

Für Mensch & Umwelt

Umwelt  
Bundesamt 

Qualitative findings of the UBA research project:

# Sustainable Resource Use in the German Health Sector

Project carried out on behalf of the German Environment Agency (6/2017– 8/2020)  
by Fraunhofer ISI

Dr Katrin Ostertag

Dr Tanja Bratan

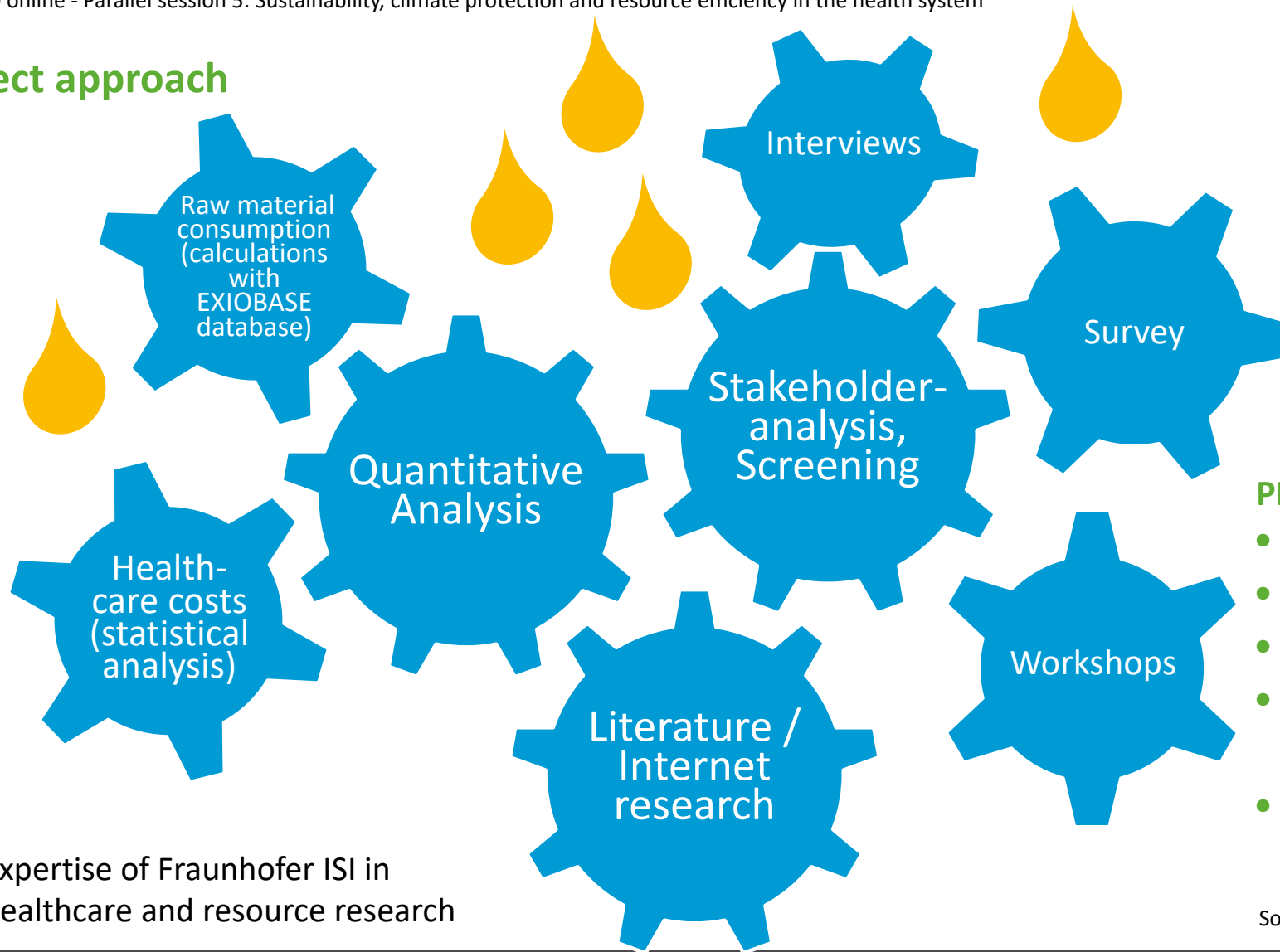
Dr Carsten Gandenberger

Dr Bärbel Hüsing

Dr Matthias Pfaff

 **Fraunhofer**  
ISI

## Project approach

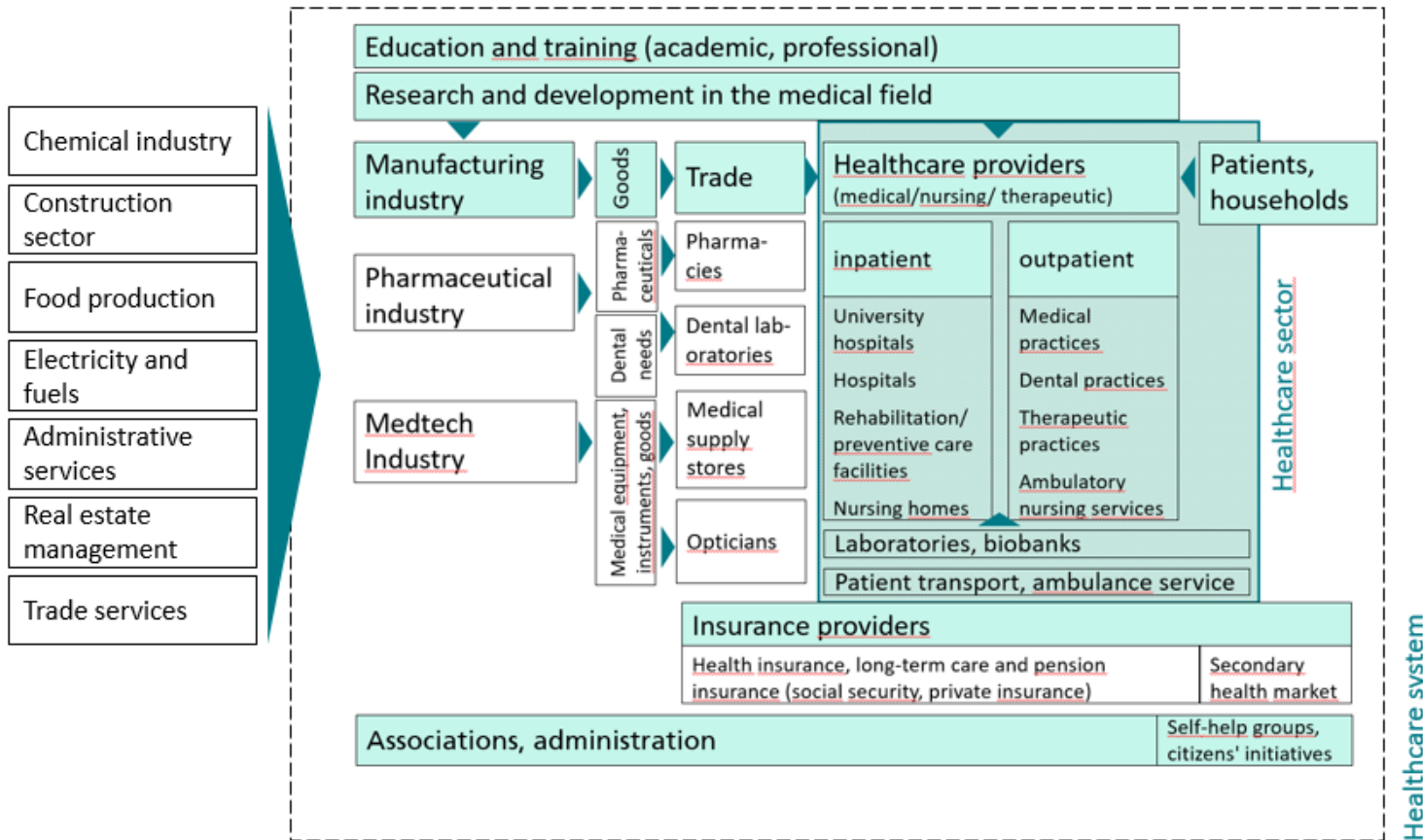


### PROJECT RESULTS:

- Good practice examples
- Areas of action
- Options for action
- Policy recommendations
- Further research needed

Source: Fraunhofer ISI, Final Report 2020

## The German healthcare system

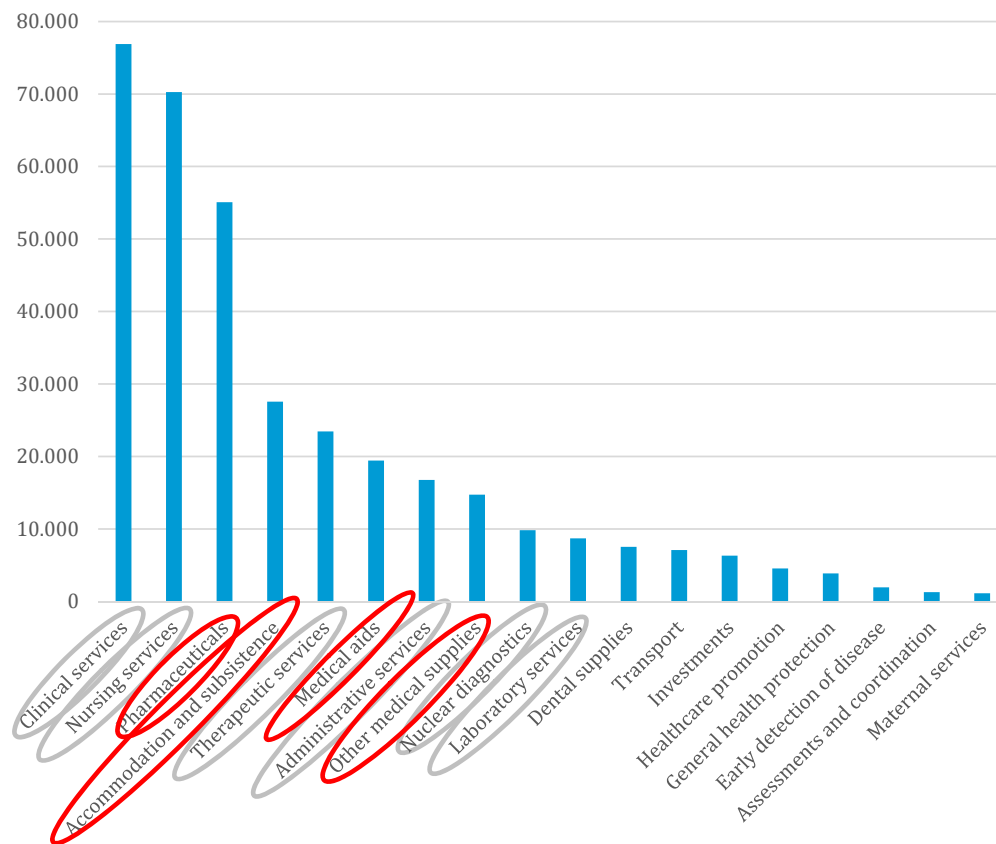


The **healthcare sector** provides medical care and nursing.

It receives input from other sectors such as manufacturing, pharmaceutical or medtech industry. Together with trades and insurance providers as well as associations and administration, these make up the **healthcare system**.

The healthcare system is linked to the wider economy through other sectors and services (e.g. chemical industry).

## Cost structures (2016)

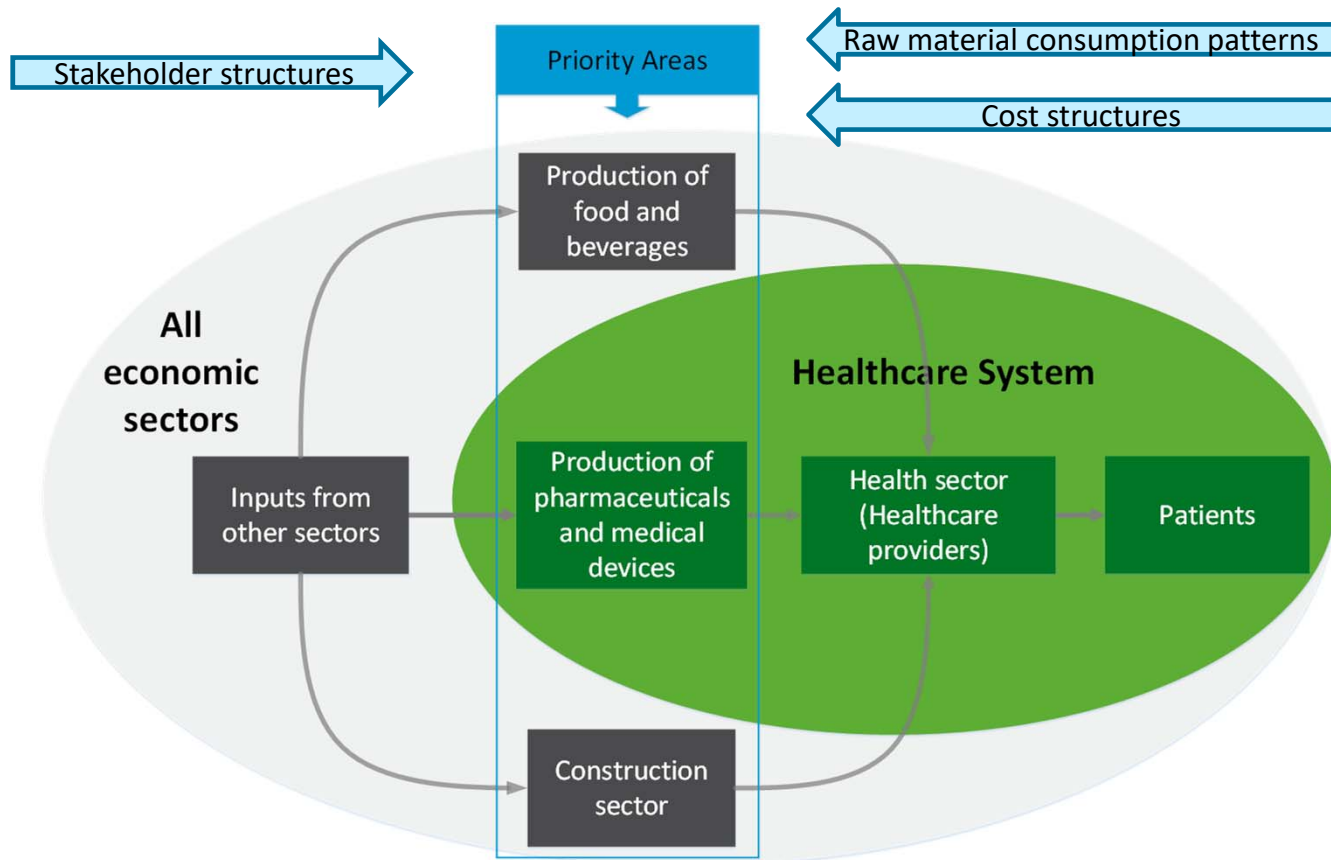


Synergies between resource conservation and cost containment can best be realised in categories with high expenditure.

The majority of expenditure is related to personnel (clinical, nursing, therapeutic services etc.). Key categories that are relevant from a resource perspective are **pharmaceuticals, accommodation and food & beverages** as well as medical supplies (which includes **medtech**).

The high consumption of non-metallic minerals is caused (among others) by construction and is not included in healthcare expenditure as investments in buildings are covered by the German states.

## Priority areas



Considering raw material consumption patterns, cost structures and stakeholder structures, **four priority areas** for resource conservation emerge.

Two are part of the **healthcare system**

- Pharmaceuticals
- Medical devices

Two others concern services from **other sectors of the economy**

- Construction
- Food and beverages

## Selected recommendations in the four priority fields

### PHARMACEUTICALS



- Research into the resource consumption of pharmaceutical products to create a basic **knowledge base**
- Strengthening pharmaceutical **production in Germany**
- Adaptation of **expiry dates** to actual shelf life
- Participatory clinical **decision making** for better compliance

### MEDTECH



- Promotion of **refurbishment** to extend life span
- **Overcoming disincentives** that have led to the preference of disposable products over reusable products
- **Information** on environmental and social sustainability of products
- Development and use of **leasing and sharing models**

### CONSTRUCTION



- **Building up competencies** (information materials, training, expert groups)
- **Incentives** for voluntary action and increasing demand for resource-friendly construction
- Adaptation of the **legal framework and standards** (e.g. fire/noise protection, building regulations)

### FOOD AND BEVERAGES



- **Creating synergies** between resource-saving and health-promoting nutrition (health sector as pioneer and role model)
- Mainstreaming **good practice** (resource conservation as a management task, training of staff)
- Improvement of **framework conditions** (resource conservation along (regional) supply chains, increased daily rate for full board, consumption date instead of best-before date)

## Cross-cutting recommendations

### PUTTING RESOURCE CONSERVATION ON THE AGENDA OF ALL ACTORS IN THE HEALTH SECTOR

- Focus on resource conservation at conferences for the **target group health sector**
- Sensitising the **target group environment/resource policy** to the potentials of the health sector
- Inclusion of the topic by **professional and industry associations** in their strategy processes, information and awareness-raising
- Promoting **international discourse** in politics and research (e.g. Green Deal)

### INFORMATION, NETWORKING AND TRAINING

- Promoting of **networking and sharing of experience** to spread examples of good practice
- **Training courses**, for example on "calculating" resource efficiency measures

### PROMOTING THE IMPLEMENTATION OF RESOURCE CONSERVING MEASURES

- Better use of **voluntary commitments, sustainability reporting and environmental management systems**
- Introduction of **seals and labels** to improve the visibility of sustainable products (medical devices, medicines)
- Revision of **public procurement law** to take environmental aspects into account (in addition to economic ones)
- **Institutionalisation** of environmental protection and resource conservation skills in inpatient facilities, adjusting instructions
- Promoting **prevention** to reduce the need for curative and therapeutic services
- Implementation of **initial consultations** for the health sector and establishment of a pool of consultants

## Policy recommendations



### ACTIVE POLICY ROLE NECESSARY

- Obvious **synergies** between conservation of resources and healthcare sector, but **obstacles** limit their realisation
- Policy tasks:
  - **Anchoring** the topic on the political agenda
  - Addressing inertia and conflicting goals
  - Ensuring **strategic and productive interaction** of different measures and activities

### USING CURRENT WINDOW OF OPPORTUNITY

- **Resource policy:** Measures are included in **ProgRess III** => drive implementation
- **Health policy:** Increasing awareness for topic internationally: Various initiatives **demand change from healthcare sector**

### INITIATE A ROUND TABLE (PROGRESS III, MEASURE 31)

#### TASKS

- Agreement on **common definition of problems and objectives**
  - Taking up synergies between resource conservation and climate protection!
- **Roadmaps** for various fields of action, integration into an **overall strategy**, monitoring impact of measures
- In-depth **studies**

#### STAKEHOLDER GROUPS INVOLVED

- Policy makers: Activity **across different policy areas**
- **Patient perspective** – essential for acceptance
- **Support** for promoters
- **Associations:** Pharma and medtech, healthcare providers, funders



**Many thanks for listening!**  
**Questions? Comments?**

**Contact:**

**Dr Tanja Bratan**

[tanja.bratan@isi.fraunhofer.de](mailto:tanja.bratan@isi.fraunhofer.de)

[www.isi.fraunhofer.de/GesRes](http://www.isi.fraunhofer.de/GesRes)



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