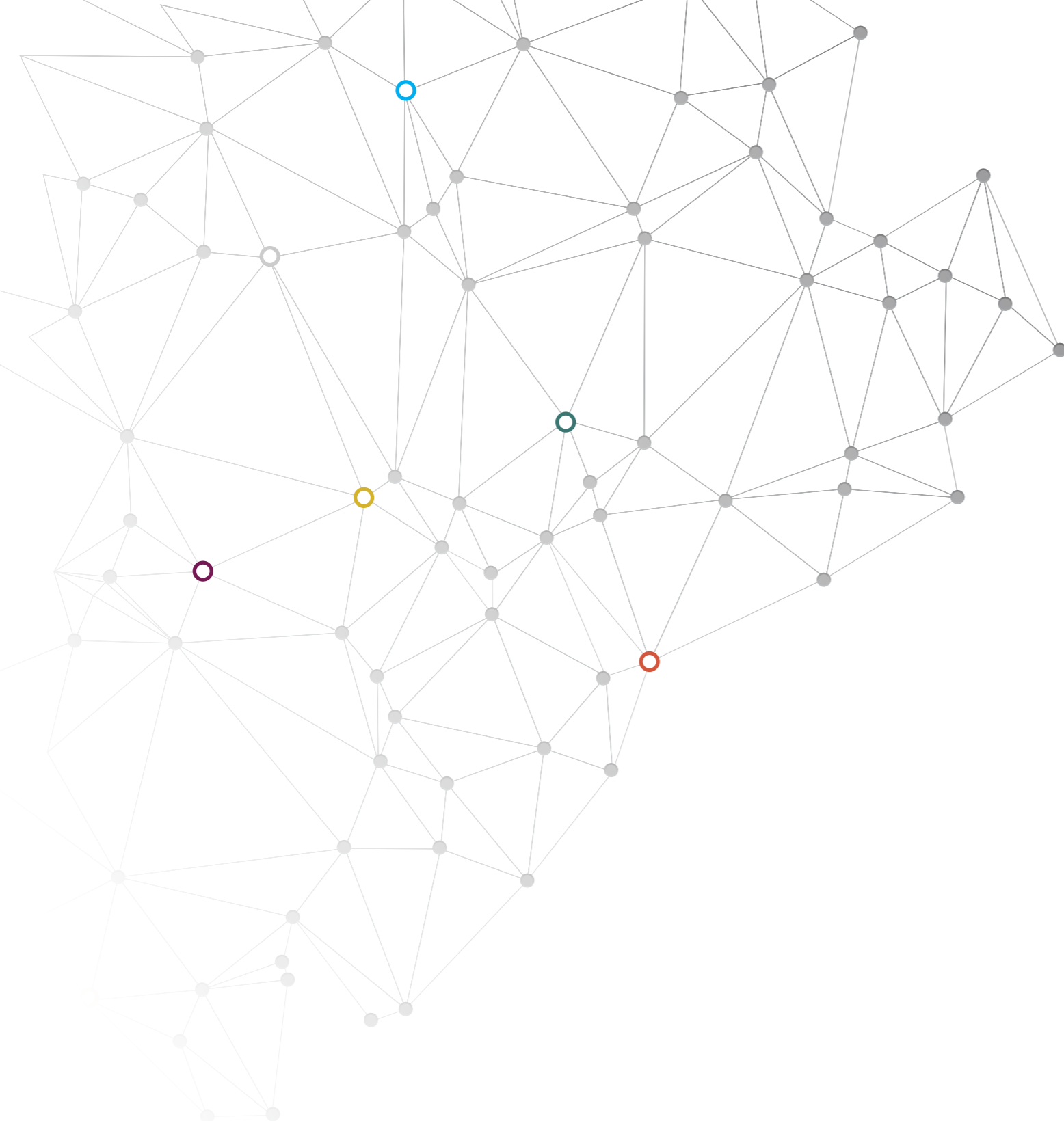




2017

ANNUAL REPORT



CONTENTS

Message from the chairperson	5
About us (mission, vision, and goals)	6
Members	8
Introduction & List of members in 2017	10
2017 Member highlights	
HCWH Europe in numbers	
The year in numbers - Communications & press coverage	14
The year in numbers - Policy	16
Webinars	18
Infographics	20
Events	21
Position Papers	21
Publications	22
Policy work	
Climate	24
Pharmaceuticals	25
Chemicals	26
Sustainable & healthy food	27
HCWH Globally & GGHH	28
Finances	30



HCWH Europe Members, Staff, and Board of Directors at the 2017 AGM

MESSAGE FROM THE CHAIRPERSON

It was a busy year for HCWH Europe and our team in Brussels and a busy time for our members network, with 18 new members from three countries joining us - I would like to welcome them to our growing family working throughout Europe to make healthcare more sustainable. As we welcomed new members in 2017, we also strengthened our ties with existing members through an extensive membership survey and a very successful AGM held in June. Kindly hosted by our member Vivantes Hospital Neukölln in Berlin, over 40 people from 12 different countries came together at our AGM and learnt about several initiatives and projects taking place in sustainable healthcare around Europe. You can read more about some of these initiatives in our Member Highlights. In parallel with the 2017 AGM, we were also delighted to host the second Global Green and Healthy Hospitals (GGHH) European members' meeting, strengthening this growing and ever-active network.

It was at the 2017 AGM where I received the privilege of being voted in as incoming chairperson - I would like to take this opportunity to thank the previous chairperson, Dr. Hanns Moshhammer, for his years of commitment and service to HCWH Europe. I would also like to thank the board members who stepped down at the 2017 AGM - Polyxeni Nicolopoulou-Stamati, Davide Sgarzi, and Michael Wilks for their work and support over the last several years. We also welcomed newly appointed board members: Annegret Dickhoff, BUND Berlin e.V., Germany; Ruth Echeverría, Fundación Alborada, Spain; and Sofia Lindegren, Swedish Doctors for the Environment, Sweden - I look forward to working with the board to strengthen HCWH Europe's mission.

It was also a busy year in terms of our programme and policy work; in climate and health, we continued to expand the European Healthcare Climate Council, now with seven members leading work on climate and energy within European healthcare. We hope that this work will continue to develop in 2018 and that the Council can continue to grow and develop its work. In parallel with COP23 in Bonn, Germany, HCWH Europe also organised a high-level roundtable meeting, at which many participants endorsed HCWH's 'Call to Action on Climate Change' - which was also signed by over 1,000 hospitals worldwide.

For our pharmaceuticals work, we held a joint workshop with Highlands and Islands Enterprise (HIE) in Inverness, Scotland in June: Pharmaceuticals and priority chemicals in the Highlands and Islands Environment. This new collaboration with HIE attracted 19 high-level expert speakers and 88 attendees and brought together experts from Scotland and around Europe in order to discuss, debate, strategise, and work together on innovative potential solutions to protect the environment and people from pharmaceutical pollution - a collaboration we hope will continue.

There were also a number of successes in our work on safer chemicals in healthcare in 2017. We closely followed the implementation of the Medical Devices Regulation, with our main focus on Annex I of the regulation - provisions that mirror the REACH requirement for the progressive substitution of the most dangerous chemicals when suitable alternatives have been identified. To this end, we organised a workshop in November *Can the Medical Devices Regulation be an engine for substitution?*, kindly hosted by MEP Michèle Rivasi (Greens) in the European Parliament. The main objective of the workshop was to look at how provisions included in the regulation can be used to achieve the substitution of medical devices containing harmful chemicals with safer alternatives - we continue to closely follow the implementation of the Regulation in 2018.

We significantly expanded and developed our work on sustainable and healthy food in healthcare in 2017. In December, we released a brochure *Reducing hospital malnutrition with a circular economy approach*, exploring the connection between food waste and malnutrition of patients, and how a healthy and sustainable food policy (that also covers procurement), can help improve patient care, as well as reduce malnutrition and healthcare costs.

In 2018, we're looking forward to continued expansion and development of our network, stepping up our policy and project work, diversifying and strengthening our funding and fundraising, and hosting a successful and well-attended CleanMed Europe in Nijmegen in October - to which I would like to warmly invite you all.

Anders Bolmstedt

Region Västra Götaland
Chair of the Board, HCWH Europe

ABOUT US

Health Care Without Harm (HCWH) Europe is a non-profit European network of hospitals, health-care systems, healthcare professionals, local authorities, research/academic institutions and environmental and health organisations. The organisation currently has 84 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, green building, sustainable procurement, pharmaceuticals, sustainable food, and waste management.

The organisation's aim is to educate the healthcare sector to understand the importance of the environment and press healthcare leaders and professionals to advocate for broader societal policies and changes.

To leverage and scale up its work, HCWH Europe is also a member of many different environmental and health networks, partners with international agencies, and participates in a number of international processes. 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 the WHO Euro region and other UN processes, such as SA-ICM (Strategic Approach to International Chemicals Management), the Minamata Convention on mercury, and the UNFCCC (United Nations Framework Convention on Climate Change).

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.

VISION

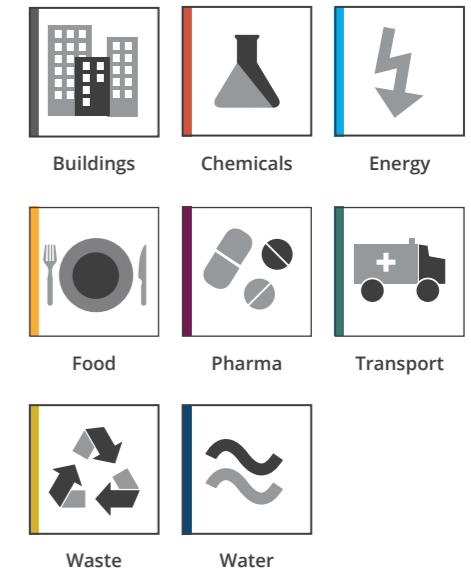
Healthcare mobilises its ethical, economic and political influence to create an ecologically sustainable, equitable and healthy world

GOALS

Overarching Goals

- 1. 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.
- 2. 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.
- 3. 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.

Programmatic Goals



HCWH Europe team, from left to right: Aidan Long, Paola Hernandez, Tim Eden, Anna Schütz, Lloyd Evans, Ana-Christina Gaeta, Anja Leetz, Adela Maghear, Grazia Cioci, Sarah Diamond, Philippe Vandendaele

MEMBERS

In 2017, HCWH Europe welcomed 18 new members from three new countries, we also forged closer working relationships with our existing members. We drafted a membership outreach survey to develop a better understanding of issues that are most important to our members, confirm contact details, and to better understand each of our members.

This survey was distributed in February 2017 and outreach was performed to all members and we succeeded in the three goals as above - this also helped us to host our best-attended AGM in organisational history.

Finally, HCWH Europe furthered its collaboration with the Global Green and Health Hospitals project by streamlining the process for eligible HCWH

Europe members to join the GGHH network and vice versa. We also hosted a GGHH Europe members meeting alongside our AGM to increase networking and collaboration between GGHH and HCWH Europe members.



Albania
Eden Centre *

Armenia
Armenian Women for Health and a Healthy Environment (AWHHE)
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 (INGES) / Institut für Nachhaltigkeit im Gesundheitswesen
Vienna Health Care Institutions Association (KAV) / Wiener Krankenanstaltenverbund KAV
International Society of Doctors for the Environment (Austrian Chapter) *

Belarus
Foundation for Realisation of Ideas / Fond Realizacija Idey
EcoSphere IPA

Belgium
Belgian Platform Environment and Health / Vlaams Platform - Milieu en Gezondheid
Zorgnet-Icuro *

Czech Republic
ARNIKA Association / Sdružení Arnika

Denmark
Ecological Council / Det Økologiske Råd
Endometriose Foundation / Endometriose Foreningen
Gentofte Hospital / Amtssygehuset i Gentofte
Sønderborg Hospital / Sygehus Sønderjylland, Sønderborg
Sygehus Nord Health Care Institutions - Nykøbing Thisted
The Health Care Institutions Services of Aarhus County / Århus Universitetshospital, Århus Sygehus
The Capital Region of Denmark *

France
Association of independent doctors for the Environment and Public Health / Association des Médecins indépendants Pour l'environnement et la santé publique
C2DS (Committee for Sustainable Development in Healthcare / Comité Pour le Développement Durable en Santé)
Committee for Environmental Health / Comité Santé Environnement (OMESC)
National Centre for Independent Information on Waste (CNIID) / Centre national d'information indépendante sur les déchets
Le Centre Hospitalier de Niort

Germany
BUND - Friends of the Earth Germany / Bund 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 (ETIK) - Europäisches Institut für Technologietransfer, Informationsmanagement und Kommunikation
Institute for Environmental Medicine and Health Care, Freiburg / Institut für Umweltmedizin und Krankenhaushygiene Freiburg Universität
International Society of Doctors for the Environment (German Chapter) *

Hungary
Recyclomed

Iceland
Landspítali *

Ireland
Cork University Hospital
HSE Estates (South)
Irish Doctor's Environmental Association (IDEA)
Organisation for Ecologically Sustainable Waste Management
National Health Sustainability Office (of Irish Health Service) *

Italy
Agenzia Lucchese per l'Energia ed il Recupero della Risorse (ALERR)
University of Parma *

Macedonia
Macedonian Association of Doctors for the Environment (MADE) / Zdruzenie na Doktori za zivotna sredina MADE - (Former Yugoslav Republic of) Macedonia

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

Netherlands
Waste and Environment Foundation / Stichting Afval & Milieu
EcoBaby Foundation
Stichting Huize Aarde
Women In Europe for a Common Future (WECF)
Radboud University Medical Center *

Norway
South-Eastern Regional Health Authority / Helse Sør-Øst RHF

Poland
Polish Zero Waste Association *
The Society for the Earth (TNZ) *

Romania
Life Youth Foundation / Fundatia Life
Russian Federation
Baikal Environmental Wave / Baikalskaya Ekologicheskaya Volna
Kaliningrad Children and Youth Invalids / Maria NGO

Slovakia
Friends of the Earth Slovakia / Priatel'ia Zeme (SPZ)

Slovenia
Slovenian Clean Production and Right-to-Know Action Club / DEA Klub Ankaran

Spain
CARTIF Foundation / Fundación CARTIF
Children's Health Care University Hospital La Fe / Hospital Infantil Universitario La Fe
Pediatric Environmental Health Speciality Unit of the Clinical Hospital University Virgen of Arrixaca.
Health Care and Social Services Consortium of Catalonia (CSC) / Consorci de Salut i Social de Catalunya
Andalusian School of Public Health / Escuela Andaluza de Salud Pública
Xàtiva - Ontinyent Department of Healthcare - Generalitat Valenciana, Valencia
Hospital Vall d'Hebron
Fundación Alborada *

Sweden
Good Point Advisers for Sustainable Growth / Kemi & Miljö
County Council of Sörmland / Landstinget Sörmland
International Chemical Secretariat
Jamtlands County Council (JLL) / Jämtlands Läns Landsting
Jegrelius Institute for Applied Green Chemistry / JEGRELIUS - INSTITUTET FÖR TILLÄMPAD GRÖN KEMI
Karolinska University Hospital / Karolinska Universitetssjukhuset
Skåne University Hospital / Skånes Universitetssjukhus Region Skåne
Stockholm County Council / Stockholms läns landsting
Swedish Doctors for the Environment / Läkare för Miljön
Foundation TEM / Stiftelsen TEM vid Lunds Universitet
Uppsala University Departments of Clinical Microbiology and Earth Sciences / Uppsala Universitet
Västra Götalandsregionen / Region Västragötaland
Landstinget i Värmland (County Council of Värmland) *
Coalition Clean Baltic *

Switzerland
International Council of Nurses
International Society of Doctors for the Environment (ISDE)
Physicians for the Environment Switzerland (AeFU) / Ärztinnen und Ärzte für Umweltschutz
Schelker Environmental Consulting / Schelker Umweltberatung

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
Highlands and Islands Enterprise *
NHS Highland Estates Team *
Environmental Research Institute, North Highland College, University of the Highlands and Islands *
Sussex Community NHS Foundation Trust *

Ukraine
International Society of Doctors for the Environment Ukraine (ISDE Ukraine)
MAMA-86 / Mama 86 Kharkov

* Joined in 2017

MEMBER HIGHLIGHTS

Some of the great work carried out by members of Health Care Without Harm Europe in 2017, working towards more environmentally sustainable healthcare systems, with reduced environmental impact and improving human health.



Arnika advocates to prevent contamination from toxic plastics entering the waste stream

TOXIC-FREE RECYCLING - ARNIKA, CZECH REPUBLIC

In November 2017, researchers from Arnika, an environmental health research NGO in the Czech Republic, tested children toys and hair accessories for brominated flame retardants, a class of chemicals associated with thyroid disruption, memory and learning problems, delayed mental and physical development, lower IQ, advanced puberty, reduced fertility, and other impacts.

Concerning levels of industrial flame retardant chemicals commonly found in electronics were found in the products tested - two innocent-looking toys and one hair accessory contained brominated flame retardants listed for global elimination by the Stockholm Convention (polybrominated diphenylethers, PBDEs) at levels of over 1,000 ppm – one of the possible thresholds set for hazardous waste. The full results were published in a report *Toy or Toxic Waste?* in December 2017 and will be presented at the Dioxin 2018 Conference.

If a chemical is so toxic that it's banned from further production, policy makers should ensure that it is kept out of personal care products and children's toys, argues Arnika. Nevertheless, Arnika was unsurprised to find toxic toys on the market because the EU has not yet taken the necessary actions to end toxic recycling. Arnika therefore alerted the Ministry of the Environment in the Czech Republic to take a stand for health and for the environment and prevent such poisons from becoming ingredients of recycled plastic toys.

In 2018, Arnika hopes that the data from their research will aid in their efforts arguing against PBDE recycling exemptions under the Stockholm Convention and they will continue to call upon the EU to address the problem of legacy chemicals contaminating recycled materials. As the EU strategy for Circular economy is being discussed, Arnika advocates to prevent contamination from toxic plastics entering the waste stream.

CAPITAL REGION DENMARK | GREEN OPERATIONS AND DEVELOPMENT

The Capital Region of Denmark's Recycling and Donation unit has come a long way since its inauguration in 2016 – it is now easier to reuse excess hospital equipment for the benefit of people and the environment. Dedicated employees collect and prepare excess hospital equipment, either to be reused internally in the region, to be given to development and relief organisations, or scrapped to environmentally sound disposal. At present, 110 tonnes have been reused or donated, and the work has just begun.

"Although we strictly control procurement for hospitals, surplus equipment does happen - it's a shame if it's just stocked or discarded. By working systematically, we can save money, benefit people in developing countries, and reduce our climate impact. When operating as many hospitals as we do, it makes sense to be a green and innovative region." - Julie Pihl Dalbøl, Team Leader of the unit.

Recycling and Donation is part of Green Operations and Development, which is an effort to reduce CO2 emissions from the regions own operations. All the region's hospitals are involved in the programme and can donate everything from unbroken single-use equipment to high-tech devices.

Even though only a small amount of equipment has been reused internally, the region has saved 5.2m DKR (€7m approx.), and has at reduced CO2 emissions by at least 13.5 tonnes. There is still further potential - the next step is to fund the development of an IT system that will enable users to search directly for equipment within an updated database.

LANDSPITALI, ICELAND | WASTE REDUCTION AT ICELAND'S NATIONAL UNIVERSITY HOSPITAL

The hospital's recycling ratio is now 32%, they have started to recycle glass and have made special efforts to improve recycling electrical waste with a 200% increase, whilst recycling plastic has increased 37% between 2016 and 2017. Unsold food from the staff kitchen is now donated to charity and they have further reduced waste with staff initiatives such as no longer buying styrofoam cups and reusing styrofoam cooling boxes and cooling gel - instead of single use. The hospital also no longer uses plastic bags for their fruit delivery and has implemented 60 green public procurement tenders/price inquiries that exclude PVC and DEHP amongst other substances, and stipulate energy efficient and ecolabelled products and services. Landspítali have further reduced their paper use - 5% less compared to 2016, representing an overall 43% recession or 20 tonnes less compared to 2009. Through a collaboration with Zipcar, three cars are now available for hospitals staff both for their private and business journeys; this service is also available to the community.

Capital Region Denmark saves money, benefits people in developing countries, and reduces their climate impact



REGION VÄSTRA GÖTALAND, SWEDEN | ENERGY EFFICIENT HOSPITAL DEPARTMENTS

In 2017, Region Västra Götaland ran a pilot project: Energy efficient hospital departments, with the aim to reduce energy consumption through behavioural change. As part of the Region's Environmental Programme their goal is to reduce energy use by half by 2030 (compared to 1995). Energy consumption for lighting, and electrical and medical equipment is continuously increasing and is considered the single greatest challenge for reaching their goal.

Five hospital departments participated in the pilot project receiving support to lower energy use; medical and electrical devices were identified for their potential to consume less energy. Examples include turning off computers at the end of the workday, avoiding the continuous charging of medical devices, and to only use dishwashers with full loads. The project also worked with motivation, education, and feedback - energy consumption was measured before, during, and after the project. The results were shared and discussed with the participating staff who found it fun to be a part of the project and all participating hospital departments reduced their energy consumption.



Annika Baan, Unit care manager at Sahlgrenska University Hospital, Region Västra Götaland

WOMEN ENGAGE FOR A COMMON FUTURE (WECF) | THE GENDER DIMENSIONS OF HAZARDOUS SUBSTANCES AND WASTE

A study launched by WECF, Women Environmental Program (WEP), and Balifokus with support from the Basel-Stockholm-Rotterdam (BRS) Conventions secretariat, researched how persistent organic pollutants POPs, hazardous chemicals, and waste affect women and men's health differently. Many banned hazardous chemicals can still be found in many places in Nigeria and Indonesia.

The situation in Nigeria is particularly serious and major threat to public health; Lagos is the largest port of entry for electronic waste in West Africa and hosts numerous large e-waste 'recycling' and refurbishing businesses. Elsewhere, edible cooking oil is mixed with toxic PCB oil, and sold and used by street vendors at an affordable price. Whilst DDT continues to be used in parts of Northern Nigeria as a malaria treatment, and other obsolete POPs pesticides continue to be sold in the informal market. Nearly a thousand children were poisoned by lead in artisanal and small-scale gold mining (ASGM) practices in Zamfara State in 2010.

In Indonesia, the situation is not much better; POPs are mainly released from the agricultural sector, pesticides such as endosulfan, paraquat, and traces of DDT. Lindane is still widely used as head lice treatment (registered as Gamaxene); in recent years, there have been many cases of both pesticide and lindane poisoning among women and young girls. Almost 75% of breastfeeding mothers in urban areas were not aware that chemicals can affect the quality of their breastmilk - this lack of awareness and lack of law enforcement on reducing and eliminating hazardous substances has increased the risk of exposure to hazardous chemicals and waste.

WECF's study was launched during the 3rd United Nations Environment Assembly (05/12/2017) in an event organised at the UN Nairobi by the authoring and supporting organisations as well as the governments of Sweden and Germany. The full study is available here:

http://www.wecf.eu/download/2017/11-November/GenderDimensions_GenderWaste_Cases-study_2017_wecf.org.pdf

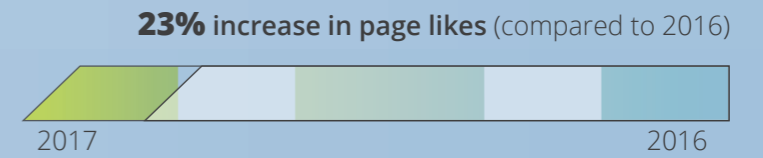


HCWH Europe members meet and share their best practices

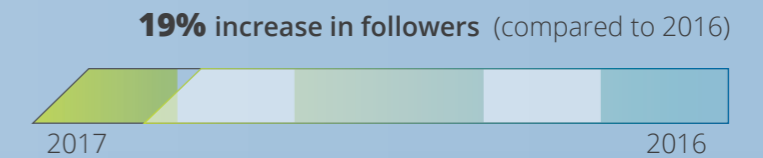
HCWH EUROPE IN NUMBERS

COMMUNICATIONS & PRESS COVERAGE

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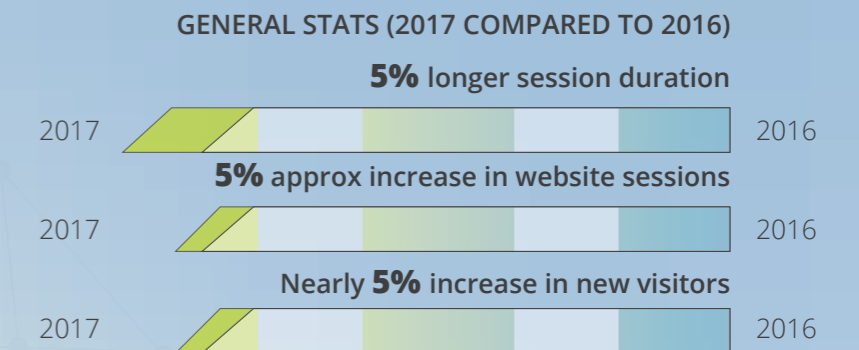


website



7 blog posts

63 news items



newsletters



12 MONTHLY NEWSLETTERS

69 BULLETINS

SUBSCRIBERS:

Monthly Newsletter - **2,639**

CleanMed Europe - **4,130**

Climate & Energy - **210**

Pharmaceuticals - **210**

Safer Chemicals - **157**

Procurement - **130**

press coverage



15 PRESS RELEASES

18 ITEMS OF PRESS COVERAGE

HCWH EUROPE IN NUMBERS

POLICY & ADVOCACY



WEBINARS



March: The (un)recognised pathways of AMR: Air pollution and food

This joint webinar with HCWH U.S. & Canada aimed to address and examine two important means of transmitting drug-resistant bacteria - food and air. It is well known that the health sector contributes to pharmaceutical pollution of the environment (which leads to AMR) through inappropriate prescription practices, poor waste management, and unhealthy food choices in hospitals. Some hospitals, however, have made a commitment to antibiotic stewardship and are working to reduce antibiotic misuse and overuse in different ways, such as foodservice procurement and eco-initiatives centred on sustainability and waste management.

■ <https://noharm-europe.org/issues/europe/webinar-unrecognised-pathways-amr-air-pollution-and-food>

Webinar | The (un)recognised pathways of AMR: Air pollution and food
28th March 2017, 16:00 CEST
Register now at: www.noharm-europe.org



May: Circular economy in the healthcare sector: Experiences from FLOW2

Transitioning to a circular economy is all about changing the linear way the European supply chain currently operates: take – make – dispose. A circular economy represents an economic model where resources are ultimately never wasted; the healthcare sector has a major role to play in improving resource efficiency and minimising waste. HCWH Europe hosted a webinar on 11 May to introduce FLOW2, a platform that is encouraging a transition towards a circular economy within the healthcare sector by facilitating asset sharing between hospitals.

■ <https://noharm-europe.org/issues/europe/webinar-circular-economy-healthcare-sector-experiences-flow2>

Webinar | Circular economy in the healthcare sector: Experiences from FLOW2
11th May 2017, 15:00 CEST
Register now at: www.noharm-europe.org



June: Pharmaceutical pollution - the need for sustainable procurement

According to a recent German Environment Agency report, approximately 4,000 active pharmaceutical ingredients (APIs) are being used in pharmaceuticals (i.e. medicinal drugs), be they prescription, over the counter, or for veterinary use. The healthcare sector can contribute to pharmaceutical pollution through poor waste management practices. Wastewater treatment plants are unable to completely destroy or remove pharmaceuticals, therefore sustainable procurement is an important factor in tackling pharmaceutical pollution. In this webinar, participants heard about recent research on the presence of pharmaceuticals in water and were presented with the key issues of integrating sustainable procurement into the health sector.

■ <https://noharm-europe.org/issues/europe/webinar-pharmaceutical-pollution-need-sustainable-procurement>

Webinar | Pharmaceutical pollution - the need for sustainable procurement
8th June 2017, 14:00 CEST
Register now at: www.noharm-europe.org



November: Reducing the carbon footprint of anaesthetic gases

In November 2017, HCWH Europe introduced the project Fostering low-carbon healthcare in Europe for measuring hospitals' carbon footprint, including greenhouse gas emissions from the use of anaesthetic gases. As part of the initial workshop hosted in Bonn, participants were presented with the topic: Reducing the carbon footprint of anaesthetic gasses. This webinar is a recording of the presentation given by Dr JMT Pierce - the Environment and Sustainability Advisor at the Royal College of Anaesthetists (RCOA - UK) and Consultant Anaesthetist for the University Hospital Southampton (UK). Dr. Pierce introduces the basics of anaesthesia and atmospheric science, and reviews the carbon footprint of agents and components used in inhalational anaesthesia (a common form of general anaesthetic), and assesses practices that can reduce this footprint.

■ <https://noharm-europe.org/issues/europe/reducing-carbon-footprint-anaesthetic-gasses>

RCOA
Royal College of Anaesthetists

Reducing the carbon footprint of anaesthetic gasses

Dr JMT Pierce
Environment and Sustainability Advisor
Royal College of Anaesthetists (UK)

University Hospital Southampton, UK

INFOGRAPHICS

September: How healthcare can respond to the challenge of food waste

This infographic explains the scale of food waste, both globally and within the EU and provides an overview of policy and some simple measures to begin reducing food waste in healthcare settings.

<https://noharm-europe.org/issues/europe/sustainable-food/food-waste-infographic>



December: Reducing antimicrobial resistance in healthcare settings

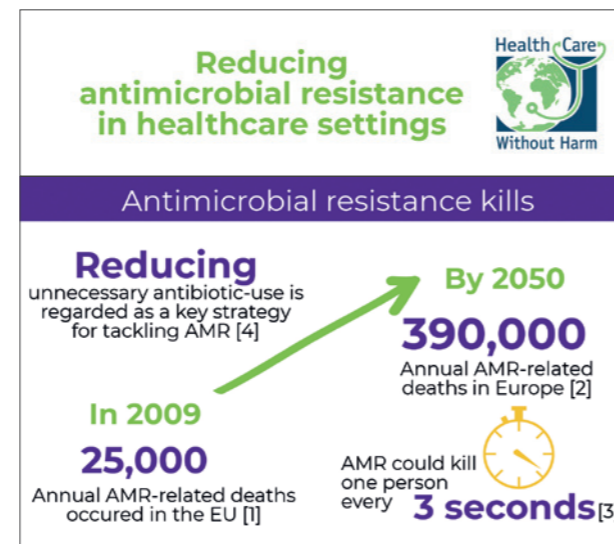
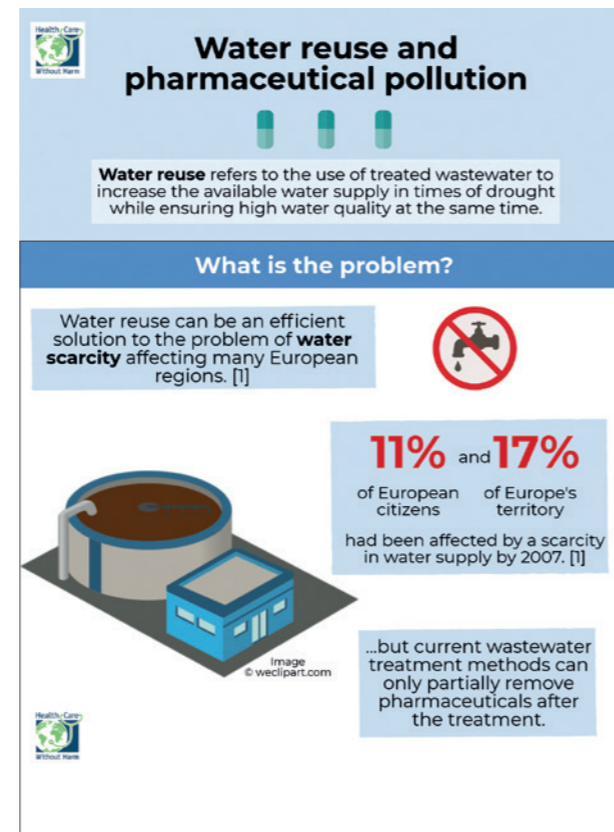
This infographic provides an overview of the growing threat of antimicrobial resistance (AMR) and some simple measures that can be taken by healthcare professionals and patients to help safely reduce the demand for antibiotics and policy recommendations.

<https://noharm-europe.org/issues/europe/amr-infographic>

December: Water reuse and pharmaceutical pollution

This infographic explains the effects of pharmaceuticals' presence in the environment and waterways and the consequences for wastewater treatment and water reuse as well as policy recommendations.

<https://noharm-europe.org/issues/europe/water-reuse-and-pharmaceutical-pollution>



EVENTS

June: Food waste in healthcare: European policy and national initiatives

This workshop, organised by HCWH Europe and kindly hosted by MEP Davor Škrlec (Greens), provided an overview of the on-going policy developments at both the EU and international levels to prevent and reduce food waste. Member State initiatives on preventing and reducing food waste in the healthcare sector from Ireland, The Netherlands, and the United Kingdom will also be explored, and best practices on how hospitals and other healthcare facilities have implemented food waste prevention and reduction strategies are showcased.

<https://noharm-europe.org/issues/europe/workshop-food-waste-healthcare-european-policy-and-national-initiatives>

June: Workshop: Pharmaceuticals and priority chemicals in the Highlands and Islands environment (Inverness, Scotland)

On Wednesday 21 June 2017 HCWH Europe and Highlands and Islands Enterprise (HIE) held a joint workshop in Inverness, Scotland, on 'Pharmaceuticals and priority chemicals in the Highlands and Islands Environment'. The workshop brought together experts from Scotland and around Europe in order to discuss, debate, strategise, and work together to come up with innovative potential solutions to protect the Highlands and Islands environment and people from pharmaceutical pollution.

<https://noharm-europe.org/issues/europe/pharmaceuticals-and-priority-chemicals-highlands-and-islands-environment-workshop>

November: Can the Medical Devices Regulation be an engine for for substitution?

On 6 November HCWH Europe organised a workshop Can the Medical Devices Regulation be an engine for substitution? kindly hosted by MEP Michèle Rivasi (Greens) in the European Parliament. The main objective of this workshop was to look at how provisions included in the Medical Devices Regulation can be used to achieve the substitution of medical devices containing harmful chemicals with safer alternatives.

<https://noharm-europe.org/issues/europe/edcs/MDR-workshop17>

November: COP23 Climate and Health Roundtable

On November 4/5 in Bonn, as the COP23 climate negotiations were taking place, staff from approximately 20 hospitals and health systems came together at a roundtable meeting to discuss healthcare's response to climate change. The two-day high-level roundtable meeting was convened by the European Healthcare Climate Council and served as a platform to discuss the challenges and ambitions of hospitals and health systems in their efforts to build low-carbon and resilient healthcare.

<https://noharm-europe.org/issues/europe/cop23-climate-and-health-roundtable>



Discussing the challenges and ambitions of hospitals and health systems to build low-carbon and resilient healthcare

POSITION PAPERS

May: Food waste in the Circular Economy Package

<https://noharm-europe.org/sites/default/files/documents-files/4728/2017-05-08%20CEP%20PP.pdf>

October: The Energy Efficiency Directive

https://noharm-europe.org/sites/default/files/documents-files/5047/2017-10-09HCWHEurope_Energy_Efficiency_Position_Paper.pdf

October: Antimicrobial Resistance

https://noharm-europe.org/sites/default/files/documents-files/5037/2017-10-09_HCWH_Europe_PositionPaper_AMR.pdf

PUBLICATIONS

September: Policy overview: Food pathways to antimicrobial resistance - A call for international action

Due to its rising prevalence, antimicrobial resistance (AMR) is a global threat to sustainable development. Whilst there are many diverse factors influencing the development and spread of AMR, the use of antibiotics in food production is one that has long been unrecognised. This publication provides a closer look at legislation and campaigns in Europe and the U.S. that are reforming the use and monitoring of antimicrobials within the food supply chain, and provides recommendations for policy-makers.

https://noharm-europe.org/sites/default/files/documents-files/5017/2017-09-26_AMR_in_Food_Policy_Overview_FINAL.pdf

December: Energy efficiency in the healthcare sector: Easy wins through behaviour change

Improving energy efficiency is an easy and simple way for the healthcare sector to reduce costs whilst improving both human and environmental health through reduced emissions and better air quality. This factsheet shows how low-cost behaviour change programmes can simultaneously increase energy efficiency and improve the quality of patient care in health facilities.

https://noharm-europe.org/sites/default/files/documents-files/5213/HCWHEurope_Energy_Efficiency_Factsheet-Dec_2017pdf.pdf

December: Water reuse management: Is pharmaceutical pollution a real problem?

Current wastewater treatment methods only partially remove pharmaceuticals, meaning that drug residues are still present in recycled water. Even low concentrations of pharmaceuticals in water can harmfully affect human and environmental health. This brochure features information on wastewater management, water reuse, and pharmaceuticals in water, as well as our recommendations for EU policy makers.

https://noharm-europe.org/sites/default/files/documents-files/5232/HCWH_Europe%20Wastewater%20Factsheet_Dec_2017_FINAL_WEB.pdf

December: Reducing hospital malnutrition with a circular economy approach

Approximately 100 million tonnes of food is wasted annually in the EU across all stages of the food chain, and 14% of this food waste is attributed to food services alone. Not only does food waste have a significant economic impact - it also impacts on society and the environment, contributing to land and soil degradation, water pollution, and resource



Antibiotics in food production are an under-recognised factor of AMR



Some provisions of the MDR have the potential to act as an engine for substitution

depletion. This publication explores the connection between food waste and malnutrition of patients, and how a healthy and sustainable food policy (that also covers procurement), can help improve patient care, reduce malnutrition and healthcare costs.

https://noharm-europe.org/sites/default/files/documents-files/5219/HCWHEurope_Circular_Economy_Malnutrition_Dec-2017.pdf

December: Medical Devices Regulation: An engine for substitution?

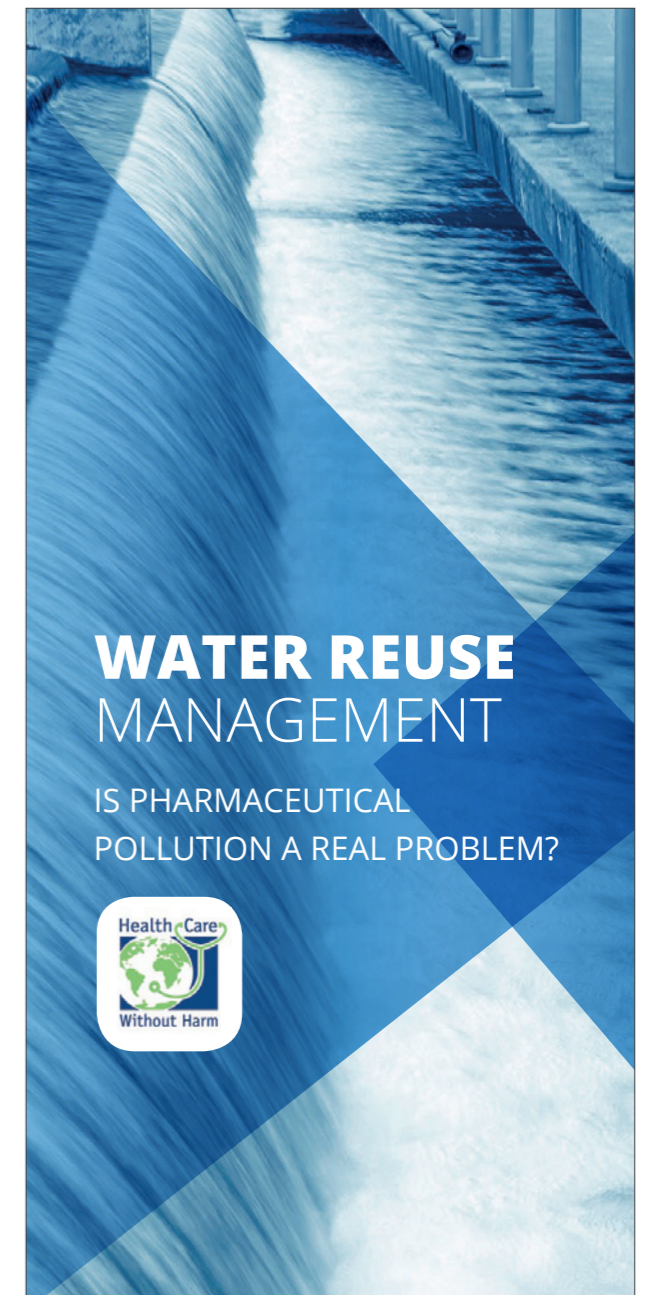
This factsheet provides background to the new EU Medical Devices Regulation (MDR), information about the medical devices subject to the new regulation, as well as a snapshot of the medical devices market and the manufacturers of such devices in the EU. This factsheet also assesses some of the provisions of the MDR that have the potential to act as an engine for substituting medical devices containing harmful chemicals with safer alternatives.

https://noharm-europe.org/sites/default/files/documents-files/5257/HCWH_Europe_MDR_Factsheet-Dec_2017_FINAL_WEB.pdf

December: Dental amalgam in the EU - Heading towards a phase out?

This factsheet provides an overview of some of the policy background leading up to historic adoption of the Minamata Convention and subsequent alignment of EU law, as well as summarising the health risks associated with mercury as documented by the WHO, and the significance of dental amalgam towards these risks. It also lays out the timeframe of the EU Mercury Regulation, which will be fully implemented by July 2019 with Member States submitting national plans to phase down dental amalgam.

https://noharm-europe.org/sites/default/files/documents-files/5269/HCWH_Europe_Mercury_Factsheet-Dec-2017_FINAL_WEB.pdf



Legislative measures should consider pharmaceutical pollution and the spread of AMR

POLICY WORK



CLIMATE & ENERGY

Our climate and energy objectives for 2017 were:

- Advocate for ambitious green greenhouse gas emission reduction and energy saving targets as well as more ambitious renewable energy targets to be set for 2030.
- Pursue the reduction of the carbon footprint of the healthcare sector.
- Work with the healthcare sector to decrease the incidence of diseases caused by climate change and air pollution.
- React and build on the steps taken at COP21 in Paris in 2015 to reduce carbon emissions at an EU level, including highlighting specific health provisions and assisting the healthcare sector to reduce its carbon emissions.

We carried out a number of activities throughout the year to help reach these objectives. In November, we organised a high-level roundtable meeting in parallel with COP23 in Bonn, Germany. The event brought hospitals and health systems from around Europe together to strategise ways of working together to advance healthcare's role as a climate leader, and to encourage health systems to measure their emissions.

In parallel with the meeting, we also hosted a training session to raise awareness amongst healthcare professionals about the environmental and health hazards of greenhouse gas emissions from anaesthetic gases, which included recommendations of how to reduce these emissions through alternative practices. Finally, through the Global Green and Health Hospitals network, hospitals and health systems across Europe endorsed HCWH's 'Call to Action on Climate Change' at the Roundtable - which was signed by over 1,000 hospitals worldwide.

In December, we published a factsheet about the link between healthcare's energy choices and their impact on air quality and climate change. The publication also provided two case studies of how energy efficiency could be improved in the healthcare setting through behaviour change approaches.

Throughout the year, the HCWH Europe-coordinated European Healthcare Climate Council continued to grow and develop, now involving seven key hospitals and health systems from throughout Europe who are committed to working on climate and energy:

1. Assistance Publique – Hôpitaux de Paris (France)
2. Centre Hospitalier de Niort (France)
3. Institutio Pio XII-Onlus (Italy)
4. Vivantes Hospital Network (Germany)
5. Radboud UMC (Netherlands)
6. Region Skåne (Sweden)
7. Sussex Community NHS Foundation Trust (UK)



There are several low-investment measures that can increase energy efficiency in healthcare facilities



Antimicrobial resistance was on the agenda for the International German Forum



PHARMACEUTICALS

Our main pharmaceuticals objective in 2017 was to push for the adoption of a sound strategic approach to address pharmaceuticals in the environment, which expands the scope of the Environmental Risk Assessment relevant to pharmaceutical approval and prevents unnecessary pharmaceutical pollution in the environment.

Throughout the year we continued to develop the Safer Pharma campaign in support of our advocacy work on pharmaceuticals in the environment. We added more information to the website in order to raise awareness about pharmaceutical pollution and set up a petition where EU citizens could ask the European Commission to take measures to reduce the impact of pharmaceuticals in the environment.



Pharmaceuticals and priority chemicals in the Highlands and Islands Environment.

In February HCWH Europe was invited to provide guidance to German Chancellor Angela Merkel and her chancellery team on the challenges of antimicrobial resistance (AMR). HCWH Europe joined 30 other experts on AMR for the International German Forum, created for international exchange on globally relevant future related issues. We encouraged Germany to work with other countries to advocate for and produce a global solution to combat AMR.

In April the European Commission released the 'ROADMAP - Strategic approach to pharmaceuticals in the environment', announcing its intention to address the problem of pharmaceuticals in the environment. In November, the Commission opened their consultation on the policy measures to be included in the awaited Strategic Approach (expected to be published in May 2018).

Through its policy and advocacy work over the past number of years, HCWH Europe succeeded in bringing pharmaceutical pollution to the EU policy debate and in pushing the Commission to address this important issue.

In June, we held a joint workshop with Highlands and Islands Enterprise (HIE) in Inverness, Scotland on 'Pharmaceuticals and priority chemicals in the Highlands and Islands Environment'. The event attracted 19 high-level expert speakers and 88 attendees. It also brought together experts from Scotland and around Europe in order to discuss, debate, strategise, and work together to come up with innovative potential solutions to protect the Highlands and Islands environment and people from pharmaceutical pollution.



CHEMICALS

Our objectives in relation to chemicals in health-care in 2017 were:

- Phase out hazardous chemicals contained in medical devices, particularly ones that come into contact with patient's bodies
- Pursue the adoption of horizontal EU criteria that identify endocrine disrupting chemicals (EDCs), taking into consideration the special aspects of EDCs exposure, such as low dosage and long term exposure, and the potential for cumulative and cocktail effects
- Assist with the transformation of the Minamata Convention into strong European legislation



Provisions included in the MDR can be used to substitute medical devices containing harmful chemicals with safer alternatives

Medical devices:

In 2017, we channeled our energy towards the implementation of the Medical Devices Regulation (MDR). The main focus was on key provisions contained in Annex I of the Regulation. These provisions mirror the REACH requirement for the progressive substitution of the most dangerous chemicals when suitable alternatives have been identified.

Annex I.II.10.4.1, of the MDR includes a 0.1% concentration limit for category 1A and 1B CMR substances and EDCs in devices that are invasive and come into direct contact with the body.

Devices would only be permitted to contain such substances at a level above this limit if a justification is provided to the Notified Body, which is overseen by the national competent authority.

Throughout the year, we also tackled the issue of the definition of EDC (endocrine disrupting chemicals) criteria. Our concern in this regard was that if chemicals were not classified as EDCs - because of the exacting level of proof required - there would be no need to replace these substances contained in medical devices that are put on the market. This work is expected to continue into 2018.

In November, we organised a workshop 'Can the Medical Devices Regulation be an engine for substi-

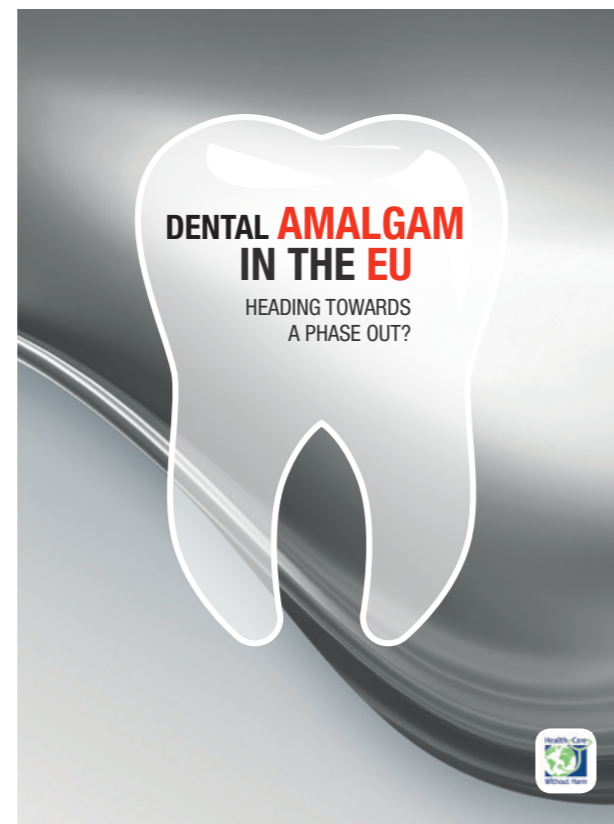
tion?', hosted by MEP Michèle Rivasi (Greens) in the European Parliament. The main objective of the workshop was to look at how provisions included in the regulation can be used to achieve the substitution of medical devices containing harmful chemicals with safer alternatives.

In December we released a factsheet - 'Medical Devices Regulation: An Engine for Substitution?' - providing background to the new EU Medical Devices Regulation (MDR), information about the medical devices subject to the new regulation, as well as a snapshot of the medical devices market and the manufacturers of such devices in the EU.

Mercury:

HCWH Europe's previous advocacy work contributed to the adoption of a more robust EU Mercury Regulation, especially as regards Article 10 - the article dealing with dental amalgam.

The text of the Regulation as published on 17 May 2017 sets out an agreement to ban dental amalgam fillings for children under 15 and for pregnant and breastfeeding women as of 1 July 2018. The text, which must now be approved by both Parliament and Council, also requires each Member State to set a national plan by 1 July 2019 on how it will reduce amalgam use. The Commission will report by mid-2020 on the feasibility of phasing out dental amalgam (preferably by 2030) to be accompanied

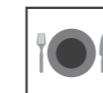


The EU Mercury Regulation focuses on filling gaps in EU legislation so that it becomes compliant with the Minamata Convention

by a legislative proposal, if appropriate.

Throughout the year, our Chemicals Policy Advisor organised various meetings with representatives at the Member State-level, in order to prepare the ground for an advocacy campaign in 2018 focusing on implementation.

In December we published the factsheet 'Dental amalgam in the EU - Heading towards a phase out?', which provides an overview of some of the policy background leading up to historic adoption of the Minamata Convention and subsequent alignment of EU law, as well as summarising the health risks associated with mercury as documented by the WHO, and the significance of dental amalgam towards these risks.



SUSTAINABLE AND HEALTHY FOOD

In 2017 our objective in relation to sustainable and healthy food in healthcare was to work towards increased implementation of sustainable food, green public procurement, and waste policies in hospitals and local authorities across Europe and increased awareness of those issues among healthcare professionals, patients and the general public.

We succeeded in having food waste amendments adopted in the legislative text of the revised Waste Framework Directive, which was adopted in trilogue in December 2017. The revised text now includes stipulations that a definition of food waste and a food waste measurement methodology (by delegated act) should be developed by 31st December 2019, with a further obligation to review food waste targets by 31st December 2023.

Finally, a reference in the recitals to UN Sustainable Development Goal (SDG) Target 12.3 as an indicative target on food waste is also included. These provisions were not included in the initial EC proposal and are welcome additions, advocated by HCWH Europe.

Throughout the year we also contributed to ensuring that there was a strong focus on fresh, local, and organic food in the development of the EC Green Public Procurement Criteria on Food and Catering Services, which will be adopted in 2018.

In June, we organised a workshop - 'Food waste in healthcare: European policy and national initiatives' - which provided an overview of the on-going policy developments at both the EU and international levels to prevent and reduce food waste. Member State initiatives on preventing and reducing food waste in the healthcare sector from Ireland, The Netherlands, and the United Kingdom were explored, and best practices on how hospitals and other healthcare facilities have implemented food waste prevention and reduction strategies were showcased.

In December we released a brochure 'Reducing hospital malnutrition with a circular economy approach', which explores the connection between food waste and malnutrition of patients, and how a healthy and sustainable food policy (that also covers procurement), can help improve patient care, reduce malnutrition and healthcare costs.



A healthy and sustainable food policy can help improve patient care, and reduce malnutrition and healthcare costs

HCWH GLOBALLY AND GGHH

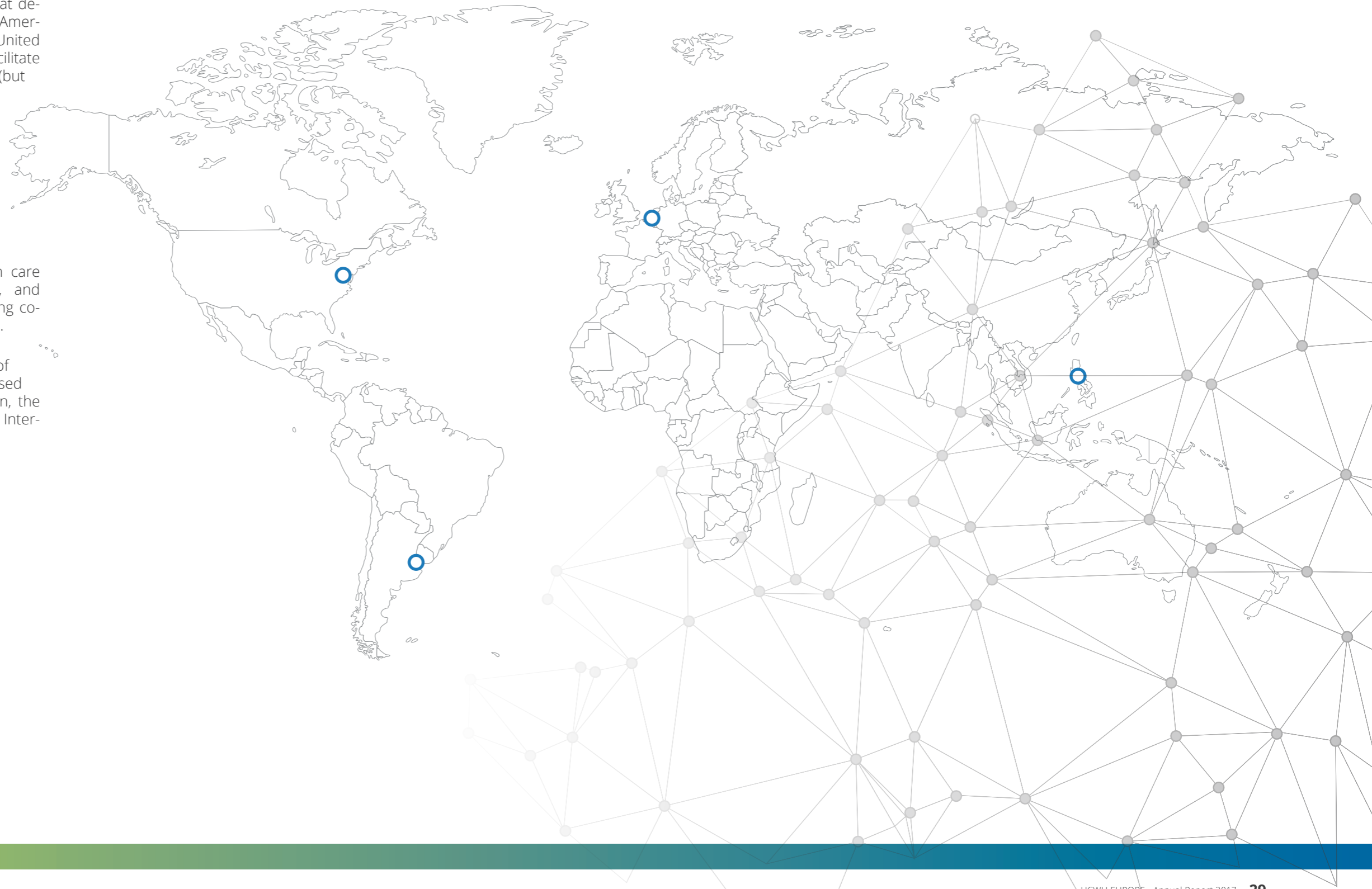
AN INTERNATIONAL MOVEMENT

With regional offices on four continents, partners around the world, and global and regional initiatives, HCWH is leading the global sustainable health-care movement.

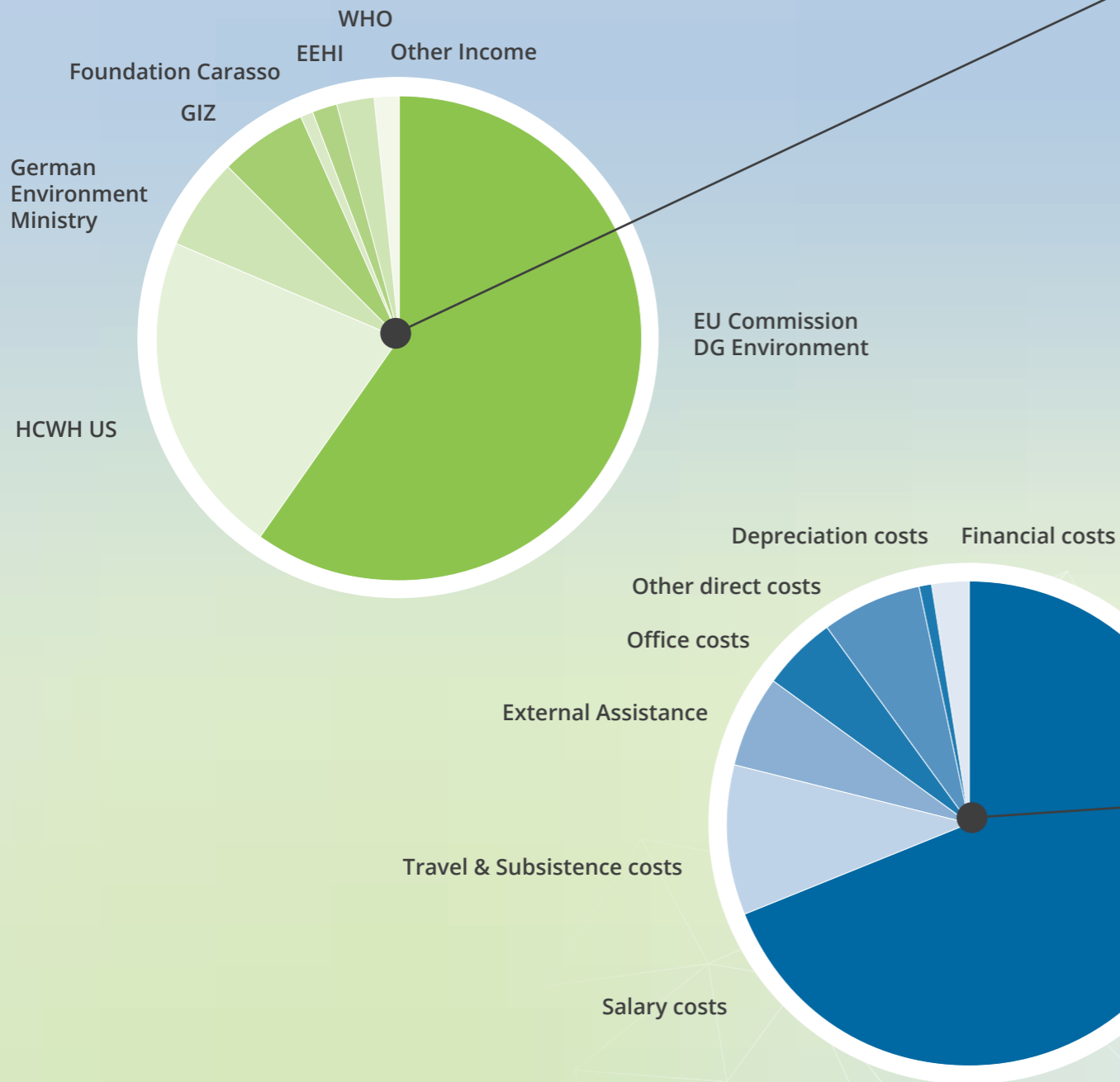
Health Care Without Harm comprises:

- 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. A 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 co-operative, both based in the United States.

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



FINANCES



INCOME 2017

EU Commission DG Environment	€ 401,869,07
HCWH US	€ 145,975,32
German Environment Ministry	€ 40,153.00
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)	€ 39,724.90
Fondation Carasso	€ 5,000.00
Environment and Health Initiative (EEHI)	€ 12,183.89
WHO	€ 15,993.25
Other Income	€ 10,882.30
Reserve 2016	- € -10,321.46

Total **€ 682.103.19**

EXPENDITURE 2017

Salary costs	€ 47,0634.12
Travel & Subsistence costs	€ 68,717.53
External Assistance	€ 42,216.9
Office costs	€ 33,952.63
Other Direct costs	€ 45,250.32
Depreciation costs	€ 5,742.46
Financial costs (Bank charges, exchange rate loss)	€ 15,589.23

Total **€ 682.103.19**

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 2017 funders: The EU Commission's Life+ grant programme, HCWH US & Canada, the German Environment Ministry (BMUB), the German Environment Agency (UBA), the Carasso Foundation, the Environment and Health Initiative (EEHI), and the WHO. 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



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Design: prinzdesign Berlin, Marc Prinz, Maren Maiwald

Published: June 2018

Photos: monkeybusinessimages@istockphoto (title),
Henning Angerer (p. 3, 6, 12, 15 (bottom)),
Frank Palm (p. 12), Bundesregierung/Loos (p. 25)

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.

Printed on 100% recycled paper using vegetable based ink.



HCWH Europe gratefully acknowledges the financial support of the European Commission's EU Life+ programme.

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