIM
- Institute for Environmental Medicine and Health Care, Freiburg / Institut für Umweltmedizin und Krankenhaushygiene Freiburg Universität

United Kingdom
- British Society for Ecological Medicine
- The Centre for Sustainable Healthcare
- Communities Against Toxics Scotland
- Global Action Plan
- Medact - ISDE UK
- Royal College of Nursing (RCN)
- Soil Association
- Keep Britain Tidy

Ukraine
- International Society of Doctors for the Environment Ukraine (ISDE)
- Green Point Advisers for Sustainable Growth / Kemi & Miljö
- County Council of Skåne / Landstinget Skåne
- International Chemical Secretariat
- Keep Britain Tidy
- Soil Association
- Keep Britain Tidy

8 Health Care Without Harm Europe - Annual Report 2016
9 Health Care Without Harm Europe - Annual Report 2016
In France, only two hospitals have adopted the guidance on social responsibility ISO 26000, only about 10 healthcare institutions are registered with the EU Eco-Management and Audit Scheme (EMAS), and only about 60 are certified ISO 14001.

In 2016, C2DS, in collaboration with the national certification agency (AFNOR), adapted the ISO 26000 guidance for the healthcare and medico-social sectors. Primum Non Nocere (the C2DS-affiliated counselling agency) worked with the majority of EMAS-registered healthcare institutions in France, and is now working with some of them to reach the next step, adoption of the ISO 26000 guidance.

**BUND BERLIN, GERMANY**

In 2016, BUND (Friends of the Earth) Berlin continued to recognise outstanding work in the area of climate protection in the healthcare sector through its ‘Energy Saving Hospital’ label. Over the past number of years, St. Joseph Clinic Berlin Tempelhof reduced its CO2 emissions by 33%. The clinic has reduced its CO2 emissions by about 2,199 tonnes compared to 2011. In recognition of this, St. Joseph Clinic was one of 45 hospitals in Germany which was awarded the ‘Energy Saving Hospital’ label.

In 2016, BUND also finished the ‘KLIK - Climate Manager for Hospitals’ project, which was funded by the Federal Environment Ministry from 2014 to 2016. In collaboration with the Foundation Viamedica, 50 hospitals in Germany worked on this project. The focus was on non- and low-invest measures to reduce energy consumption. At the end of the project, participating hospitals saved more than 34,000 tons of CO2 in three years, and saved up to €9 million in energy costs. The results were better than anticipated and can be found online (in German only) in the KLIK Guideline.

**LANDSPITALI HOSPITAL, ICELAND**

In 2016, The National hospital of Iceland, Landspitali, set a 40% reduction target for the reduction of its carbon footprint over the next four years. To this end, some measures have been introduced in the areas of transportation, energy, waste, procurement, and anaesthetic gases. For example, Landspitali now offers its staff a ‘transportation contract’, whereby if they choose eco-friendly transport to work three out of five days a week, they are rewarded with a tax free bonus of €42 each month. The staff are pleased with the scheme and it has already increased the amount of eco-friendly transport amongst staff, which is higher than the Reykjavik average.

In terms of waste, in five years Landspitali has increased the recycling of waste to 30%, and has started to compost its organic waste.

As a result of these and other actions, the carbon footprint of Landspitali reduced by 7% in 2016, and more actions are expected over the coming years.

**REGION SKÅNE, SWEDEN**

In 2016, Region Skåne implemented an innovation procurement project with the aim of creating new environmentally friendly aprons made from renewable material. An expert group of members from the areas of procurement, innovation, environment, and regional development worked together for this purpose. The procurement work was partially financed by the Swedish Energy Agency.

The region invited several manufacturers to create and offer a brand new product. All those who showed interest were invited to participate in a dialogue which included information seminars about new materials. The procurement work was unique since it was possible to negotiate with suppliers throughout the entire procurement process. The environmental requirements were specified so as to encourage the market for new climate smart materials and also so that both small and large producers could achieve them.

The new aprons consist mainly of sugar cane and lime. This major environmental initiative had the added benefit of jobs having been created by the manufacturer in Helsingborg, Sweden.

Each pack of the climate smart aprons carries a QR-code which can be scanned by a smartphone. The code provides environmental information about the product, information about how to recycle it, and explains how the supplier/manufacturer works according to a code of conduct.

The fit of the aprons was improved by a designer in ac-
cordance with the wishes of the staff. During the autumn of 2016, a series of samples were tested by employees in hospitals.

All single use aprons ordered by Region Skåne are now environmentally friendly and locally produced. By switching to aprons made of 91% renewable materials, Region Skåne can reduce carbon emissions by a sizable amount each year.

UPPSALA UNIVERSITY DEPARTMENTS OF CLINICAL MICROBIOLOGY AND EARTH SCIENCES, SWEDEN

The 6th One Health Sweden Scientific Meeting, A World in Transition—Changes in Infection Ecology took place at Gustavianum, Uppsala in March 2016. Approximately 90 attendees heard from a wide range of speakers, including: Lisa Conti (US) - one of the founders of One Health Initiative - who spoke about the ‘one health’ concept in practice with reference to controlling invasive species, Frank Aarestrup (Denmark), who spoke about “Global infectious disease surveillance - Alternatives to enhanced Collection of clinical data”, Sam Sheppard (Swansea University, UK), whose presentation was about “Population genomics and evolution of Campylobacter”, and Ana Rivière-Cinna-mon (PAHO/WHO), who spoke about community-level implementation of the One Health approach, with examples from PAHO/WHO work.

The meeting was supported by the Swedish research councils FORMAS and Vetenskapsrådet. It provided a great opportunity to connect with the international One Health network, in preparation for the international One Health Eco Health Congress in Melbourne, Australia later in the year - where a large group of One Health Sweden members (including members from Uppsala University) and researchers participated.

CENTRE FOR SUSTAINABLE HEALTHCARE, UK

In November 2016, The Centre for Sustainable Healthcare (CSH) held a conference entitled Transforming Mental Health and Dementia Provision with the Natural Environment. Working on behalf of the National Outdoors for All Working Group, CSH invited speakers from across the healthcare and natural environment sectors.

During the conference over 110 delegates examined routes to commissioning of natural interventions against a range of mental health and dementia contexts, and also routes through which the scale of these interventions could be stepped up.

The conference concluded that there was a clear need for stronger leadership on this agenda, and also that investment needed to be made into development of consistent and quality assured frameworks through which the impact of these interventions could be measured and reported.

In 2016, CSH also ran their innovative Green Ward Competition with Darent Valley Hospital. The purpose of the competition is to engage clinical staff with their important role in sustainability efforts at hospitals. Five small projects in just this one hospital - including medicine waste minimisation and medical pack waste aversion - achieved yearly savings of 30 tonnes CO2 equivalent. Scaled up across hospitals, projects that were run during the competition will make significant carbon and money savings.
GLOBAL ACTION PLAN, UK

Operation TLC is an energy improvement behaviour change programme focused on improving patient experience, staff environments and cost efficiencies for healthcare organisations. It is about taking simple energy saving actions that help to give patients and staff a little extra Tender Loving Care. Turn off equipment, Lights out, Control temperatures. Since launching in 2013, Operation TLC has been adopted by a number of NHS Trusts in the UK, resulting in cost savings of £580,000 (approx. €640,000), improved patient experiences, and carbon savings of 2,600 tons of CO2. The Operation TLC materials and webinar are now freely available to all GCHH members here: ▶

SOIL ASSOCIATION, UK

The Soil Association’s Food for Life Hospitals programme supports and empowers hospitals to take a whole settings approach to food, embedding health and sustainability for the benefit of patients, staff, visitors and the wider community. Key highlights from the year include the ongoing development of shared dining spaces for patients to eat together on wards at South Warwickshire NHS Foundation Trust. On key wards, patients are encouraged to come to central tables to share meals. Evaluation has shown that patients feel less isolated, are eating more as a result and the ward atmosphere is calm too. Growing in popularity across the hospital, the practice is spreading and clinicians are also seeing the benefits in keeping patients active and mobile.

The programme also brought groups of hospitals from across England together through its seminar series to share and spread good practice in relation to food. Open to multiple disciplines including nurses, dietitians, caterers, sustainability leads, health and wellbeing leads and more, those attending the seminars particularly value the chance to share and learn, and to bring the different disciplines together.
THE YEAR IN NUMBERS - POLICY WORK

MEETINGS

76
meetings/conferences attended

LETTERS

26
letters/written representations sent

PAPERS

4
position papers published

4
replies to public consultations
THE YEAR IN NUMBERS - COMMUNICATIONS & PRESS COVERAGE

ONLINE

FACEBOOK
60% more likes
372 new followers

TWITTER
30% increase in Twitter followers: to over 1,200
120% increase in impressions: now over 505,000
546 tweets

WEBSITE
Page views +10% Session duration +27%
Users +5% Pages/session +5%
Sessions +5% Bounce rate -11%

PUBLISHED ONLINE
4 infographics
28 blog posts
52 news pieces
5 webinars

PRESS
8 press releases
24 items of press coverage

PRESS COVERAGE
8 press releases
24 items of press coverage

NEWSLETTERS
12 monthly newsletters
68 bulletins

NEWSLETTERS SUBSCRIBERS
Monthly Newsletter 2,781
Climate & energy 160
Pharmaceuticals 143
Safer Chemicals 112
Procurement 90
Sustainable & healthy food 107
Waste/Resources 105
WEBINARS

Safer pharma: How healthcare can reduce pharmaceutical pollution

May

This webinar was hosted in association with the GGHH network and was created with the aim of raising awareness about the issue of pharmaceutical pollution and showed participants how they could apply newly gained knowledge in their daily practice.

Innovation procurement of food & catering services for the healthcare sector

September

This webinar was hosted as part of the EcoQUIP project and focused on innovation procurement of food and catering services for the European healthcare sector. The webinar featured case studies and policy context, as well as gave an introduction to the theories and practice of innovation procurement itself.

Antimicrobial resistance: The environmental impact

November

This webinar was co-organised by HCWH Europe and HCWH Asia, and aimed to raise awareness about the issue of AMR and its environmental impact. It also enabled participants to apply newly gained knowledge in their daily practice.

How the healthcare sector can mitigate climate change through sustainable procurement

November

In this webinar, HCWH Europe showcased the procurement strategies that two European healthcare systems have adopted to mitigate climate change. The webinar begins with a presentation about the European commission Green Public Procurement (GPP) criteria and how this voluntary instrument encourages the public sector (including healthcare), to mitigate climate change.

The new Medical Devices Regulation - An engine for EDC substitution?

November

The new Medical Devices Regulation addresses the presence of CMRs and EDCs contained in medical devices. This webinar explored how these new rules will work in practice, and examples of substitutions that already exist both on the side of procurement and on the supply side were presented.

Food waste in European healthcare

December

This webinar demonstrated how food waste has been reduced in healthcare facilities through national and hospital-centred policies, with examples from Ireland, the Gentofte Hospital in Copenhagen, Denmark, and from a pan-European survey carried out by HCWH Europe.

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INFOGRAPHICS

Simple steps to reducing carbon emissions from healthcare January

This infographic uses the example of innovative steps taken by Region Skåne in Sweden in the procurement of disposable gloves to show how healthcare institutions can take simple steps to reduce their carbon emissions.

Non-toxic healthcare: Reducing risks with safer alternatives March

This infographic serves as a visual tool to help medical professionals, legislators, and the general public understand the problems associated with EDCs, their presence in healthcare and in the home, and successful cases in which they have been phased out.

Mercury: A major environmental and public health concern July

This infographic seeks to highlight the presence and sources of mercury, as well as its effect on human and environmental health.

Antimicrobial Resistance (AMR) November

This webinar aims to visually present the problems associated with AMR and the ways in which the pharmaceutical industry, medical professionals, and the general public can help to solve these.
Greenhouse gas emissions are resulting in increasingly dangerous environmental events and public health consequences—and are leading to a growing awakening of medical professionals and providers. Climate change has a range of complex health impacts, including temperature-related illness and deaths, injuries and illnesses due to extreme weather events, the spread of infectious disease vectors, increases in waterborne illnesses, and wide-ranging impacts from air pollution.

Health professionals are going to be on the front lines of any climate-related disaster, responding to public health impacts. Overall, the need to treat illness and disease due to climate-related changes in our environment will continue to increase.

At the same time, the healthcare sector will experience the climate crisis in its own operations, characterised by dramatically increasing energy costs, projected instability in the electricity service provision grid, and intensified stress placed on community health services, especially in times of disaster. On a direct financial level, energy costs are already squeezing operating margins and hijacking monies needed for other critical healthcare issues—many of which will only worsen due to future climate change.

In 2016, HCWH Europe followed the development of the 2030 Climate and Energy Package. To this end, the organisation co-signed a number of letters calling on the European Commission to raise its climate ambition, in order to comply with the 2015 Paris Agreement.

**POLICY WORK**

**CLIMATE & ENERGY**

**INTRODUCTION**

Greenhouse gas emissions are resulting in increasingly dangerous environmental events and public health consequences—and are leading to a growing awakening of medical professionals and providers. Climate change has a range of complex health impacts, including temperature-related illness and deaths, injuries and illnesses due to extreme weather events, the spread of infectious disease vectors, increases in waterborne illnesses, and wide-ranging impacts from air pollution.

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In 2016, HCWH Europe followed the development of the 2030 Climate and Energy Package. To this end, the organisation co-signed a number of letters calling on the European Commission to raise its climate ambition, in order to comply with the 2015 Paris Agreement.
INTRODUCTION

While pharmaceuticals provide many benefits to human and veterinary health, the production, use, and disposal of pharmaceuticals present a threat to ecosystems worldwide. Over 631 different pharmaceutical agents or their metabolites have been detected in the environment in 71 countries on all continents. A report from the German Federal Environment Agency (UBA) states that about 4,000 active pharmaceutical ingredients (APIs) are available in prescription medicine globally, making the true amount of pharmaceuticals present in the environment potentially much higher. APIs are designed to be highly biologically active in humans and can have unintended effects on other species. Even low amounts of APIs in the environment can have far-reaching effects on ecosystems.

A number of EU policies deal with specific aspects of pharmaceuticals, but so far none have managed to halt or reduce pharmaceutical pollution.

In 2016, HCWH Europe raised awareness amongst healthcare professionals, policy makers, and the general public about the harmful effects of pharmaceuticals in the environment.

SUCCESS

On the 6th September, HCWH Europe hosted a one day workshop, Pharmaceuticals in the environment: Make ideas work! Taking place in Brussels, HCWH Europe welcomed over 60 participants from 8 countries and heard from 16 expert speakers about the issue of pharmaceuticals in the environment from a European, national, and scientific perspective.

HIGHLIGHTS FROM 2016

In May, HCWH Europe hosted a webinar entitled Safer Pharma: How healthcare can reduce pharmaceutical pollution. The webinar was hosted in association with the GGHH network and was created with the aim of raising awareness about the issue of pharmaceutical pollution and showed participants how they could apply newly gained knowledge in their daily practice.

In October, the organisation launched the Safer Pharma campaign. The campaign aims to challenge the pharmaceutical industry to take action to reduce its environmental impact, raise awareness amongst healthcare professionals about the problems associated with pharmaceuticals in the environment and letting them know what they can do to help, and help citizens to understand what they can do to minimise pharmaceuticals in the environment.

The first action of the campaign was a petition open to the public, which encourages the public to press the European Commission to develop a plan to deal with the issue of pharmaceutical pollution in the environment.

In November, HCWH Europe hosted a webinar, Antimicrobial resistance: The environmental impact. The webinar was co-organised by HCWH Europe and HCWH Asia, and aimed to raise awareness about the issue of AMR and its environmental impact. It would enable participants to apply newly gained knowledge in their daily practice.

The webinar coincided with the release of the HCWH Europe infographic on AMR, which aims to visually present the problems associated with AMR and the ways in which the pharmaceutical industry, medical professionals, and the general public can help to solve these.

Also in November, HCWH Europe was shortlisted for its work on awareness, and promoting prevention and reduction steps to reduce AMR. This includes the Safer Pharma campaign working to reduce pharmaceuticals in the environment - a contributing factor to antimicrobial resistance.

December saw the release of the the antimicrobial resistance (AMR) factsheet, Reducing antimicrobial resistance: How health professionals can help. The brochure examines the impact of AMR on our society, the problems associated with it, and some concrete steps that health professionals can take to help reduce AMR.

In December, HCWH Europe also launched an animated video for the Safer Pharma campaign. The video aims to introduce the problem of pharmaceutical pollution, as well as outlining some steps that the pharmaceutical industry, healthcare professionals, and the public can take to reduce the prevalence of pharmaceuticals in the environment.

INTRODUCTION

The ubiquitous exposure to harmful chemicals in everyday life has increasingly become a health concern. Unfortunately, many products used in healthcare can contribute to hazardous exposures, including cleaners and disinfectants, phthalates in medical devices, mercury in thermometers and sphygmomanometers (now banned in Europe), and mercury in dental amalgam. A growing body of scientific research is raising the level of concern about the health impacts of chronic chemical exposures, and HCWH Europe is working to lobby for legislation to reduce the amount of harmful chemicals used in healthcare, in order to protect public health and the environment.

EDCS - MEDICAL DEVICES REGULATION

To this end, HCWH Europe have closely followed the development of the Medical Devices Regulation in the EU. The initial European Commission proposal for a Medical Devices Regulation was published half a decade ago, in July 2012.

HCWH Europe’s main objective in engaging in this policy process was to help phase out Endocrine Disrupting Chemicals (EDCs), chemicals that are carcinogenic, mutagenic, or toxic for reproduction (CMRs), and particularly phthalates in medical devices (MD) if safer alternatives are available and technically feasible.

CHEMICALS

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Cover of ‘Reducing Healthcare’s Climate Footprint’ report (December)

Axel Singhofen (European Parliament) speaking at the ‘Make ideas work!’ workshop (September)

Panel discussion at the ‘Make ideas work!’ workshop (September)
SUCCESS
On 15th June 2016, the agreed text for the medical devices regulation was adopted by the ENVI Committee of the European Parliament. While HCWH Europe welcomed the strengthening of legislation for medical devices, unless adequate criteria for the definition of EDs were in place, this regulation could be greatly undermined.

MERCURY
Mercury is used throughout health care in a wide variety of products. The most common healthcare-specific devices are thermometers and sphygmomanometers and the healthcare sector as a significant contributor of mercury pollution.

Mercury is a metal which is toxic for humans and wildlife. High doses can be fatal; even low doses of mercury compounds can have serious neurodevelopmental effects, damaging the cardiovascular, immune and reproductive systems. Recent research indicates that, for some parts of the population, there is no such thing as a safe exposure level for mercury.

Although mercury thermometers were banned from sale in the EU, there are many still in circulation. Blood pressure devices, which may still contain mercury, remain a cause for concern. Fortunately cost-effective, non-mercury alternatives exist for nearly all uses of mercury in health care.

Mercury is also used in dental amalgam fillings, and this is where HCWH Europe focussed its policy work in 2016. Throughout the year, the organisation continued to advocate for more stringent measures to protect public health and the environment, and highlighting the harmful effects of mercury to policy-makers and healthcare professionals.

SUCCESS
HCWH Europe’s advocacy efforts (along with other organisations) resulted in an agreement to phase out dental amalgam for children and breastfeed- ing women as of 1st July 2018. HCWH Europe welcomed this decision but also feel that the phase-out should have gone further. Only a full phase-out will truly address what is now the largest source of mercury in the EU—dental amalgam.

NANOMATERIALS
In the healthcare sector, nanomaterials offer the prospect of a wide range of medical applications such as improved drug solubility, drug delivery systems, cellular and tissue repair systems, diagnostic and imaging tools, and therapeutic medicines that can target specific diseased tissues within a patient’s body.

HCWH Europe believes that nanomedicine may offer advantages and innovative solutions to some of our current health problems. However, HCWH Europe are also concerned that some of the new properties of nanomaterial products, while desirable from a strictly clinical perspective, can introduce new risks for human health and the environment.

In 2016, HCWH Europe joined with other NGOs, trade unions, and consumer groups in expressing our disappointment with the European Commission’s continuing failure to propose adequate measures for the collection and publication of information about nanomaterials on the EU market.

After an impact assessment process that lasted several years, and even before its finalisation and approval by the Regulatory Scrutiny Board, the Commission has decided against an EU nanomaterial registry. Instead, it has opted to task the European Chemicals Agency (ECHA) to develop a nanomaterial observatory.

HIGHLIGHTS FROM 2016
EDCS
In February 2016, HCWH Europe Deputy Director Grazia Ciocci appeared on the Dutch TV show Radar to talk about the 2014 HCWH Europe Non-Toxic Healthcare report as well as the general problem of EDCs in healthcare and the steps forward for the healthcare sector in Europe.

In March, HCWH Europe released its EDCs infographic, Non-toxic healthcare: Reducing risks with safer alternatives. The infographic was a visual tool to help medical professionals, legislators, and the general public understand the problems associated with EDCs, their presence in healthcare and in the home, and successful cases in which they have been phased out.

Following the publication of the new set of criteria for the definition of EDs on 9th November, HCWH Europe wrote a number of letters to all the EU Member State representatives sitting on the Biocides Committee – the competent authority that is part of the approval process of the new set of criteria. A similar letter was also sent to all EU Member State’s Health Ministers as well as to all the members of the ENVI Committee of the European Parliament. In these letters, the organisation reiterated its deep concern regarding the ongoing discussion on the elaboration of the EDC criteria, focusing specifically on how inappropriate criteria could undermine the Medical Devices Regulation.

Also in November, HCWH Europe hosted a webinar, The new Medical Devices Regulation – An engine for EDC substitu- tion? The new Medical Devices Regulation addresses the presence of CMRs and EDCs contained in medical devices. This webinar explored how these new rules will work in practice, and examples of substitutions that already exist both on the side of procurement and on the supply side were presented.

MERCURY
In July 2016, HCWH Europe released its Position Paper on the proposed Mercury Regulation in the EU. In the paper, HCWH Europe advocated for the adoption and implementation of legally binding instruments that would reduce mercury in the global environment to a minimum, as the effects of the presence of mercury on both health (human and animal), and the environment are of great concern. In this extensive report into the issue of mercury as an environmental and public health concern, the organisation clarified its position with a specific focus on dental amalgam and the proposed measures from the European Commission.

The position paper was released alongside an infographic, Mercury: A major environmental and public health concern, which sought to outline the presence and sources of mercury, as well as its effect on human and environmental health.

Also in November, HCWH Europe co-signed a series of letters calling on EU Member States to align their views to the report of the European Parliament on the proposed Mercury Regulation issued by the European Commission in February 2016. Following the agreement on the dental amalgam ban for children and pregnant breastfeeding women in December, HCWH Europe joined with other NGOs and civil society organisation in welcoming the decision while stating that it should have gone further, as a full phase out would have truly addressed the largest presence of mercury in the EU—dental amalgam.
Healthcare facilities across Europe are recognizing that the food system — how our food is produced and distributed — is misaligned with dietary guidelines, and is largely reliant on methods of production and distribution that harm public and environmental health.

A succession of surveys and official reports has highlighted public dissatisfaction with the food on offer in healthcare facilities and concern among regulators that the health of patients is being undermined. It is not only public health that is affected by the meals served on wards; food procured by hospitals and the way it is produced, processed, and transported can have a profound effect on the environment: over 30% of Europe’s greenhouse gas emissions come from the food and drink sector.

By adopting healthy food purchasing policies, healthcare organizations are demonstrating a commitment to HCWH’s mandate - first, do no harm - and treating food, its production and its distribution as preventive medicine that protects the health of patients, staff and communities.

In 2016 worked to influence the policy debates regarding sustainable and healthy food in the healthcare sector.

HIGHLIGHTS FROM 2016

In September, HCWH Europe hosted a webinar, Innovation procurement of food & catering services for the healthcare sector. The webinar featured case studies and policy context, as well as an introduction to the theories and practice of innovation procurement itself.

At CleanMed Europe 2016 in Copenhagen in October, HCWH Europe organised a workshop entitled Sustainable and Healthy Food in Healthcare. The workshop was hosted by Gentofte Hospital in Copenhagen and gathered over 30 experts from hospitals, academia, non-profit organisations, and municipalities, who shared their best practices and experiences from their countries on the two main topics of the workshop: sustainable and healthy food and food waste.

At the same event, HCWH Europe also launched its Healthy & Sustainable Food in Healthcare Pledge. Some of the aims of the pledge are to: improve the quality of hospital food by ensuring that they serve fresh, local, seasonal and organic food as much as possible, to patients, staff, and visitors alike, offer more plant-derived food, and commit to shortening the supply chain and strengthening the local economy.

In November, the organisation released its Food waste in European healthcare settings brochure. The brochure contains case studies from seven hospitals from four European countries (Denmark, France, Spain, and the UK), two national initiatives from Ireland and The Netherlands, and two regional programmes from Denmark and Sweden. Examples from these institutions, whose experiences can serve as a model and inspire others, as well as some recommendations for the future, are described in detail.

In December, HCWH Europe hosted another webinar, which was also focused on food waste in European healthcare. The webinar showcased the brochure, demonstrated how food waste has been reduced in healthcare facilities through national and hospital-centred policies, with examples from Ireland, the Gentofte Hospital in Copenhagen, Denmark.

In November, the organisation released its Fresh, healthy, and sustainable food: Best practices in European healthcare report. The report takes a look at the work carried out in healthcare facilities across Europe on providing healthy, local, seasonal, and organic food and in preventing and reducing food waste. The main aim of the report is to highlight the common challenges in implementing healthy and sustainable food policies in some European hospitals, and to provide some examples of leading institutions that could inspire and encourage others to follow suit.
In October 2016, over 250 participants from 26 countries and five continents came together to discuss and plan strategies around sustainable healthcare during Europe’s leading conference on the issue. Delegates engaged in a range of pre-conference events at four hospitals in Copenhagen and also a tour of the UN City building, including the first Global Green and Healthy Hospitals (GGHH) members meeting in Europe. Delegates were also presented with nine exhibitors on display from a wide range of companies exhibiting products and services aimed at the healthcare sector.

The conference officially launched with the European premier of Health Care Without Harm’s *Do No Harm* video, highlighting the organisation’s history and work over the last 20 years in the field of sustainable healthcare. The five plenaries at the 2016 conference focused on topics such as healthcare and the Sustainable Development Goals, procurement, leadership, the GGHH network, and divesting from fossil fuels. There were 21 diverse plenary speakers, from local and national authorities, research institutions, hospitals, and U.N. departments. Innovation and international collaboration were key themes arising from all these plenary sessions as a way forward towards sustainable healthcare.

Across the three-day conference delegates also had a choice of 24 parallel sessions dealing with topics such as: chemicals, pharmaceuticals, procurement, and the carbon footprint of healthcare. Aside from the more traditional presentations and sharing of case studies and research, delegates also experienced a more interactive and intimate market lounge session, which was well received.

A number of initiatives were also launched at CleanMed Europe 2016, including the Healthy and Sustainable Food in Healthcare Pledge, and the Safer pharma campaign. HCWH Europe also outlined the goals and projected activities of the newly established European Healthcare Climate Council, and invited participants to join this movement towards low carbon healthcare.

HCWH Europe would like to thank UN City and its other supporting partners - UNFPA, UNDP and the Capital Region of Copenhagen - for their support and contribution. Thanks also to the conference sponsors: Johnson & Johnson and Novo Nordisk (gold sponsors), and BD and Philips (silver sponsors) for their generous support.

For more detailed daily summaries of the conference, the programme, and to see featured presentations, visit: cleanmedeurope.org.

@CleanMedEurope  CleanMedEurope
Health Care Without Harm is an international organisation, and has regional offices on four continents, partners around the world, and a number of global and regional initiatives.

Health Care Without Harm comprises:

- Four regional offices (based in Buenos Aires, Brussels, Manila, and Washington DC) that develop regional work and initiatives in Latin America, Europe, South East Asia, and the United States, respectively. Global staff also facilitate programs with global impact, including (but not limited to) Global Green and Healthy Hospitals - a worldwide network of hospitals and health systems acting together for environmental health.
- Strategic partners that represent our interests and lead the development and implementation of HCWH-related work in Australia, Brazil, China, India, Nepal, and South Africa.
- Practice Greenhealth, a nonprofit health care sustainability membership organisation, and Greenhealth Exchange, a green purchasing cooperative, both based in the United States.

The guiding and decision-making body of HCWH is the International Council, composed of the Executive Directors from each region, the President and co-founder of HCWH, and the International Director for Program and Strategy.

GLOBAL GREEN AND HEALTHY HOSPITALS

GGHH is an international network of hospitals, health care facilities, health systems, and health organisations dedicated to reducing their environmental footprint and promoting public and environmental health.

The GGHH network has more than 805 members in 47 countries on six continents who represent the interests of over 25,600 hospitals and health centres. GGHH members are using innovation, ingenuity, and investment to transform the health sector and foster a healthy, sustainable future.

In 2016 GGHH’s global membership grew by 16%, steadily expanding into six additional countries: Honduras, Italy, Kuwait, Malaysia, Peru, and Sri Lanka. The growth was spread across the world, with new health systems, hospitals, health centers, and organisational members on every continent.

In 2016, GGHH membership in Europe grew to include 52 members representing 7,214 hospitals and health care facilities.

During CleanMed 2016 in October, GGHH hosted its first community meeting in Europe, with representatives from hospitals and health systems from Norway, Sweden, Iceland, and Germany. Both member and non-member participants learned about GGHH and the resources and...
tools it provides to support the health sector in implementing sustainability. The group also participated in discussions to share their experiences and approaches to reducing their environmental footprint. It was a great opportunity to deepen relationships with current members and invite prospective members to join the network.

One of the flagship programmes coordinated by the GGHH network is the 2020 Health Care Climate Challenge. The Challenge is an initiative to mobilise healthcare institutions around the globe to protect public health from climate change.

Since launch of the Challenge in 2015, 131 institutions, representing the interests of over 9,000 hospitals and health centers from 20 countries around the world, have joined. In 2016, GGHH recognised the achievements of participants in the 2020 Challenge with Climate Champion Awards. A total of 28 organisations from around the globe received awards for their dedication to and success in the three pillars of the Challenge. Members from France, Sweden, UK, and Germany were recognised as part of the awards, the winners of which are innovating and investing to transform the health sector and foster a healthy future for the planet.

2016 also saw the launch of the Hippocrates Data Centre - the first international platform of its kind designed for the health sector to measure actions towards reducing its environmental footprint. This new, cutting edge resource puts the power of data management, goal benchmarking, and progress tracking into the hands of every GGHH member. Housed on GGHH Connect, Hippocrates allows members to track, store, and visualise their data on a secure web-based platform. To find out more about GGHH, and how to become a member and benefit from its many programmes and resources, visit greenhospitals.net.
FINANCES

INCOME
- EU Commission DG Environment € 371,653.51
- HCWH US € 69,230.97
- German Environment Ministry € 60,000.00
- Oak Foundation € 25,000.00
- CleanMed Income € 143,576.00
- Other Income € 10,205.17
- Reserve 2016 - € 29,170.65

Total € 650,495.00

EXPENDITURE
- Salary € 375,560.11
  - of which 17.7% related to CleanMed € 66,356.75
- External Assistance € 86,860.80
  - of which 38.3% relate to CleanMed € 33,280.77
- Travel & Subsistence total € 58,478.54
  - of which 17.1% relate to staff travel to CleanMed € 10,006.89
  - of which 39.4% relate to staff other travel € 23,069.78
  - of which 6.9% relate to members travel to CleanMed € 4,028.63
  - of which 36.5% relate to members other travel € 21,373.24
- Rent Office € 22,700.00
- Other Direct Cost € 94,304.25
  - of which 34.6% relate to CleanMed € 31,475.26
- Depreciation € 6,265.52
- Financial Cost € 6,325.78
  (Bankcharges, Exchangerate loss)

Total € 650,495.00

THANK YOU!

HCWH Europe would like to thank all our funders and supporters who have given generously to help make our work possible this year. HCWH Europe 2016 funders: The EU Commission, DG Environment, HCWH US & Canada, the German Environment Ministry, the German Environment Agency, and the Oak Foundation.

If you want to find out how to support our work visit www.noharm-europe.org/content/europe/get-involved, or alternatively contact us: europe@hcwh.org.
Health Care Without Harm (HCWH) Europe is the European arm of a global not for profit NGO whose mission is to transform healthcare worldwide so that it reduces its environmental footprint, becomes a community anchor for sustainability and a leader in the global movement for environmental health and justice. HCWH’s vision is that healthcare mobilises its ethical, economical, and political influence to create an ecologically sustainable, equitable, and healthy world.

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