



Proposal for an Environmental Performance Survey of Scottish Haemodialysis Units in Partnership with the Scottish Renal Registry

Background

In 2009, The Centre for Sustainable Healthcare (CSH) partnered with the Renal Association, the British Renal Society, Baxter Healthcare and the NHS Sustainable Development Unit to set up a Green Nephrology programme to support the transformation to sustainable kidney care. The drive for carbon reduction is an increasingly real pressure for NHS organisations with the introduction of UK carbon trading via the CRC Energy Efficiency Scheme in April 2010, the publication of an NHS Carbon Reduction Strategy (January 2009) and the inclusion of sustainability within the Audit Commission's annual performance assessments. Renal services contribute disproportionately to NHS greenhouse gas emissions since they are resource intensive. A carbon footprint analysis of haemodialysis services demonstrated that most emissions come from procurement of equipment and consumables (and the associated waste), buildings construction and maintenance and patient transport ¹. Renal services are among the few specialties that report statistics nationally via the Renal Registries and this directly contributes to their sophistication as a model of care. To this end they are uniquely positioned to lead the way in collecting data that reflects energy and water consumption and set a precedent that will influence the recording and reporting of this type of data by NHS facilities on a wider scale.

Project Outline

A survey has been designed, informed by carbon emission data, to reflect infrastructure, energy consumption, behavior, waste management and water use for dialysis units across Scotland. This information will provide baseline and comparative information but also be used to generate a case to drive up that standard of information made available from estates and facilities departments.

Notes

1. The CSH is mindful that completing surveys adds to the workload of busy NHS staff and to this end we are keen not to duplicate information the SRR may already have requested.
2. Given the above, green representatives may be a more appropriate initial target, rather than steering group members.
3. It is anticipated that many questions **will not be** easily answered since this information is unavailable. Part of the purpose is to identify these areas and highlight them to estates and facilities within hospitals in order to change practice. It should be clear within the survey that time should not be wasted on difficult to answer questions.

1. Connor A, Lillywhite R, Cooke MW. The carbon footprints of home and in-center maintenance hemodialysis in the United Kingdom. *Hemodial Int.* Jan 14 2011 (ePub).