Health NZ – Emissions Reduction

Rick Lomax

Head of Sustainability

Health New Zealand | Te Whatu Ora

Te Kāwanatanga o Aotearoa
New Zealand Government

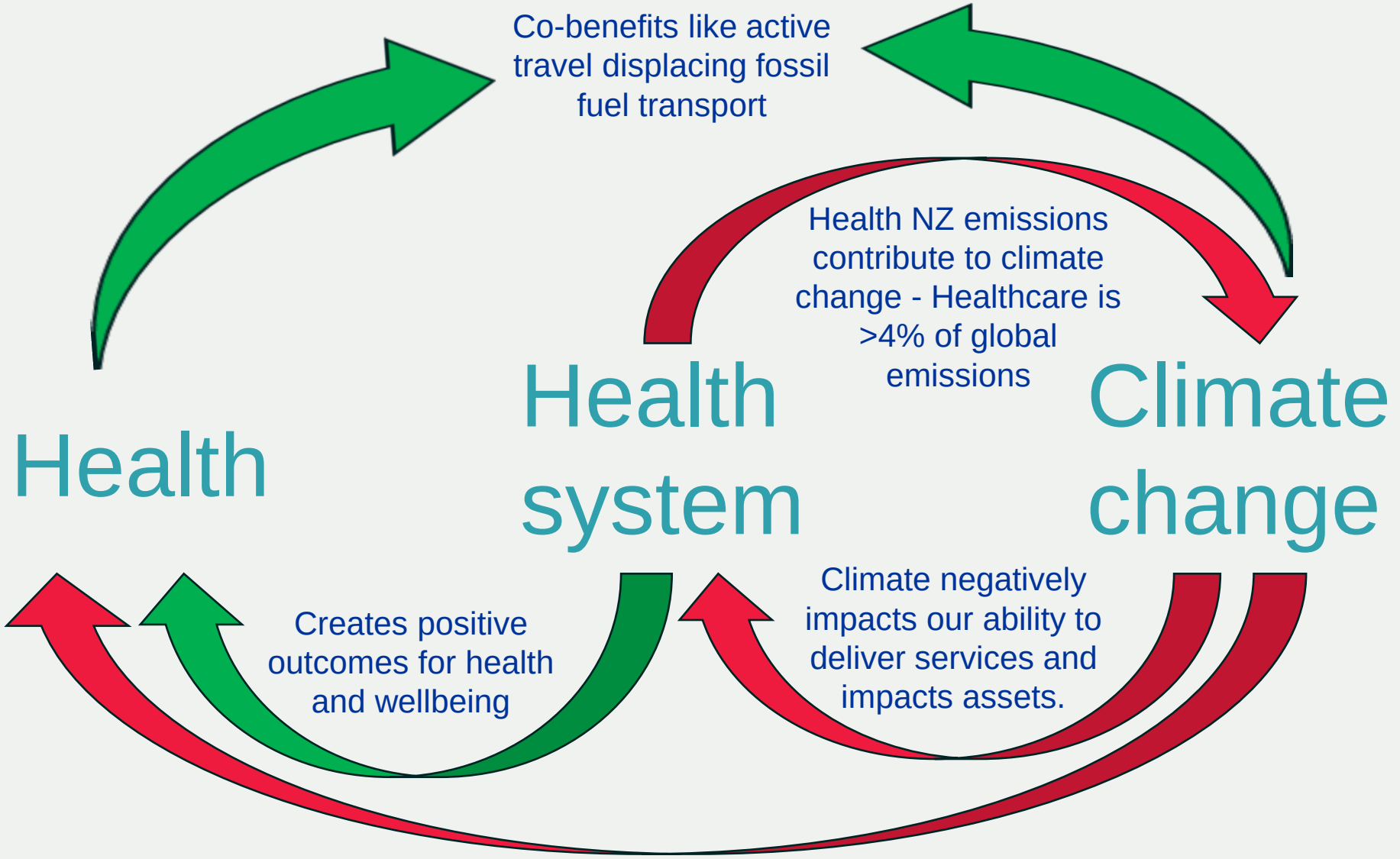
Health New Zealand
Te Whatu Ora

The Why

"*Given the global health imperatives, the NHS must stick to its net zero ambitions.* ***There is no trade-off between climate responsibilities and reducing waiting lists****. Indeed, often health and climate are mutually reinforcing goals: cleaner air is good for the environment and good for respiratory health.*"

Lord Darzi

Independent Investigation of the National Health Service in England 2024



Adapted from Dr D. Pencheon
University of Exeter

Sustainability Function

Strategic integration of sustainability

To integrate sustainability in core strategic, decision making processes and culture.

Health System Decarbonisation

To reduce health system carbon emissions in line with a 1.5-degree scenario.

Environment in All Practices

To realise co-benefits that include the environment alongside health, equity, social and economic values.

Health System Resilience and Adaptation

To ensure sector resilience by planning for and adapting to the impacts of climate change.

Carbon Neutral Government Programme

CNGP participants should:

- measure, verify and report their emissions annually
- set gross emissions reduction targets and longer-term reduction plans
- introduce a plan to reduce their organisation's emissions
- offset remaining gross emissions from 2025 to achieve carbon neutrality

The immediate priority will be to reduce emissions by:

- phasing out coal-fired boilers from the public sector by 2025
- optimising, and where possible transitioning, agencies' car fleets
- requiring NABERSNZ energy ratings for large office spaces

https://environment.govt.nz/what-government-is-doing/areas-of-work/climate-change/carbon-neutral-government-programme/about-carbon-neutral-government-programme/

Emissions reporting scope

Footprint (measured, audited and targets)

- Energy, water, waste and refrigerants
- Fleet, staff business travel and funded patient travel
- Medical gases and vapours

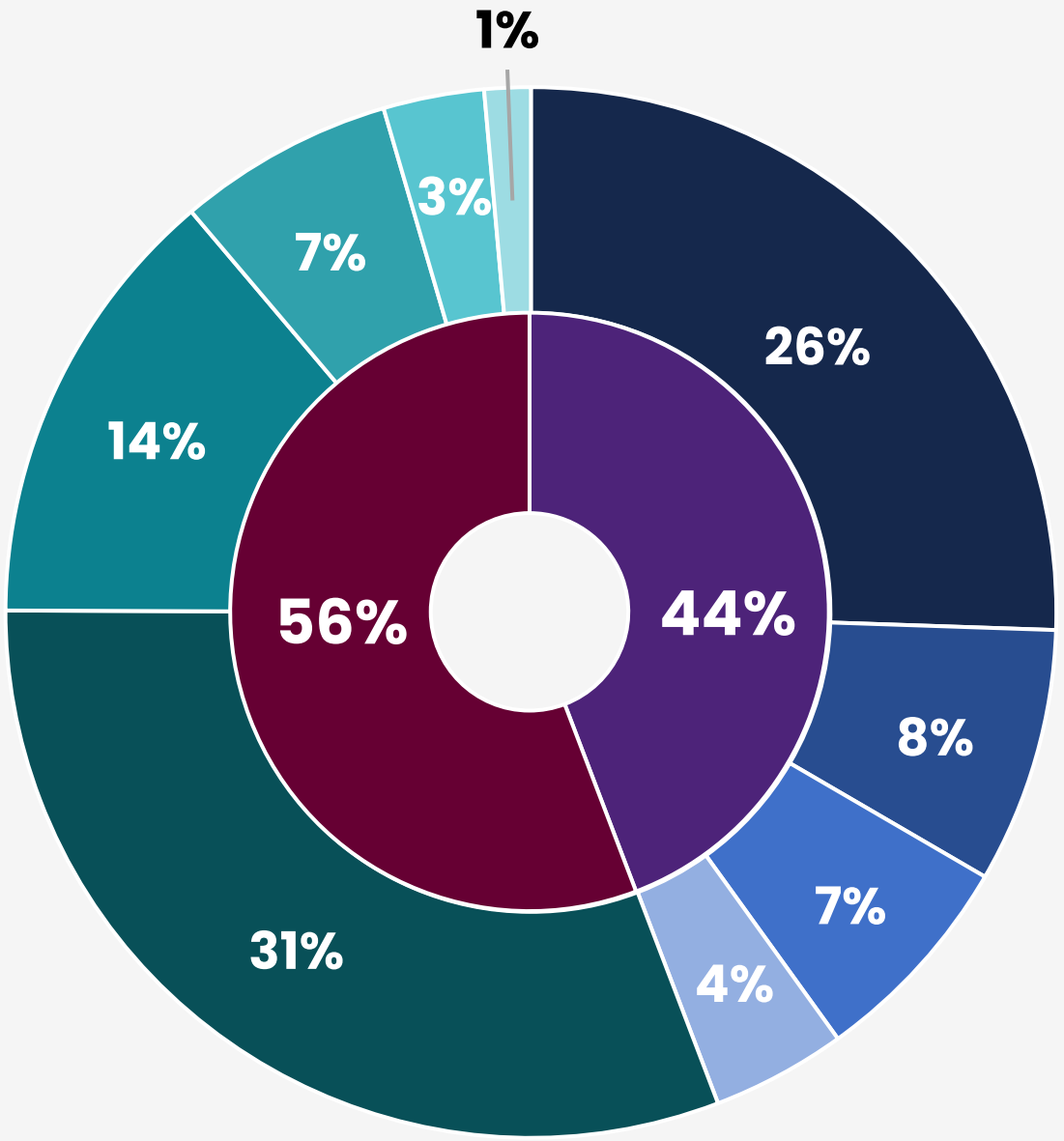
FY23/24 = 205,275 tCO_2e

‘Footprint Plus’

- All other patient travel
- Staff commuting
- Infrastructure embodied emissions
- Purchased goods and services including commissioned healthcare services

FY23/24 Emissions 205,275 tCO_2e

Health Facilities and Offices	Fossil Fuels (Coal, Gas, LPG)
	Electricity
	Medical Gases & Vapours
	Waste Disposal
	Water Use
Travel and Transport	Staff Business Travel
	Emergency Transport
	Funded Patient Transport
	Fleet Vehicles



Publications

Health New Zealand
Te Whatu Ora

Annual Report
Pūrongo-ā-tau
2023/24

Sustainability Report

Quarter Four – Financial Year 1 July 2023 – 30 June 2024

Te Kāwanatanga o Aotearoa
New Zealand Government

Health New Zealand
Te Whatu Ora

Greenhouse Gas Emissions Inventory Report - FY2023/24

Baseline year + 1

Prepared in accordance with ISO 14064-1:2018

Health New Zealand
Te Whatu Ora

Greenhouse Gas Emissions Inventory Report - FY2022/23

Baseline year

Te Whatu Ora
Health New Zealand

Emissions targets

Health NZ's baseline year is FY22/23

Reduce Category 1 and 2 Emissions by 25% by FY24/25

Working to confirm future targets aligned to CNGP science based method & requirements

Progress

~14% reduction in total measured emissions over 12 months (FY22/23 to FY23/24)

24% reduction in Category 1 and 2 emissions (FY22/23 to FY23/24)

Estimated that progress (pre-FY22/23) under 11/20 reporting DHBs reduced 36,750tCO_2e annually (equivalent to 15%)

Reduction Planning

Reduction planning principles

The co-benefits of emissions reduction for the benefit of Health

- Comply with CNGP requirements
- Alignment to the strategic context of Health NZ
- Upstream interventions (as well as efficiency)
- Cross organisational engagement is essential

Upstream interventions

Prevention
Keeping people happy and healthy in the first place, can help short, medium and longer term to avoid and reduce illness.

Early Intervention
Early and timely intervention when people are unwell, can help reduce their condition escalating and requiring more intensive support and treatment

“enhanced access to timely, quality healthcare for everyone”

Faster cancer treatment

90% of patients to receive cancer management within 31 days of the decision to treat.

Improved immunisation

95% of children fully immunised at 24 months of age.

Shorter stays in emergency departments

95% of patients to be admitted, discharged or transferred from an emergency department within six hours.

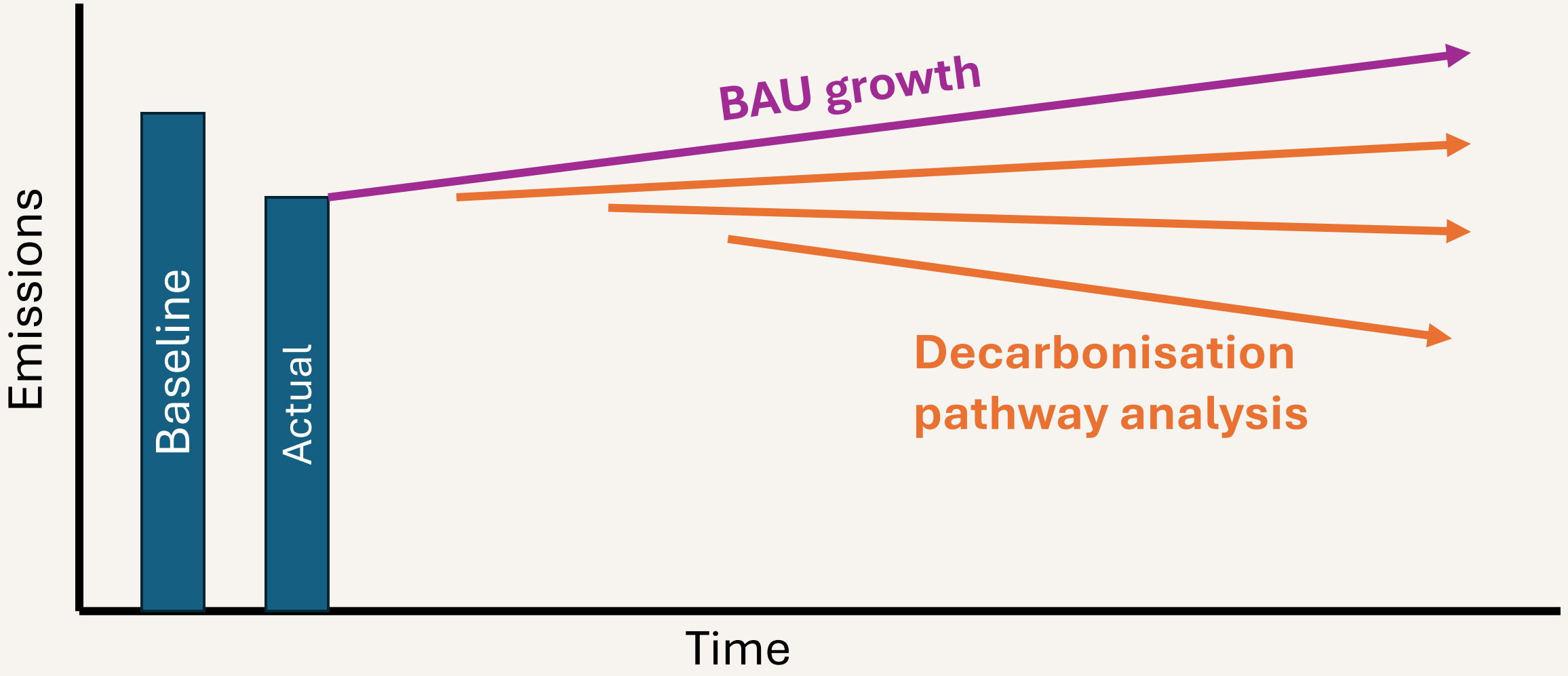
Shorter wait times for first specialist assessment

95% of patients wait less than 4 months for a first specialist assessment.

Shorter wait times for elective treatment

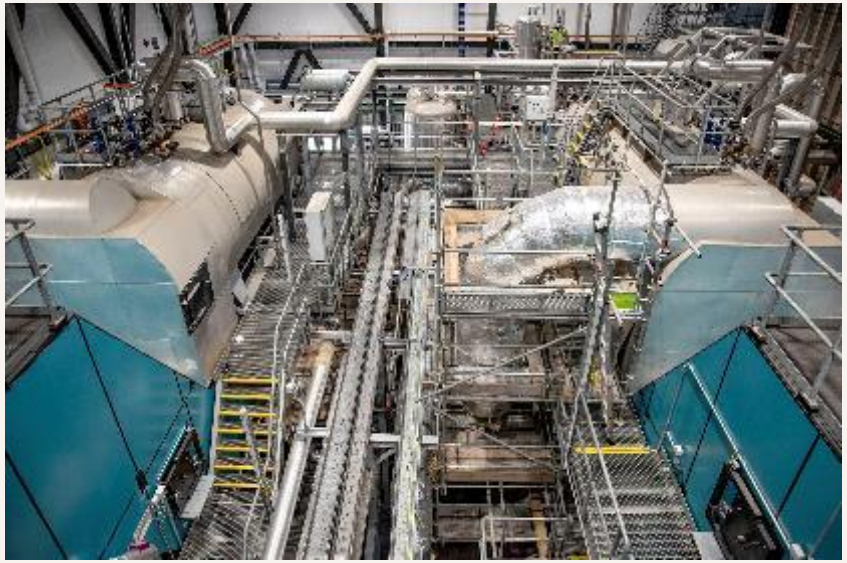
95% of patients wait less than 4 months for elective treatment.

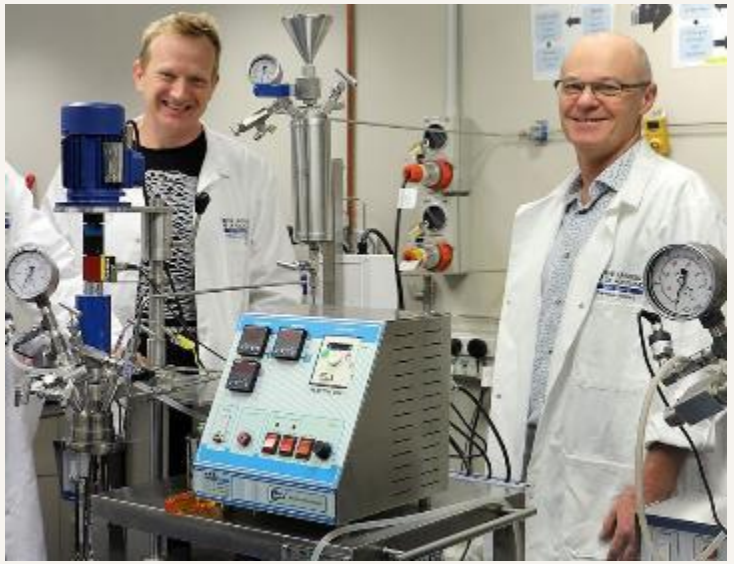
Utilising Modelling



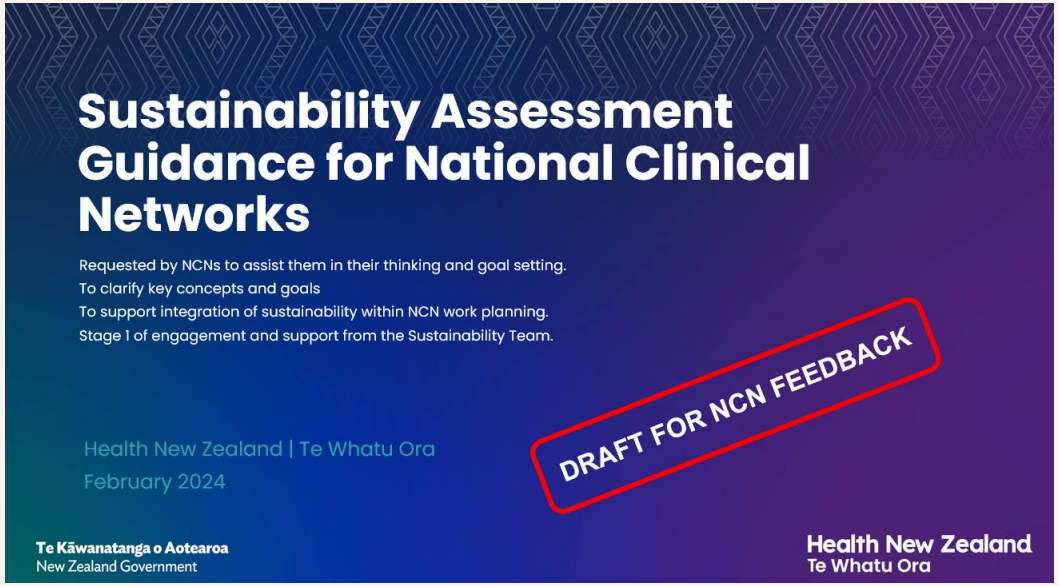
Implementation

Outcomes





In progress


Sustainability Assessment Guidance for National Clinical Networks
Requested by NCNs to assist them in their thinking and goal setting.
To clarify key concepts and goals
To support integration of sustainability within NCN work planning.
Stage 1 of engagement and support from the Sustainability Team.
Health New Zealand | Te Whatu Ora
February 2024
DRAFT FOR NCN FEEDBACK
Te Kāwanatanga o Aotearoa
New Zealand Government
Health New Zealand
Te Whatu Ora


INTERWASTE
INTERWASTE

Future

Collate all of this activity in a single Emissions Reduction Plan, targets and modelling

Exploring alternative commercial models for energy supply

Seeking funding for Energy Transition Programme $40m stage 2

Scale and spread of reprocessing, remanufacturing, waste minimisation trials.

Continued early integration of emissions reduction and sustainability into decision making

Fleet – optimisation, national policy and planning

Thank you

Questions?

Rick.Lomax@tewhatuora.govt.nz

hnzsustainability@tewhatuora.govt.nz