

Green Nephrology Summit 2012

MEETING SUMMARY

The Green Nephrology Summit 2012 was held in London on 26th September, organised by the Centre for Sustainable Healthcare (CSH) and attended by nurses, doctors, technicians, patients, NHS managers, industry representatives, medical students and other interested parties. The aim of the summit was to bring together members of the Green Nephrology Network to share ideas and experience for improving the sustainability of kidney care.

Presentations and workshops

Donal O'Donoghue, National Clinical Director for Kidney Care (keynote speaker)

Sustainable Health and Green Care

Donal commenced by thanking the Centre for Sustainable Healthcare for its achievements in helping sustainability become the seventh dimension of quality. Sustainability should not be an afterthought, it should be a key component of quality right from the beginning. Sustainability is linked closely to patient-centred care, since it is patients who determine the value in what we do, and what is important to one may differ from another. In the UK 10% of our wealth is spent on health: resources are finite so it's a matter of using what we have more efficiently to deliver high value care to patients. We know that the public cares about sustainability: a recent Ipsos MORI poll shows 92% of respondents say the NHS should value sustainability and 19% say it should be a top priority.



Exercise for patients on renal replacement was discussed and the evidence of the benefit of exercise for transplant patients is solid. NHIR is currently offering a grant for a randomised controlled trial on exercise in haemodialysis units.

Ben Wilson – Staff nurse and Green Nephrology Representative at Wirral University Teaching Hospital

Green Nephrology – the journey so far

Ben is involved in Fitter for Health, he cycles to work and composts at home – so he was a shoe-in as the Green Nephrology Champion in Wirral! Until now he has been making time for the role where he could, but is about to have 1 day/month and a small budget allocated to help him pursue green projects.



Ben gave an overview of the history of the Green Nephrology programme, which began in 2009, beginning with his experience of completing the 2009-10 Sustainability Survey of Renal Units, which sparked several ideas and led to recycling of plastic bottles on the Wirral unit. He detailed some of the early case studies, such as telephone clinics in Coventry and grey water usage in East Kent (which he is hoping to introduce in Wirral). The fact that case studies are spreading from one unit to another is evidence of the Green

Nephrology Network's power to help initiate change.

Ben is now sitting on the Trust sustainability board, which is working to encourage the segregation of waste across the whole Trust. Ben also reported that the hospital now reuses unopened blister packs of drugs, saving carbon and money.

Tara Collidge, Consultant Nephrologist and Leigh Bainbridge, Renal Nurse, NHS Glasgow and Clyde.

Workshop 1: Glasgow waste management – scaling cost-saving projects across 6 HD units.

Inspired by the Green Nephrology programme in Fife, the Glasgow team has taken waste reduction and recycling a step further by rolling it out across all six renal units in the service, each with its own link nurse. They have reduced the amount of dialysis waste entering the clinical waste stream by separating packaging for recycling, and eliminating any unnecessary equipment from the set-up process. They have also ended the wasteful use of solid plastic bins in place of clinical waste bags. Altogether they have saved 123 tonnes of CO₂e and £106,910 so far...



Highlights of the Glasgow experience have included using CSH's SAP (sustainable action planning) tool combined with the 1010 Renal Unit Checklist, which together have led them to tackle a wider range of sustainability actions, including water and energy saving, and involvement of patients through bringing their own blankets (reducing laundry), recycling printer cartridges for the NKF, and benefiting from facial packs provided by LUSH in exchange for returned bottle tops! Tele-consults have also been introduced for some patients living in remote areas; these alone have saved 5709 miles of travel and 2.26 tonnes of CO₂e. Unlike England, Scotland doesn't have issues with payment tariffs (which discriminate against non face-to-face outpatient appointments), so telephone clinics have been easier to authorise.

Arif Khwaja – Consultant Nephrologist, Sheffield Kidney Institute and Rob Lillywhite – Senior Research Fellow, University of Warwick.

Workshop 2: Low carbon models of care: remote monitoring in CKD – Sheffield experience.



Rob started his presentation with some facts... On average, a person has an annual carbon footprint of approximately 10 tonnes of CO₂e. A haemodialysis patient contributes an additional 3.8 tonnes CO₂e per annum - a big increase in a person's overall carbon footprint. One of the many areas Rob identified we can improve on was food waste. Total food waste in hospitals ranges from 19% to 66% of the food, according to a study in South Wales. 39% of the roast lamb was thrown away ... and the lamb came all the way from New Zealand!

Dr. Khwaja presented an example of a clinical service change that has produced a measured reduction in CO₂e emissions from patient travel. Patients with chronic kidney disease in the Sheffield area are now offered a consultant-led telephone follow up service, with blood tests and BP/urine monitoring done locally at the GP surgery. Patient satisfaction is high, with patients reporting that they feel more in control of their kidney health since being treated in this way. Transport data shows that the mean distance travelled by patients to access care has fallen from 4 to 0.7 miles, and that car trips have fallen, with a quarter of patients now walking to appointments. The next challenge is to work out a sustainable funding model, since standard NHS funding arrangements do not currently support non face-to-face appointments.



Green Nephrology Awards 2012 – poster exhibition and Awards presentation.



Nine posters from shortlisted entries were displayed in the exhibition, showcasing green projects in renal units with combined savings of £140,000 and 200 tonnes CO₂e each year. Projects entered included paperless lab reporting in Doncaster, central acid delivery in Bradford, waste management in Glasgow, and procurement of smaller volumes of HD concentrate in Kent.

The £500 prize was awarded to James Dixon on behalf of the Newcastle renal unit for their "baling and recycling" project, which has increased the amount of plastic and cardboard waste being recycled in the Trust by 90 tonnes, saving >£7,000/year and 46

tonnes CO₂e in just a few months.

Judges, Beverley Matthews, Director of Kidney Care, Chris Stait, patient representative, and Andy Connor, Green Nephrology Fellow 2009-10 congratulated all the entries. Chris said, "The submissions of the green nephrology awards have highlighted the great achievements of the hospitals and renal units involved. I would encourage all dialysis units and manufactures of dialysis equipment to follow their lead, as millions of pounds and thousands of tons of CO₂ could be saved across the NHS and the UK."

All nine posters may be downloaded from <http://sustainablehealthcare.org.uk/green-nephrology/resources>

Chris Stait, Andy Williamson and William Beale – patient representatives

Workshop 3: Patient Involvement. We can inspire improvements. Sink or Swim.

"We as patients have the power – just because something has always been done doesn't make it right." - William Beale, NKF Green Nephrology patient representative. William put forward a lot of practical suggestions for reducing waste across renal services, based on his own observations.

How to involve patients? Experience from Glasgow and Newcastle suggests that patients are waiting to be asked... let's ask them! Ideas included linking more closely with local Kidney Patients' Associations and national NKF Conference, as well as Green Nephrology information posters and suggestion boxes at renal centres. Posters could encourage patients not to be afraid to challenge staff about environmental concerns.

Green Nephrology could collaborate with patients to develop green guidelines for home dialysis, similar to the 10:10 checklist for renal units.

Renal services and suppliers need to be held to account for their sustainability record – patients are well placed to help with this!



Charlie Tomson – Consultant Nephrologist, Bristol

Workshop 4: Prevention of the Need for High-cost, High-carbon Kidney Care in the NHS

It's time for the specialty to "sow the seeds of our own destruction" – or at least to stop expansion of our patient base.

Primary prevention: the kidney community should work with colleagues in diabetes, obesity and cardiovascular disease to promote healthy lifestyles. In addition, there is a need/opportunity to better educate the general public about what kidneys do, and to educate medical colleagues about management of simple CKD – demystify kidney disease.



Early detection: automated risk assessment, screening of lab results.

Secondary prevention: early CKD is a risk factor for cardiovascular disease. Opportunity to prevent a lot of ill-health if we provide a clear “kidney health plan” / “renal rehab” and support this with skills training in lifestyle change support (e.g. motivational interviewing) for kidney staff. Encourage a culture of “know your numbers”, home BP monitoring, care planning and patient empowerment – including shared decision-making for RRT. Develop clear “sick-day rules” to educate patients on how to minimise harm to their kidneys during intercurrent illness. Risk register & individual case management to encourage early

access to care for high-risk patients in case of problems.

We need to make prevention part of the conversation in renal department business.

Future Directions – feedback and interactive planning. *Facilitated by Charlie Tomson.*

Green Nephrology is giving permission to talk about sustainability as a legitimate part of healthcare. We are encouraging the “greenies” to “come out” – and find that they are in good company!

Feedback was shared from patient involvement and prevention workshops – see above.

The meeting agreed to issue a position statement about the urgency of sustainable healthcare, including a challenge to policy makers to remove financial/commissioning barriers to the use of telemedicine.

Anthony Perkins, Research Nurse, Barwon Health, Australia.

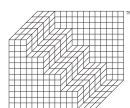
Reflections on the day

Anthony explained that his unit was on a mission to improve the profile of green nephrology in Australia. His visit to the UK was to open a line of communication between the CSH Green Nephrology programme and Australia. The sense of a community and the excellent network that the Green Nephrology programme has established was his particular highlight, and from all the presentations and workshops it was again further highlighted that this results from the success of individual programmes around the UK. He was also impressed by the involvement of patients. Patients are one of the sustainable healthcare movement’s biggest assets: they can make policy makers listen and drive change. And after all, everything we do is for our patients and the environment.



Download slides and position statement from the Summit 2012 at
<http://sustainablehealthcare.org.uk/green-nephrology/resources>

Green Nephrology
Summit 2012
sponsored by:



Buro Happold



PHARMACEUTICAL COMPANIES
OF Johnson & Johnson

Green Nephrology Awards
in partnership with:



Kidney Care