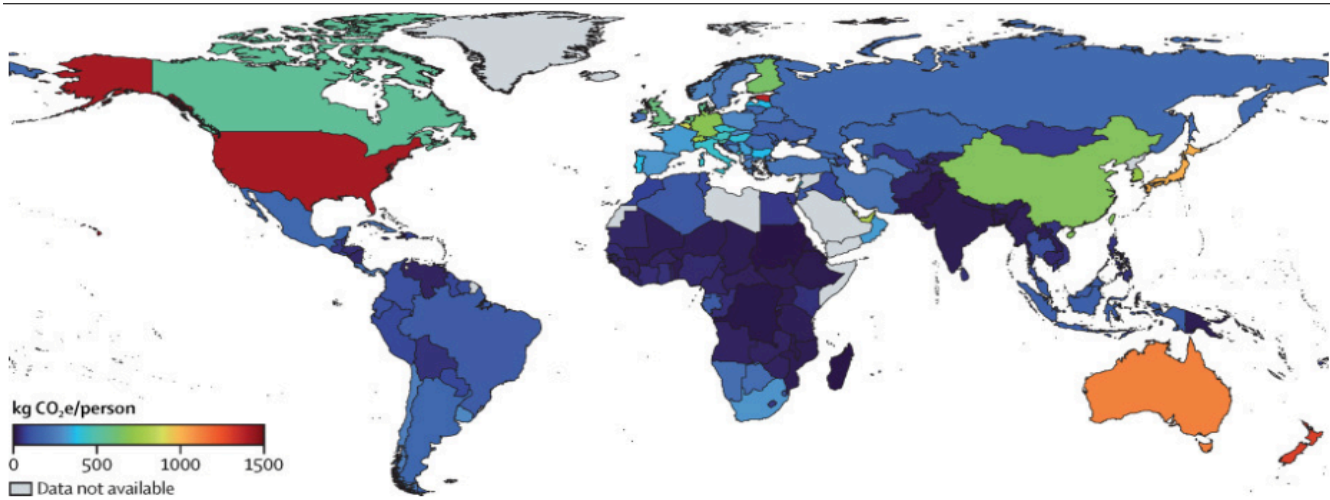


Dear Commissioner and Deputy Commissioners of Health New Zealand

## Re: Opportunity to strengthen a high value workstream

We write to highlight the responsibility of HealthNZ to strengthen its commitment to environmentally sustainable healthcare (ESHC). ESHC reduces financial costs, improves the health of the populace, and corrects the disturbingly carbon-intensive and polluting industry that is healthcare. New Zealand (through HealthNZ) is yet to significantly realise these benefits, as our health sector's per capita greenhouse gas footprint is in the top 5 in the world (see Figure below from 2023 report of the Lancet Countdown on Health and Climate Change).



### ***National GHG emissions per capita from the health-care sector in 2020***

You are likely already aware of the considerable cost benefits of environmentally-responsible practices. They curb resource use, reduce waste, and save money, while also improving patient experience and health outcomes. Swift action now - curtailing the environmental impact of healthcare - also reduces the scale of future climate disasters and their resultant health costs. Lack of action increases the likelihood and costs (healthcare, societal) of these disasters.

HealthNZ has a Sustainability Team with high expertise, but it is comparatively under-resourced, relative to other Western countries. The team appears to have insufficient FTE to action the array of high-value programmes that they could implement. We petition that there be no cuts to this team, and that instead the resourcing for this critical workstream be increased.

The maintenance and progression of this work affords a great deal of value:

- Partnering on matters that impact many clinicians, and indeed the public
- Wise stewardship of health and planetary resources
- Resonance with clinicians' training and professional oath
- Improved equity and quality of care for patients
- Wise use of financial resources
- Achieving government targets and goals (eg Paris Agreement)
- Alignment of HealthNZ with governmental [procurement guidelines](#).

As health professionals within the NZ health system, we wish to highlight the important relationship between ESHC and patient outcomes, clinician morale, staff retention, institutional well-being, and the health of future generations. This is also an equity issue, as Māori and Pacific Peoples are, (similar to other underserved peoples around the world) disproportionately affected by climate change and environmental degradation.

## Collaboration to implement ESHC clinical programmes

Collaboration between locally-embedded clinicians and a strong central HNZ Sustainability Team helps improve success in using our resources judiciously. Examples of collaboration in action include the “Choosing Wisely” and the “Skin in the Game” (glove reduction) campaigns. HealthNZ’s Sustainability Team can provide many further examples of collaboration that simultaneously improve patient care, ESHC principles and the financial bottom line.

Clinicians must model and lead the practice change required to maintain quality care while avoiding unnecessary imaging, IV lines, antibiotic (indeed all pharmaceutical) use, and procedures. However, for these programmes to go forward it is also essential to have an organised team with sufficient paid FTEs to institute and maintain the actions. This team includes regionally-based clinicians, alongside the sustainability and procurement specialists and other relevant professionals in the HealthNZ Sustainability Team.

Bolstering of the ESHC workstream to strengthen the central team and the networks already forming, would provide visible clinician-HealthNZ collaboration, improve morale, ultimately save money, and allow more ‘feel-good’ communications to be socialised. Numerous reports show improved staff well-being in [workplaces that prioritise sustainability](#). Moreover, clinicians are at their most engaged when best patient care also aligns with responsible use of financial and natural resources.

## Our entreaty to preserve morale

Clinicians on the front-line and beyond already treat increasing numbers of victims of climate change and environmental degradation - people with ailments such as respiratory and allergic conditions, trauma, mental health problems, and much more. It would be very demoralising to learn of any cuts made to the already inadequately-funded ESHC initiatives while increasingly treating patients facing the repercussions of climate change and insufficient action.

The ideal model is one with clinicians in regional leadership roles working alongside the national HNZ Sustainability Team, who have capacity to oversee, coordinate and liaise with other HNZ structures.

By adopting ESHC, we have an opportunity to create financial and clinical benefits for everyone across the patient journey. We entreat you to empower staff to drive the change that is needed, by expanding clinical input in ESHC to 1 FTE per region and to widen the nonclinical HNZ Sustainability team.

We respect the immense time pressures of your position. If you so desire, we are eager to discuss with you more about this work and to provide you with specific examples of ESHC in practice. We encourage you to prioritise this value-rich and resource-preserving approach to healthcare delivery within HealthNZ. Thank you for your consideration.

Yours sincerely,

Karen Danenhauer, **Emergency Physician** - Taranaki

Rebecca Randerson, **General Practitioner** - Wellington

John Bonning, **Emergency Physician** - Hamilton

Rob Burrell, **Anaesthetist** - Middlemore

Ricardo Jurawan, **Gastroenterologist** - Taranaki

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