

Trashing Waste - The Green Emergency Team



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AIM

- To reduce the carbon footprint of waste disposal from ED

APPROACH

- **Project choice:** Clinical waste disposal has a higher carbon footprint than domestic waste it has to be incinerated at a higher temperature (more energy required). Moreover, RD&E clinical waste is not used as an energy source, unlike domestic waste. It is therefore environmentally important that domestic waste is not placed in the clinical waste stream. On a spot check of a clinical waste bag in ED 50% of the waste was inappropriate for the clinical waste stream, so increasing the carbon footprint of the department.
- **Measurement:** the team collected weights of clinical and domestic waste on 3 days; 2 days before the campaign and 1 day after the campaign. There was considerable variation in weight of bags in the pre-campaign phase. An assessment of the positioning of bins was also carried out.
- **Engagement methods:** a 5-minute educational “learning bite” outlining the importance of waste management at the RD&E in the context of the environmental crisis. 3 common waste items per day were chosen to highlight which bin should be used for disposal.

LEARNING POINTS

- **Bin positioning** is an important factor in determining which waste stream bin is used by staff.
- Separating waste is time-consuming; given that the department is very busy and many patients are critically unwell, it may be best to **focus on using the existing waste streams correctly** rather than introducing an extra waste stream for recycling.
- A project that **balanced benefits to staff and patients alongside environmental/cost benefits** may have made it easier to maintain staff engagement during busy periods.

SAVINGS FORECAST



703 kgCO₂e
£211
per tonne

(assuming that inappropriate waste entering the clinical waste stream is completely eliminated)

