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00:00:09.170 --> 00:00:10.140
Jeff Thompson: Welcome.
2
00:00:10.480 --> 00:00:15.190
Jeff Thompson: This is, a webinar from the National Academy of Medicine.
00:00:15.350 --> 00:00:20.570
Jeff Thompson: That's the last of a long series of very strong webinars.
00:00:20.750 --> 00:00:29.550
Jeff Thompson: Trying to look for pathways. Look for a system-forward to
help you
00:00:30.350 --> 00:00:35.130
Jeff Thompson: Build a more climate-resilient healthcare organization.
00:00:35.680 --> 00:00:40.479
Jeff Thompson: I'm Jeff Thompson. I'm a pediatrician, former CEO of the
Gundersen Health System.
00:00:42.410 --> 00:00:48.119
Jeff Thompson: And I would like you... I would like you to... be,
00:00:48.270 --> 00:00:54.669
Jeff Thompson: Be focused. I would like you to be focused on the big work
ahead, and I know these are tough times.
00:00:54.790 --> 00:01:00.889
Jeff Thompson: There's a lot of headwinds. There's financial and
regulation and political turmoil.
10
00:01:01.100 --> 00:01:05.610
Jeff Thompson: But I want you to think for a second of the headwinds for
those that we serve.
00:01:05.870 --> 00:01:08.470
Jeff Thompson: Our patients. Our communities.
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00:01:08.640 --> 00:01:18.440
Jeff Thompson: Air quality issues that kill 350,000 Americans every year,
and make many millions more sick.
13
00:01:19.080 --> 00:01:22.690
Jeff Thompson: Think of the plastics filling up our... our ocean.
14
00:01:22.900 --> 00:01:26.640
Jeff Thompson: But also, our brains, and our breast milk.
00:01:27.200 --> 00:01:29.660
Jeff Thompson: Fear of the climate-related disasters.
16
00:01:29.990 --> 00:01:37.509
Jeff Thompson: Have raised the anxiety of not just adults, but
Adolescence to astronomical letters... levels.
00:01:37.690 --> 00:01:45.619
Jeff Thompson: Sorry. So what do we do? Well, I think the key is that we
have to do something. This is not a time for hand-wringing or blaming.
18
00:01:46.200 --> 00:01:48.009
Jeff Thompson: Hoping somebody else fixed it.
19
00:01:48.450 --> 00:01:55.409
Jeff Thompson: The previous webinars were built to help individuals,
clinicians, leaders, whole organizations move forward and take action.
00:01:55.790 --> 00:01:57.359
Jeff Thompson: To put it all together.
21
00:01:57.470 --> 00:02:13.749
Jeff Thompson: So today, we put together a group of leaders in this
space, and they'll help you bring it all together to build a pathway
forward, to give you multiple resources so you can attack this very
difficult problem from multiple angles.
22
00:02:13.820 --> 00:02:33.300
Jeff Thompson: You can share these resources, you can use it to broaden
our tent, we'll... each will have, some questions for each of them, and,
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and then we'll have some... some more open time, near the end. But first, first, an introduction... introductions, and we'll each...

00:02:33.300 --> 00:02:40.099 Jeff Thompson: let... Well, I'll let each of them do their own introductions, sorry. Kamal, would you go first? 2.4 00:02:40.270 --> 00:02:55.569 Komal Bajaj, NYC Health + Hospitals: Absolutely. Thank you, Jeff, and thank you for the opportunity to be here, and for those that are listening today and will be listening in the future, we are so glad that you are here. My name is Komal Bajaj. I am an OBGYN geneticist by clinical background. 25 00:02:55.570 --> 00:03:13.129 Komal Bajaj, NYC Health + Hospitals: I am honored to serve as the Chief Quality Officer for two hospitals that are part of New York City Health and Hospitals, which is the municipal health system for New York City. I also, as of a year ago, serve as the Medical Director of Sustainability for the health system, really thinking, how do we incorporate, 2.6 00:03:13.220 --> 00:03:17.860 Komal Bajaj, NYC Health + Hospitals: Planet-friendly practices into the high-quality work that we strive for each and every day. 00:03:21.280 --> 00:03:23.720 Jeff Thompson: Thank you, thank you. Kara. 00:03:24.400 --> 00:03:39.719 Kara Brooks: Thanks, Jeff, and thanks for having me here today. I'm Kara Brooks, I am the Senior Associate Director of Sustainability from the American Hospital Association, which basically means I lead the association's work in this area. 29 00:03:39.720 --> 00:03:45.789 Kara Brooks: I've been doing this work for quite some time, and I'm very excited to be here with some good friends.

00:03:46.340 --> 00:03:47.330

Kara Brooks: Thank you.

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00:03:47.620 --> 00:03:49.489
Jeff Thompson: Very good. Thanks, Kara. Seema?
00:03:50.150 --> 00:04:05.970
Seema Wadhwa: Thanks so much for having me. What an honor to be amongst
such amazing friends and peers. I'm Seema Wadwa, I'm the CEO and founder
of Health and Climate, a nonprofit focused on accelerating solutions that
put health at the center of all climate action.
33
00:04:05.970 --> 00:04:12.820
Seema Wadhwa: Through data, storytelling, finance, and innovation, as
well as Net Positive Solutions, a sustainability consulting firm.
00:04:12.820 --> 00:04:28.869
Seema Wadhwa: I've spent my career leading sustainability at health
systems focused on helping organizations reduce their impact, focus on
strategy, and connect to care delivery. Today, my focus is on building
collaborative movement.
3.5
00:04:28.910 --> 00:04:35.870
Seema Wadhwa: And, sustaining the progress, where we're taking, you know,
our visions for, helping
36
00:04:36.000 --> 00:04:47.360
Seema Wadhwa: the health of all we serve and turning those into reality,
and again, I'm just so excited to be part of this conversation, and so
grateful for all of the great leadership, for NAM for putting this
together.
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00:04:48.130 --> 00:04:50.419
Jeff Thompson: Great, terrific, thanks. Don?
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00:04:50.900 --> 00:04:53.920
Don Berwick: Hi everybody, I'm Don Berwick, a pediatrician by training.
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00:04:53.950 --> 00:05:00.160
Don Berwick: I was the founder and currently senior fellow at the
Institute for Healthcare Improvement, IHI.
00:05:00.160 --> 00:05:15.239
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Don Berwick: I served as the administrator of the Centers for Medicare and Medicaid Services for the first two years of the Obama administration. And I've had the pleasure of working with the climate collaborative work of the National Academy of Medicine since its inception.

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00:05:15.240 --> 00:05:25.180
Don Berwick: currently on the steering committee and, co-chairing the,
subcommittee, the working group on policy, metrics, and finance. Jeff,
thanks.
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00:05:25.470 --> 00:05:36.389
Jeff Thompson: You're welcome. So, very strong group, and I think what
our goal, then, is for these conversations to help you understand
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00:05:37.150 --> 00:05:52.909
Jeff Thompson: How to find your pathway to take action, to decrease the
risk to your organization, to ensure a more resilient organization in
face of these catastrophic changes, help your staff feel better about
what the future looks like.
44
00:05:52.910 --> 00:06:08.249
Jeff Thompson: understand how many different partners we have in many
parts of the healthcare sector who are working hard to serve our patients
and our communities in a more sustainable way. So this is a big tent
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00:06:08.250 --> 00:06:14.590
Jeff Thompson: with a lot of horsepower and a lot of people moving in the
direction, I want you to try and feel that energy.
00:06:15.210 --> 00:06:26.640
Jeff Thompson: And I want to ... I want to get right into the content and,
start with Kamal. Kamal, you, you have enormous experience and have been
very successful. I, I,
47
00:06:28.020 --> 00:06:33.489
Jeff Thompson: I want you to spend a little time talking to us about how
00:06:33.720 --> 00:06:38.550
Jeff Thompson: How this can be integrated, not a ...
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00:06:38.710 --> 00:06:53.570

Jeff Thompson: something apart, but integrated into our quality, our safety, our population health? How do we integrate it into that work so we can have measurable improvements for our patients and communities?

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00:06:54.410 --> 00:07:07.129

Komal Bajaj, NYC Health + Hospitals: Yeah, thanks for that, Jeff. And so I'll start by saying that if anyone had asked me 6 years ago, Como, you're going to be doing a webinar with the NAMM around sustainability, I would be very surprised by that.

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00:07:07.130 --> 00:07:30.880

Komal Bajaj, NYC Health + Hospitals: And I share that because I came to thinking about this work as a chief quality officer, and it started because my children started asking about waste at home. And we made changes in our own environment, and I began to recognize that there is so much waste in healthcare, and that there is an opportunity to really take the work

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00:07:30.880 --> 00:07:54.070

Komal Bajaj, NYC Health + Hospitals: that is being done every day to improve care, to really focus it around decreasing waste and really bolstering resilience in our environments. And so, you know, I come to this work really thinking about exactly what you asked. How do we do this each and every day with the multitude of priorities that we have to focus on anyway?

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00:07:54.230 --> 00:08:17.379

Komal Bajaj, NYC Health + Hospitals: So I'll start by saying that if, regardless of how you fit into healthcare, right, if you look at the mission statement of the organization that you work at, there's likely something about improving health of communities, improving healthcare, high-quality healthcare. And so, each and every organization, big or small, across the globe, has something to do out loud with improving

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00:08:17.380 --> 00:08:22.320

Komal Bajaj, NYC Health + Hospitals: And delivering high-quality healthcare. And then if we think about the dimensions

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00:08:22.320 --> 00:08:31.359

Komal Bajaj, NYC Health + Hospitals: The six dimensions of healthcare, whether it's, as you mentioned, safety, efficiency, whether it's equitable or efficient, person-centered or timely.

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00:08:31.360 --> 00:08:49.819

Komal Bajaj, NYC Health + Hospitals: Each and every dimension is impacted by severe weather, you know, whether it's, as you mentioned, pollutants in the environment, whether it's a severe weather event. We had to evacuate, actually, one of our hospitals because of a severe weather event that disrupted operations.

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00:08:49.850 --> 00:09:12.899

Komal Bajaj, NYC Health + Hospitals: Each and every dimension of healthcare quality is impacted by severe weather. And so, healthcare quality and safety functions, every organization has people that are working, deeded or, you know, around healthcare quality and safety, and so why not be able to rev those functions in order to be able to advance this important, high-quality, planet-friendly goal?

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00:09:13.140 --> 00:09:20.070

Komal Bajaj, NYC Health + Hospitals: And so, health and hospitals, which is the largest municipal health system in the United States, really took this on in earnest.

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00:09:20.070 --> 00:09:43.640

Komal Bajaj, NYC Health + Hospitals: And really thinking about how to merge the world in 2023. Whereas we were planning for 2024, we realized, let's look at our existing priorities. So that's key, right? Existing priorities. There's a lot of priorities, whether it's improving people's diabetes care, whether it's decreasing infections in the hospital, whether it's improving the bottom line through thinking about our hospital flow or our clinic flows.

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00:09:43.850 --> 00:10:04.469

Komal Bajaj, NYC Health + Hospitals: And so we took existing priorities, and what we asked of service lines over several hospitals was, please include a climate lens into one of your five key priorities. And so, this wasn't a, to your point, extra, it was meant to really focus around their existing priorities. And so what do I mean by a climate lens?

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00:10:04.470 --> 00:10:17.489

Komal Bajaj, NYC Health + Hospitals: I mean calculating the waste generated or saved through particular changes that are being made, or really look at the resilience of a process that's being established or being worked on.

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00:10:17.760 --> 00:10:35.680

Komal Bajaj, NYC Health + Hospitals: And so, I'll give you a few examples. One, we were working on newborn screening, for example, and improving that process. Our samples go to the Capitol, which is about 180 miles away from New York City. How does severe weather events play a role in that metric?

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00:10:35.680 --> 00:10:55.569

Komal Bajaj, NYC Health + Hospitals: Right? And if we... and it turns out there was no difference, whether there was a severe weather or not, which is really heartening to see. But had we found one, we would have been able to adjust or do additional sort of changes to make sure that if we knew storms were coming, we could adjust accordingly for these most vulnerable, tiny patients.

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00:10:55.570 --> 00:11:15.740

Komal Bajaj, NYC Health + Hospitals: On the flip side, if we're thinking about, you know, things like decreasing isolation days in the hospital, right, or decreasing infections, by pulling out catheters earlier, by being able to really think about getting people off of isolation when they don't need to be.

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00:11:15.740 --> 00:11:17.580

Komal Bajaj, NYC Health + Hospitals: Not only are we

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00:11:17.580 --> 00:11:42.529

Komal Bajaj, NYC Health + Hospitals: delivering great person-centered care, it turns out that there's a lot of waste associated with doing that work. And I'll tell you, measurement is not always easy, and certainly, a lot of health systems are working on improving their measurement around some of these, notions, but even if you just count the number of things that are saved, or there was a team who actually went to labor and delivery and weighed

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00:11:42.530 --> 00:12:07.460

Komal Bajaj, NYC Health + Hospitals: the items, right? The point here is having these conversations matters, and we knew it mattered, because the moment we started talking about it, people's eyes opened, and change is always hard, but people were willing to come to the table. We now actually have some pretty compelling data around this pilot that makes us feel very reassured that we can continue to embed climate action into our existing priorities.

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00:12:07.730 --> 00:12:16.710

Komal Bajaj, NYC Health + Hospitals: So remember, it was one of five priorities. What we found was that those projects that had a climate lens were 20% more likely to be completed.

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00:12:17.700 --> 00:12:42.700

Komal Bajaj, NYC Health + Hospitals: And that's amazing, and is in line with what we're seeing in the United States, right? Regardless of, you know, sort of where you are, 80% of healthcare workers, according to a Commonwealth Fund survey, want to work... have something to do with climate action, and so this provides a very granular way of doing that. And so, Camilla, I'm going to ask if you pull up first the Key Action Resource for Health Systems.

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00:12:42.700 --> 00:13:06.650

Komal Bajaj, NYC Health + Hospitals: you know, some of this work required, you know, really thinking about, understanding the priorities, for, clinical priorities, as well as sort of the rest of the overarching priorities. And so, what I want to highlight is, first, this key actions, to reduce greenhouse gases by U.S. hospitals and health systems. This resource.

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00:13:06.740 --> 00:13:14.600

Komal Bajaj, NYC Health + Hospitals: Was developed by the Collaborative about a year and a half ago. And so, you know, you can see here that there are some key

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00:13:14.600 --> 00:13:20.310

Komal Bajaj, NYC Health + Hospitals: components, of this journey, of these key actions.

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00:13:20.310 --> 00:13:36.750

Komal Bajaj, NYC Health + Hospitals: that are directly applicable. But we realize that, you know, each and every day, healthcare workers have lots to do, and so how do we take this and make it very granular and very, very practical? And so, next slide.

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00:13:37.860 --> 00:13:39.030

Komal Bajaj, NYC Health + Hospitals: the...

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00:13:39.780 --> 00:14:04.480

Komal Bajaj, NYC Health + Hospitals: collaborative developed key actions, but not at a 20,000-foot level, but really for the individuals, for individual healthcare professionals. You know, we all can lead where we

stand, no matter what our role is, clinical, non-clinical, and so this tool really provides, I feel, an opportunity to engage in discussions

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00:14:04.480 --> 00:14:20.760

Komal Bajaj, NYC Health + Hospitals: around work. So you can see here that there's some individual actions, you know, from optimizing your choices, thinking about diagnostic testing, granular ways on reducing waste, including PPE, as well as what individuals can do, which is support some institutional programs.

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00:14:20.760 --> 00:14:27.740

Komal Bajaj, NYC Health + Hospitals: You know, lobby for more sustainable procurement, and really begin to think about how do we educate ourselves.

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00:14:27.740 --> 00:14:37.110

Komal Bajaj, NYC Health + Hospitals: and also the future generations of healthcare workers to come. And so, I'm really excited about this tool, and how we're thinking about it in our health system is.

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00:14:37.110 --> 00:15:00.590

Komal Bajaj, NYC Health + Hospitals: One, if you go to the next slide, there's a lot of words, right? But it provides a lot of granularity, right? Looking at this tool and thinking, how can we build some of these key actions into our existing priorities? And we're also thinking of it to be part of the prioritization process, you know, as we're closing out 2025, thinking about 2026,

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00:15:00.590 --> 00:15:12.669

Komal Bajaj, NYC Health + Hospitals: really using this as one of the key features. So, you know, we want to work on these high-level, financially savvy, financially necessary priorities. How can we incorporate some of these concepts into that work?

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00:15:12.710 --> 00:15:21.350

Komal Bajaj, NYC Health + Hospitals: Another area that I think is really, really relevant for engagement of healthcare workers is, is through our professional societies.

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00:15:21.350 --> 00:15:46.349

Komal Bajaj, NYC Health + Hospitals: And so, I would encourage, you know, those that are on the line that are part of professional societies, or lead professional societies, or in any way, to really think about, you know, how can some of these key actions align with the priorities or the

education that's ongoing from these professional societies. I'm very heartened to see, for example, that in July of 2025, the American College of Surgeons, right, which represents 50,000

83 00:15:46.350 --> 00:15:47.610 Komal Bajaj, NYC Health + Hospitals: surgeons. 00:15:47.610 --> 00:16:09.419 Komal Bajaj, NYC Health + Hospitals: really took on and launched a sustained collaborative, and some of the actions that they are outlining are on this tool. And so I think that this is a beautiful opportunity. I'd encourage all of you to read through it, and really think about how does it fit into the work that you're doing and the work that you'll be prioritizing as you'll go forward. 00:16:11.260 --> 00:16:26.840 Jeff Thompson: Wow, what a great, what a great start. Thank you very much. I think that's exactly the, the help people need. It's framing, people say, climate, what are we gonna do? How do we take that? Well, you take it as you 86 00:16:26.920 --> 00:16:46.730 Jeff Thompson: decrease waste, you system improve, you improve safety, all those things decrease pollution, decrease our impact on climate, ultimately save money for the organization, talk about it and measure it. These are real practical things, and then highlighting the tools, so thanks. That is terrific. 87 00:16:46.920 --> 00:16:50.529 Jeff Thompson: I appreciate that a lot. Kara. 88 00:16:50.660 --> 00:16:56.320 Jeff Thompson: Kara, you have a vantage point different than many of ours. You're looking at 89 00:16:57.110 --> 00:17:14.779 Jeff Thompson: all the scope, the American Hospital Association has a very large footprint across the country, and they've come out quite strongly in the last number of years here, saying, we can be a part of this work, we can help lead and

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Jeff Thompson: Regardless of the political ups and downs, they've said, this is about patience and this is about community.

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00:17:20.950 --> 00:17:24.030 Jeff Thompson: I'm... I'm wondering,

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00:17:25.020 --> 00:17:41.879

Jeff Thompson: what are the… what are the best examples you've seen? You've had a chance to look at different areas of their… are there… are there approaches? Are there successes? What have you seen that maybe you can hold up to give people some encouragement and hope moving forward?

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00:17:42.830 --> 00:18:01.139

Kara Brooks: Thanks, Jeff. Yeah, I have had a very interesting vantage point, and at the AHA, I've had the opportunity to work closely with hospitals and health systems across the country, and it's been really inspiring to see the diverse ways organizations are advancing sustainability.

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00:18:01.140 --> 00:18:16.530

Kara Brooks: Some of the most promising pathways I've observed include things like embedding sustainability and governance, into governance and strategy, supply chain transformation, waste reduction, as Kamal was just talking about.

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00:18:16.530 --> 00:18:21.550

Kara Brooks: Resilience and community health, and using data-driven impact.

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00:18:21.610 --> 00:18:40.720

Kara Brooks: I think some good examples of some of these, like, within embedding the sustainability into the governance and strategy, we're seeing systems that are making real progress, and they tend to treat sustainability not as a side initiative. I think we've all been talking about that a lot lately.

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00:18:40.720 --> 00:18:56.549

Kara Brooks: But it's really a strategic priority, and we're seeing more and more hospitals integrate sustainability goals into their enterprisewide planning with executive sponsorship and cross-functional support. And that really helps to drive that momentum.

00:18:56.550 --> 00:19:01.830

Kara Brooks: I think another important example comes with resilience and community health.

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00:19:02.020 --> 00:19:16.450

Kara Brooks: There's a growing recognition that sustainability and community health are deeply connected. Health systems are investing in resilient infrastructure and partnering with local organizations to really address the health risks

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00:19:16.740 --> 00:19:22.689

Kara Brooks: That come with things like extreme heat, poor air quality, and food insecurity.

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00:19:22.830 --> 00:19:41.370

Kara Brooks: And finally, I'll just... I'll dive into the using data to drive impact. I think Kamal really had some great points on that as well, but I just want to say that more and more hospitals are really leveraging the data to track emissions, to benchmark performance.

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00:19:41.460 --> 00:19:56.180

Kara Brooks: and model the ROI of a sustainability initiative. That kind of visibility has been really key to building internal support and also scaling successful programs. So it's, it's been a fun journey, for sure.

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00:19:56.670 --> 00:20:10.069

Jeff Thompson: Well, that... let me... before I let you off the hook here, Kara, the American Hospital Association also, invites in and has CEO groups. They have senior leaders at the meetings, many senior leaders.

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00:20:10.150 --> 00:20:19.289

Jeff Thompson: What advice, how... you know, there's different personalities, different structures within organizations. How... how would you advise

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00:20:19.910 --> 00:20:37.820

Jeff Thompson: the non-CEOs to connect with that senior group? What's the senior group looking for? What's going to be the trigger that will help them move this up into that agenda, up into the governance piece that you talked about? Get them to...

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00:20:38.210 --> 00:20:43.459

Jeff Thompson: transform the supply chain, all those things. What... what advice do you have for them?

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00:20:43.990 --> 00:20:54.009

Kara Brooks: Yeah, one of the most exciting aspects of this work is really seeing how the different personas within healthcare organizations are stepping in to lead the sustainability efforts.

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00:20:54.150 --> 00:21:11.390

Kara Brooks: I just... reflecting, we did a sustainability summit this summer, and it was really interesting to take a look at all the different personas who were coming to the summit. It's not just facilities people, it's not just supply chain. It was a good compilation of all of them.

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00:21:11.460 --> 00:21:29.440

Kara Brooks: So whether it's clinicians advocating for improved practices in the OR, facility teams who are improving energy efficiency, as I mentioned facilities before, or even executives aligning sustainability into strategic goals, each group brings a unique lens.

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00:21:29.470 --> 00:21:33.890

Kara Brooks: And sets... and they also have a unique set of strengths.

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00:21:34.030 --> 00:21:49.759

Kara Brooks: I think to... to drive more systemic and sector-wide change, organizations are creating intentional structures that bring these voices together. Some of the strategies I've seen include things like cross-functional sustainability councils.

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00:21:49.760 --> 00:22:08.899

Kara Brooks: where these councils served as a hub of collaboration, and they ensure that the clinicians, the operations, the leadership perspectives are all well represented. They're also empowered with clear goals, and they get that executive support so they can drive some meaningful change.

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00:22:09.650 --> 00:22:11.489

Kara Brooks: There's also...

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00:22:11.970 --> 00:22:26.130

Kara Brooks: So, the lead comes with storytelling. When leaders champion sustainability and share stories of success, it creates a culture of innovation and is encouraged... that is encouraged and recognized.

115 00:22:26.170 --> 00:22:40.759 Kara Brooks: Highlighting the contributions of the frontline staff is very important, and clinicians are also very important in that realm, and they can be especially powerful in building that momentum. 116 00:22:41.810 --> 00:22:45.309 Jeff Thompson: Well, that's, terrific, and I... I can see why, 117 00:22:46.100 --> 00:23:05.200 Jeff Thompson: why, from your advantage point, you can, advise these organizations well, and I encourage them to be a part of it. Maybe if we get a little time later, we can talk about the collaborative, that is, that occurred, or that's ongoing work that, the Hospital Association's been a part of. 118 00:23:05.200 --> 00:23:08.150 Jeff Thompson: And, of course, there's many state 119 00:23:08.220 --> 00:23:19.999 Jeff Thompson: Programs going on, not just the national level and the medical society programs going on, so there's lots of opportunities to join groups. 120 00:23:20.000 --> 00:23:30.380 Jeff Thompson: of like-minded people pushing forward. So we're trying to build a theme here that internally you can make it work, externally, you have lots of partners. 121 00:23:30.420 --> 00:23:49.559 Jeff Thompson: And then one of the most important things is, how do you... how do you get going? How do you fit in? Can we learn from others? And one of the best learning tools has come out of the ... the National Academy of Medicine's Collaborative. And Seema, could you... could you talk to us a little bit about 122 00:23:49.880 --> 00:23:56.220

Jeff Thompson: Some of these, this pathway generation, we, we,

123 00:23:57.110 --> 00:24:10.370 Jeff Thompson: We have a big tent at the National Academy of Medicine, and sometimes you might think, well, you can't get anything done, but I think it's coalesced to form some really significant, usable pathways. 124 00:24:11.330 --> 00:24:26.770 Seema Wadhwa: Yes, Jeff, absolutely, and let me first comment a little bit about that big tent, and, you know, why that approach, I think, has been so important, so needed, and so successful. You know, as you can see from even just the breadth of colleagues on today's call, and 125 00:24:26.770 --> 00:24:34.149 Seema Wadhwa: You know, Kara, you were highlighting, you know, the different titles that were at the AHA Summit recently. 126 00:24:34.150 --> 00:24:40.810 Seema Wadhwa: Sustainability is not an individual sport, it really is a team sport. And, 127 00:24:41.090 --> 00:24:49.379 Seema Wadhwa: Ensuring that everybody finds a way to engage, a path forward, is critical, because 128 00:24:49.530 --> 00:25:14.030 Seema Wadhwa: this challenge we're facing is beyond any one individual, any one organization. It really will take everybody. And so I think the collaborative approach that the National Academy of Medicine has taken in leveraging amazing work that's already been done in the sector, lifting up partners, working together, creating, working groups to develop tools and pathways 129 00:25:14.030 --> 00:25:17.460 Seema Wadhwa: ways has been especially critical and valuable. 130 00:25:17.850 --> 00:25:20.499 Seema Wadhwa: So what has that led to? You know. 00:25:20.690 --> 00:25:36.859 Seema Wadhwa: I think what one of the most valuable elements, or one of the elements I've enjoyed the most, are these journey maps. You know,

every organization, every individual is coming on this journey from a unique place.

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00:25:36.930 --> 00:25:54.009

Seema Wadhwa: And there's always a lot to learn. The other thing I'll share about this journey is it's really a circular journey, where, you know, you may have started in one spot, but that doesn't mean that it's not somewhere you come back to.

133

00:25:54.010 --> 00:26:12.969

Seema Wadhwa: So as you can see on the screen, there are, there are actually two journey maps, and we're gonna dive into the clinical journey map, so do know if you focus on supply chain, that's an opportunity as well. But you'll see that there are really six key stages to the journey map. There is recognizing the benefits, which is really that awareness on why.

134

00:26:13.020 --> 00:26:23.020

Seema Wadhwa: Integrating strategy and operations as your step two, which is how do you embed sustainability into governance, leadership, and daily operations, which, Kara, I know you spoke to.

135

00:26:23.150 --> 00:26:40.139

Seema Wadhwa: Step 3 would be focused on measuring and reducing direct emissions. So, how do we make, you know, this quantifiable impact key? Then, you know, we're focusing on supply chain emissions, reducing direct emissions, and then

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00:26:40.140 --> 00:26:45.620

Seema Wadhwa: Critical to some of the work from the quality movement, continuous improvement and resilience.

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00:26:45.680 --> 00:26:48.649

Seema Wadhwa: So, along each of these stages.

138

00:26:48.730 --> 00:26:56.150

Seema Wadhwa: you have support, and you can onboard wherever you are on that journey. And as you can see.

139

00:26:56.400 --> 00:27:11.390

Seema Wadhwa: There are a variety of actions that are targeted and clearly laid out, and, you know, this is that culmination of all of the

work that's been happening through the National Academy of Medicine already, and bringing these together.

140

00:27:11.390 --> 00:27:34.389

Seema Wadhwa: And, you know, as you continue on this journey through all of the different steps, what you will find is that, you know, you'll have a pathway on and on-ramp anywhere. You won't, you know, you may be, also working in more than one stage at a time, so, you know, the emissions element, you know, that part of the journey.

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00:27:35.300 --> 00:27:42.989

Seema Wadhwa: can be a longer part of the journey for most people. And then lastly, the other thing I would highlight is

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00:27:43.130 --> 00:27:59.960

Seema Wadhwa: these journey maps, you'll note that the clinical pathways don't, don't focus just on one key element. They focus on the strategy and the operation. So, you know, Jeff, I started this conversation talking about the,

143

00:28:00.230 --> 00:28:03.160

Seema Wadhwa: the... The big tent approach.

144

00:28:03.250 --> 00:28:26.490

Seema Wadhwa: And the journey map is really built to support that with ensuring wherever you are in the organization, however you want to support, whether that is in a strategic role, a leadership role, an operational role, there are ways that you can tangibly engage with this journey map in a way that is truly meaningful and impactful.

145

00:28:26.970 --> 00:28:33.139

Seema Wadhwa: So, you know, definitely leverage it as a great resource.

146

00:28:33.280 --> 00:28:34.939 Seema Wadhwa: As we move forward.

147

00:28:36.050 --> 00:28:51.390

Jeff Thompson: Well, that's terrific, Seema, and that ties that together. It is... I mean, it's a great summary of an enormous amount of work, input from many different angles from different folks, but all trying to say, how do we build something?

148 00:28:51.390 --> 00:29:05.540 Jeff Thompson: that is useful, that people can jump in, because we know there's people way down the path, there's people just getting started saying, we need to do something and do something that makes a difference. And I think 149 00:29:05.540 --> 00:29:21.880 Jeff Thompson: that a lot of that's been vetted out here. This is a good tool to get started. There are multiple tools. We have other... there's other partners working in this space. I mentioned the Medical Society, Healthcare Without Harm, IHI has had collaboratives. There's other people that are working in this space 150 00:29:21.880 --> 00:29:26.490 Jeff Thompson: This is not to say this is the one and only, but it is ... 00:29:26.570 --> 00:29:45.870 Jeff Thompson: it is another tool that you can have, and there'll be a big list of tools at the bottom to say, we want to give you something that can be practical, but it's going to be used. So, thanks for that summary, and we'll have a little time later to talk about other tools. 152 00:29:46.370 --> 00:30:01.339 Jeff Thompson: So, Don, and thanks again, Don just got off an airplane from Columbia, he's been gone for 3 days, and if he falls asleep, it's quite warranted. But... but now you're on the spotlight, so, 153 00:30:01.600 --> 00:30:10.080 Jeff Thompson: You have a great deal of experience and have been around many of these organizations that I've mentioned. 154 00:30:10.380 --> 00:30:14.440 Jeff Thompson: And have thought a great deal about what it takes to change 155 00:30:15.180 --> 00:30:20.989 Jeff Thompson: Direction changed priorities changed outcomes in healthcare. 156 00:30:21.600 --> 00:30:22.480 Jeff Thompson: What...

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157
00:30:22.810 --> 00:30:35.839
Jeff Thompson: What do you think it's gonna take for this to become a
core piece of the work? To be, as Kamal started us out saying, it is ...
158
00:30:35.920 --> 00:30:48.630
Jeff Thompson: how is it just a part of everything we do? How are we
going to move from where we're at to ensure that healthcare leaders and
the workforce believe this is
00:30:48.820 --> 00:30:53.970
Jeff Thompson: Part of what we're responsible for inculcated into
everything they do.
160
00:30:55.980 --> 00:31:13.299
Don Berwick: I wish I had a magic wand, Jeff, but I think climate action
that we're talking about is a quintessential example of the larger
challenge we have in healthcare of collective action, working together.
As my colleagues have said, and you've said, this...
161
00:31:13.300 --> 00:31:23.689
Don Berwick: improving, combating the climate crisis, decarbonizing, is
not a job for individual heroes. It's not something individuals can do.
It's gotta be done.
162
00:31:23.840 --> 00:31:34.719
Don Berwick: Together, and how we organize for collective action is a key
issue in the lot that healthcare faces, whether it's equity, or social
determinants of health, or
163
00:31:34.850 --> 00:31:42.009
Don Berwick: Child well-being, violence mitigation and reduction, patient
safety, these are all collective.
164
00:31:42.860 --> 00:31:45.010
Don Berwick: problem. So first, for leaders.
165
00:31:45.130 --> 00:31:53.229
Don Berwick: This is a really important case. Can you find the leadership
platform that allows you to mobilize, everyone?
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00:31:53.760 --> 00:32:11.510

Don Berwick: toward the objective, in this case, of decarbonization. It's almost... it's like practicing for a class of problems we really need to deal with together. And as several of my colleagues have said, at a time when people are feeling tremendously overwhelmed, when, you know, you say, oh, no, I have to add this to my plate.

167

00:32:11.670 --> 00:32:26.509

Don Berwick: I think it's a great challenge for leaders to rise to, and to recognize that that's what people are feeling. Oh, no, can I handle one other thing? The answer is yes, you can. Through mobilization of collective effort, of everybody working together.

168

00:32:26.810 --> 00:32:39.339

Don Berwick: as several of my colleagues have said, the good news here is that your staffs, your employees, your clinicians, they're waiting to be invited to work on this. Over and over again, we've seen the amount of

169

00:32:39.800 --> 00:32:53.739

Don Berwick: goodwill and caring that's out there for working on climate action. The National Academy has, I think, set in place an incredible array of resources now that you can draw on, so you can, if you really want to get started.

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00:32:53.740 --> 00:33:00.620

Don Berwick: The tank is full of ideas and specific pathways and recommendations. You've heard about several of them already.

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00:33:00.650 --> 00:33:12.289

Don Berwick: So I don't have a simple answer, but I would say get started, exploit, and build on the goodwill that's out there in your workforces. And the last thing I'll say about it is that

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00:33:12.580 --> 00:33:18.579

Don Berwick: this is a win-win. As you've proven, Jeff, in your pathfinding leadership at Gundersen.

173

00:33:18.780 --> 00:33:25.310

Don Berwick: When you were there. This is not a win-lose proposition. If you take your energy into,

00:33:25.310 --> 00:33:39.549 Don Berwick: climate and greenhouse gas reduction, it pays dividends. It pays financial dividends, it pays workforce morale dividends, and of course, dividends to the planet. So, you will only gain if you get engaged, and we have to... we have to... 175 00:33:39.790 --> 00:33:40.859 Don Berwick: Make that. 176 00:33:41.220 --> 00:33:55.100 Don Berwick: feel possible. I think that people out there on the climate and these other issues are... they want to feel agency, they want to feel that they kind of know what to do, and there's stuff they can do in order to 177 00:33:55.440 --> 00:34:01.980 Don Berwick: get some traction on these problems they care about. The resources that are out there, 178 00:34:02.420 --> 00:34:21.200 Don Berwick: they're just extraordinary. You've heard some of them already and seen some slides about them. We have a Healthcare Climate Action Survey that you can use, that was developed in the National Academy framework and the Climate Action Framework, if you want to do an honest self-assessment. 179 00:34:21.210 --> 00:34:24.469 Don Berwick: See what you and your component 180 00:34:24.540 --> 00:34:29.900 Don Berwick: Organizations are doing, and get an honest look at that. 181 00:34:30.000 --> 00:34:40.099 Don Berwick: There are... the Climate Action Survey is... is... it's really a powerful tool, and it's non-judgmental. It's just, like, an honest way to... 182 00:34:40.190 --> 00:34:46.370 Don Berwick: to figure out where you are and how you can... how you can go

ahead, and it costs you nothing. You can download it.

00:34:46.370 --> 00:35:06.460 Don Berwick: Right off the website. The National Academies has hosted some webinars focusing on climate accounting. If you want to make progress on greenhouse gases and decarbonization, you need a way to measure. I was really stunned when we... just when we started this project. 184 00:35:06.460 --> 00:35:12.209 Don Berwick: already, what, 4 or 5 years ago, the number of, organizations that 185 00:35:12.210 --> 00:35:30.950 Don Berwick: they weren't resisted at all. They just said, how do I get started? What do I do? All they wanted was a little boost in guidance, and now we had carbon clinics early on in the project. All of that stuff is archived. The carbon clinic is a way for you and your organization to learn pretty fast about how you 00:35:30.950 --> 00:35:46.099 Don Berwick: can measure and track your carbon footprint, and get started. And then joining the movement itself. The National Academy has really taken, I think, a very bold step in trying to host a movement, and if you're not signed up. 187 00:35:46.170 --> 00:35:58.240 Don Berwick: you can sign up. So, you're in good company here, and if you want to get started, you're going to find lots of ways, lots of help out there, at minimal or zero cost. 188 00:36:00.130 --> 00:36:02.250 Jeff Thompson: Thanks, Don. I, I, 189 00:36:02.810 --> 00:36:15.810 Jeff Thompson: I think the tools are important. I think the theme is important. I think all this helps staff, and I really like your opening, that it is... it is not a... 00:36:16.070 --> 00:36:19.479 Jeff Thompson: If we're really gonna get this done, it's not a oneperson... 191 00:36:20.090 --> 00:36:39.409

Jeff Thompson: hero approach, although, just a shout-out to a number of the sustainability coordinators who, over the last 5 or 10 years, have felt an awful lot like they're by themselves. We're trying to build a case that you're not by yourself, there's a lot of people, maybe not so many people next to you. There's a lot of people that have an interest, and you put up

192 00:36:39.410 --> 00:36:47.960 Jeff Thompson: flag in the air, you'll... you'll get some people to rally around it. But I'm interested, Don, who's going down how to make the case. 193 00:36:49.180 --> 00:36:52.229 Jeff Thompson: For the, for the group, what... 00:36:52.390 --> 00:36:58.569 Jeff Thompson: You know, one of the most common things that we get is 00:36:59.010 --> 00:37:07.199 Jeff Thompson: how... how do you... how do you practically get this inculcated in... into the work? That they... that... 196 00:37:07.290 --> 00:37:23.240 Jeff Thompson: the senior leaders saying, well, there's costs, and there's staffing, and there's shortages, and there's regulatory... we have all these pressures, and there's competition, and, you know, I gotta decide whether to build a surgery center in the... in the suburbs, or downtown, and... 197 00:37:23.240 --> 00:37:31.770 Jeff Thompson: and you're telling me we should decrease weight. How do you make that argument? How do you see that argument being made? I'm... 198 00:37:31.770 --> 00:37:36.659 Jeff Thompson: I'm doing this because this is one of the most common questions I get, and that I think that 199 00:37:36.660 --> 00:37:56.150 Jeff Thompson: that people who care deeply really want to have happen, so

I'm trying to pick your large brains for them and say, how do we... how do we get in that door? How do we go from one or three of us to a dozen or four dozen to really move the dial in our organization?

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200
00:37:57.480 --> 00:37:59.440
Jeff Thompson: Who has... who has some ideas?
00:38:02.190 --> 00:38:02.960
Seema Wadhwa: Como, go ahead.
202
00:38:03.300 --> 00:38:04.210
Jeff Thompson: Okay.
203
00:38:05.240 --> 00:38:09.909
Komal Bajaj, NYC Health + Hospitals: Okay, thanks, Seema, and thanks,
Jeff. You know, I,
204
00:38:09.910 --> 00:38:28.459
Komal Bajaj, NYC Health + Hospitals: Jeff, I'm going to answer your
question just by ideas that came to my mind as everyone was talking, and
I think that, you know, there's the top-down approaches that need to
happen, and also the bottom-up, so I'll start with those, and then talk
about some, you know, sort of top-down. I think the first is, from the
bottom-up, tell your story.
205
00:38:28.460 --> 00:38:45.739
Komal Bajaj, NYC Health + Hospitals: Right? Why do you care about this?
And oftentimes, you will find allies, as Seema said, it's a big tent,
there's lots of people involved. You will find allies in all kinds of
places, clinical, non-clinical. If you work adjacent to healthcare
delivery itself, other co-workers. I think the second thing is.
206
00:38:45.740 --> 00:39:10.179
Komal Bajaj, NYC Health + Hospitals: you know, we do a lot of education,
no matter in what area you are, right? And so, how can you harness
existing education and training structures to begin to infuse some of
these concepts? An example, and I think I put it in the chat as well, if
there's a Grand Rounds about hypertension, talk about some of the... how
severe heat would, would affect that condition.
207
00:39:10.380 --> 00:39:35.119
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Komal Bajaj, NYC Health + Hospitals: Right? And what are some practices that might make that more resilient for our patients? Right? And so I think, at Health and Hospitals, we have a very large, training program to equip folks on quality improvement skills. We started to include this

concept of climate action, not only in part of the, sort of, standard reporting on how people report out

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00:39:35.120 --> 00:39:40.869

Komal Bajaj, NYC Health + Hospitals: PI projects, but also in the examples that we share. Another thing, and this is, like, my,

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00:39:40.870 --> 00:40:04.000

Komal Bajaj, NYC Health + Hospitals: you know, this is my fun little bit, is incorporate into your awards, right? We all give out awards. Healthcare Quality Week is coming up, we've got leadership awards, right? The most waste saved, or the most planet-friendly, name it whatever you want to name it, but just as you're giving out awards for different things, consider adding this dimension. And then I want to also just

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00:40:04.010 --> 00:40:29.010

Komal Bajaj, NYC Health + Hospitals: remind us that you can pilot, you know, as we're building these huge structures, Kara so elegantly talked about some of the governance that's happening, right? Start small, right? Start with one thing, and oftentimes a win will beget another win. From the, top down, what I'm heartened to see is more and more on the business case, right? It's one thing to sort of talk about it in theoreticals, but now we're sort of starting

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00:40:29.010 --> 00:40:35.129

Komal Bajaj, NYC Health + Hospitals: starting to see that, and I think that is going to be a really important thing, because there are so many things that are margin-preserving.

212

00:40:35.480 --> 00:40:36.420

Komal Bajaj, NYC Health + Hospitals: Thank you.

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00:40:37.170 --> 00:40:42.500

Jeff Thompson: That is, that's quite good, but as... as somebody that was the top,

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00:40:42.620 --> 00:40:58.280

Jeff Thompson: I would... I would be even more heartened if they would do financials and the moral imperative in a package. You're 100% right, and there is more interest, and we can make a great case. I would like to see them

00:40:58.350 --> 00:41:03.129

Jeff Thompson: take the same amount of interest in the moral imperative. Seema, you have some thoughts.

216

00:41:04.200 --> 00:41:05.550 Seema Wadhwa: You know, I...

217

00:41:05.610 --> 00:41:17.200

Seema Wadhwa: I think one of the things I love most about this work, one of the reasons I'm so passionate about it, is there is a why for everybody that's involved, and I think the

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00:41:17.200 --> 00:41:33.289

Seema Wadhwa: the key that I've found, or one of the most successful things I've done, has been to be multilingual. And by that, I don't mean my French and Punjabi speaking, I mean being thoughtful in terms of what are the drivers for the stakeholder I'm working with.

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00:41:33.290 --> 00:41:40.310

Seema Wadhwa: You know, Jeff, you mentioned what mattered to you as a CEO, and that might be very different than what matters to a nurse.

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00:41:40.310 --> 00:41:59.039

Seema Wadhwa: You know, I remember early on working with some engineers, and they created a secret tomato garden, because they wanted... gardening was important to them. So finding those on-ramps in terms of what the driver is, and leveraging that to drive the change, because

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00:41:59.040 --> 00:42:13.870

Seema Wadhwa: as I started by saying, this work really does connect to every single person, whether it's through the health, or whether it's caring for their family, or whether it's, you know, thinking about cost savings. You know, at the end of the day.

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00:42:14.120 --> 00:42:33.199

Seema Wadhwa: wasting less means saving more. So, I use that kind of as my entry point into getting more people engaged, is first listening, what matters to you, and then aligning with how does that relate to

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00:42:33.500 --> 00:42:36.589

Seema Wadhwa: What matters to all of us? The health of our communities.

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224
00:42:37.120 --> 00:42:37.710
Jeff Thompson: Nice.
225
00:42:37.830 --> 00:42:44.610
Jeff Thompson: And everybody just will identify with that. That is a
great start. Don?
226
00:42:44.610 --> 00:43:03.159
Don Berwick: Yeah, Jeff, I've learned for you the multiple bottom lines
view here. Yes, I think greenhouse gas reduction and waste reduction are
wins financially, and we need to continue to build... to build that case,
but as you said, that's not the only case to build. We're also happy to,
by the way, be saving the planet for future generations.
227
00:43:03.160 --> 00:43:05.010
Don Berwick: And I think that
00:43:05.010 --> 00:43:23.870
Don Berwick: That should be celebrated and made explicit. And then
lastly, there's the clinical implications here. I think there's a case
being made, and I think it's going to be made more strongly in the next
year or two, that sustainable healthcare, with waste reduction, attention
to carbon reduction.
229
00:43:23.910 --> 00:43:33.279
Don Berwick: actually saves patients' lives and health. That it's...
there's a health bottom line here that we should be explicit about. All
of them matter.
00:43:34.980 --> 00:43:53.090
Jeff Thompson: Well, I really agree on that, and I happen to think, you
know, we get stuck on things, that the pollution that actually hurts our
patient. I mean, it was one of our initial... when we initially came out
working on it, we didn't talk about climate back in the early 2000s,
because our board
231
00:43:53.090 --> 00:43:57.640
Jeff Thompson: Would not have it, but we... we talked about pollution and
how it made people sick.
232
00:43:57.640 --> 00:44:05.030
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Jeff Thompson: And... and I think it's still making people sick, and we can still use that. It's... it's back to...

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00:44:05.620 --> 00:44:13.859

Jeff Thompson: Seema's point, what... what matters to them, and we... this... this is so pervasive and affecting, folks.

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00:44:14.890 --> 00:44:23.740

Jeff Thompson: There is a question from the audience that talked about, how health insurers… how health insurers can and

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00:44:23.740 --> 00:44:35.449

Jeff Thompson: can be a partner here, and we certainly had health insurers who were part of the National Academy of Medicine and have been strong partners through this collaborative work.

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00:44:37.720 --> 00:44:44.629

Jeff Thompson: How... how would... how would you think about that? Do any of you have immediate thoughts on what might... what might help?

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00:44:46.030 --> 00:44:55.560

Seema Wadhwa: I'm happy to take that, coming from, leading the environmental work at Kaiser Permanente recently, integrated, network. You know.

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00:44:55.890 --> 00:45:09.790

Seema Wadhwa: I think more and more, health insurers and others beyond Kaiser Permanente are recognizing, how climate is impacting health, and that they have a role to play to

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00:45:09.910 --> 00:45:21.439

Seema Wadhwa: to help drive change. So, multiple health insurers recently have put out papers in terms of climate impacting cost, and

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00:45:21.460 --> 00:45:33.680

Seema Wadhwa: appreciating how that might be a driving point. So, Blue Class Blue Shield, has put out a study, I'll drop in the link in a moment, as has, Elevance Health.

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00:45:33.680 --> 00:45:47.499

Seema Wadhwa: The Health Action Alliance partnered with Mercer to develop a tool that looks at the cost for employers as it relates to their workforce, on, the costs relating from climate events.

242 00:45:47.550 --> 00:45:53.780 Seema Wadhwa: So, you know, I think there's a lot to be discovered in terms of how health insurers can engage. 243 00:45:54.240 --> 00:45:59.180 Seema Wadhwa: And that work is starting, and the recognition, I think, is there. 244 00:46:01.630 --> 00:46:16.859 Jeff Thompson: Yeah, I think that's, great. I think insurers can be great partners on efficiency, that's good for all. On unnecessary care, that's good for all. I think another piece that... that comes to mind 245 00:46:16.900 --> 00:46:27.640 Jeff Thompson: is, the investment, strategies. Not-for-profit healthcare has enormous stockpiles of funds. I, I know 246 00:46:27.640 --> 00:46:35.919 Jeff Thompson: Day-to-day operations are thin in many places, but there's still many, many billions of dollars, 247 00:46:35.920 --> 00:46:49.130 Jeff Thompson: that are... have investment choices, and the insurers are no different. They, too, could be called upon to make some investment choices that can move in a certain direction. 248 00:46:50.500 --> 00:46:57.089 Jeff Thompson: Kara, you see a big landscape of a cross. Are there... is there anything else you want to add about 249 00:46:57.200 --> 00:46:58.090 Jeff Thompson: how... 250 00:46:58.400 --> 00:47:10.250 Jeff Thompson: How... how people have successfully connected with healthcare organizations to nudge them forward, or suppliers or ... or

insurers that are also part of the sector.

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251
00:47:11.790 --> 00:47:14.559
Kara Brooks: Yeah, Jeff, I think that...
00:47:14.660 --> 00:47:31.750
Kara Brooks: That's a.m. that's a great question. I think, pulling people
together, one... one really practical first action in getting all of the
different healthcare professionals together, whether it's a system
leader, an insurer, or whomever, but it's really to... to...
00:47:31.750 --> 00:47:43.359
Kara Brooks: just start with a conversation, and make sure that that...
that conversation has intention. I think that my colleagues here have
kind of, have really spoken about that well, but it's,
254
00:47:43.360 --> 00:47:47.019
Kara Brooks: It is an important thing to do, is to have that
conversation.
255
00:47:47.020 --> 00:47:58.660
Kara Brooks: And, to speak to the... to the language, as Seema said, that,
will help them understand, or will help them... will help bring the group
together collaboratively.
256
00:48:00.020 --> 00:48:04.979
Jeff Thompson: Thank you. Thank you. There are,
00:48:05.180 --> 00:48:10.440
Jeff Thompson: There's a question... there's been a number of questions
that I've filtered into our questions here.
258
00:48:10.600 --> 00:48:12.130
Jeff Thompson: But, but one...
259
00:48:12.600 --> 00:48:17.960
Jeff Thompson: That came up, that comes up quite often now, and has come
up in our meetings,
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00:48:18.170 --> 00:48:19.359
Jeff Thompson: And that is...
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261
00:48:19.800 --> 00:48:31.099
Jeff Thompson: seems to be a lot of changes in the political realm. The
EPA and the Ag Department, there's lots of changes in focus. The CDC,
262
00:48:31.580 --> 00:48:48.149
Jeff Thompson: How... how is a health system, a health organization, or a
clinician, or... how are we to navigate that in relation to try and get
this work done? How do you think about... obviously, you all know what's
going on. What do you...
263
00:48:48.520 --> 00:48:58.810
Jeff Thompson: What advice do you have people when they see all this...
the... all these changes, in, in priorities.
264
00:48:59.290 --> 00:49:07.019
Jeff Thompson: What, then, Do they do, and what do they... what's the
message they give to their colleagues and organization?
265
00:49:13.460 --> 00:49:15.079
Jeff Thompson: Any brave soul here?
266
00:49:15.460 --> 00:49:18.869
Don Berwick: Yeah, I'll stop, if you want.
00:49:19.290 --> 00:49:24.170
Don Berwick: There's no seat of neutrality available.
00:49:24.430 --> 00:49:27.029
Don Berwick: The destruction of,
269
00:49:27.290 --> 00:49:40.679
Don Berwick: programs to protect us against many health threats,
including greenhouse gases, through the weakening of EPA, the ending of
use of the endangerment clause, and other public policies is lethal.
270
00:49:40.970 --> 00:49:48.609
Don Berwick: And harms health, and if we're healthcare providers, read
your mission statement.
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271 00:49:48.860 --> 00:50:07.109 Don Berwick: And ask yourself if you now have a duty to speak up and get political, I'm not saying partisan, but political, to advocate for policies and people who will protect public health. I'm very, very worried about the weakening that's going on, and I think the time for silence is gone. 272 00:50:07.250 --> 00:50:08.760 Don Berwick: Neutrality is harm. 00:50:11.420 --> 00:50:16.429 Seema Wadhwa: You know, the only thing I would add to that, and I agree with that, is that 274 00:50:17.210 --> 00:50:19.870 Seema Wadhwa: There are many things that are not in our control. 00:50:20.270 --> 00:50:25.330 Seema Wadhwa: And certain things will never be completely in our control as individuals. 276 00:50:25.450 --> 00:50:26.790 Seema Wadhwa: However. 277 00:50:27.420 --> 00:50:35.469 Seema Wadhwa: Survey your surroundings. Where are your spheres of influence? You know, who can you work with? Who can be your climate squad? And... 278 00:50:35.500 --> 00:50:49.970 Seema Wadhwa: how do you... how can you create influence? The work I can do is very different than the work that Kara, or Don, or Komal, or Jeff, that you can do. And so, leaning into what Don said of, you know, there is not a moment to spare. 279 00:50:51.090 --> 00:51:00.810 Seema Wadhwa: There are still... there is still work everybody can do, and just because you can't control the whole picture doesn't mean you can't control your own actions.

00:51:01.170 --> 00:51:03.229 Seema Wadhwa: And influence others' actions. 281 00:51:06.480 --> 00:51:13.640 Jeff Thompson: Yeah, there is a lot of concern out there. Someone wrote in about the FCHQs, and, 282 00:51:14.600 --> 00:51:19.740 Jeff Thompson: If... no, sorry. The... The federal, health centers. 00:51:24.680 --> 00:51:38.719 Jeff Thompson: FQHCs. I'm sorry. And talk about funding. There's funding for a lot of things that are drying up, and... and that is a struggle. There's gonna be fun... problems with programs. 284 00:51:40.040 --> 00:51:42.810 Jeff Thompson: Kamal, you work in a giant health system. 285 00:51:43.480 --> 00:51:58.159 Jeff Thompson: does... is this something that is part of the conversation? Where will the money come from? Should we just pause all this? Or are people saying, no, this is too big, we have to plow forward? What is... what is kind of the mood 286 00:51:58.790 --> 00:52:08.009 Jeff Thompson: internally, given the external, not only the climate disasters that are happening that included New York City not that long ago, but 00:52:08.250 --> 00:52:16.640 Jeff Thompson: But also, all the other ramifications of changes in the government landscape. 288 00:52:16.950 --> 00:52:38.500 Komal Bajaj, NYC Health + Hospitals: Yeah, absolutely. You know, I first want to just acknowledge, like, the heaviness and challenge of this moment. I think, first, just acknowledging it, and then surrounding yourself with community and people you can talk about it with, I think, is really, really important. And I think Don's point of, you know, speaking up for the things that you care about, matters.

00:52:38.500 --> 00:53:03.200

Komal Bajaj, NYC Health + Hospitals: And it matters a lot. And I think that, you know, of course, I had conversations this morning about some of the changes that are coming and how we can position ourselves, and I think the point here is kind of the point that I was beginning, or I started with in the moment, in that, you know, the need to do our best to take care of people and extend the health of our communities doesn't change.

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00:53:03.440 --> 00:53:15.670

Komal Bajaj, NYC Health + Hospitals: And so, you know, there is no doubt that there are tremendous headwinds, but how we do that, and how we can add some of this waste reduction, this pollution reduction component, the resilient pieces.

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00:53:16.020 --> 00:53:35.760

Komal Bajaj, NYC Health + Hospitals: there are creative ways to do that, and so I think that, to Seema's point, while we don't have a lot that is in our control, we forge ahead with the things that we can do, and recognize that, yes, the priorities will shift, but the cart, the wagon of waste reduction, resilience goes along with it.

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00:53:38.130 --> 00:53:47.760

Jeff Thompson: Great. So, so, this is heavy stuff, and, we only have 5 minutes left, so we're gonna... we're gonna go back...

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00:53:48.460 --> 00:53:51.660

Jeff Thompson: A little bit, and... and,

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00:53:51.890 --> 00:53:58.409

Jeff Thompson: pulled some of the things out. I want, I'll start with Kara. Kara.

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00:53:58.860 --> 00:54:10.759

Jeff Thompson: What gives you a feeling of optimism? I mean, there's plenty of bad stuff out there, and Don is absolutely right. We can't be quiet, and we can't stop,

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00:54:10.910 --> 00:54:15.459

Jeff Thompson: But what gives you optimism and some hope in this work?

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00:54:16.510 --> 00:54:31.470

Kara Brooks: Yeah, the way I look at it, Jeff, I think what gives me the most optimism... I can say that word... is the growing recognition that sustainability isn't separate from healthcare, it is healthcare.

298

00:54:31.470 --> 00:54:47.959

Kara Brooks: We're seeing a lot more hospitals and health systems that embrace this connection, and it's not just in theory, but it's also in practice. There's a lot of momentum around resilience and community partnerships, and I know somebody had asked a question about community partnerships.

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00:54:48.280 --> 00:54:59.859

Kara Brooks: And how they center around environmental health as part of the mission to improve patient outcomes. I'm also really encouraged by the energy coming from within the field.

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00:55:00.120 --> 00:55:14.959

Kara Brooks: Whether it's clinicians, it's supply chain leaders, it's facility teams, and executives that are also stepping up and asking, how can we do better? This kind of grassroots and cross-functional engagement is very powerful.

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00:55:15.020 --> 00:55:32.399

Kara Brooks: Finally, the tools, data, peer networks are all stronger than ever. We're not starting from scratch, we're building with proven strategies and shared learning, and I think this commitment, this collective commitment to protecting both people and the planet

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00:55:32.400 --> 00:55:35.099

Kara Brooks: is so impactful, and I think...

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00:55:35.100 --> 00:55:43.089

Kara Brooks: I'm also really continue to be optimistic, again, about the, the networks that we've created.

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00:55:43.090 --> 00:55:56.650

Kara Brooks: And the momentum we've built. Interestingly enough, I've been looking at the participants here, and there are, a lot of new names, and so we are having that impact, and we are building that momentum.

3 0 5

00:55:57.170 --> 00:55:58.220
Jeff Thompson: Outstanding.

306 00:55:59.050 --> 00:56:02.299 Jeff Thompson: Any other... Thoughts of optimism? 00:56:03.590 --> 00:56:20.530 Seema Wadhwa: I mean, I'm just... I'm just gonna hit rewind and listen to everything Kara just said, because that in itself is hopeful. You know, I think that the thing that, that drives me forward is that action truly is the anecdote to despair. 308 00:56:21.380 --> 00:56:31.089 Seema Wadhwa: That has been, through these challenging times, that has been what drives me forward, and all of the reasons that Kara shared to have hope, just are a cherry on top of that. 309 00:56:32.200 --> 00:56:55.690 Don Berwick: pile on with that. I think a couple other things. One is the knowledge base we have. Just look at the resources the Academy's put together. No one can say we don't know what to do. Absolutely not. This is not a problem which the ideas are deficient. They're just everywhere. So, if you want to get started, there's lots of help out there. I also have been interested in the response to the Academy's work. 310 00:56:55.690 --> 00:56:59.639 Don Berwick: From organizations, not, don't bother me, but tell me more. 00:56:59.690 --> 00:57:04.739 Don Berwick: Youth give me hope. I think young people in your organizations, 312 00:57:04.900 --> 00:57:13.490 Don Berwick: They, they know what needs to happen. I also, I think I want to shout out to the AHA, the, the, you know, the hospital... 313 00:57:13.650 --> 00:57:20.740 Don Berwick: industry could be responding, saying, leave me alone, we've got too much on our plate, that is not what's going on. AHA has really stepped forward. 314 00:57:20.740 --> 00:57:21.130

Jeff Thompson: news.

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315
00:57:21.130 --> 00:57:27.689
Don Berwick: I hope you'll share that. It's what we need. So, all of that
gives me optimism.
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00:57:28.150 --> 00:57:28.890
Jeff Thompson: Right.
317
00:57:30.800 --> 00:57:31.710
Jeff Thompson: Come up.
318
00:57:33.060 --> 00:57:57.269
Komal Bajaj, NYC Health + Hospitals: just sitting here vigorously
nodding, you know, I think the dimension... when people will talk about,
you know, climate action, the idea, the notion that this could address
mental, you know, working on something can address people's mental
health, can improve our recruitment and retention of healthcare
workforce, I think is a key, a key area that gives me a lot of joy,
because
319
00:57:57.270 --> 00:58:06.239
Komal Bajaj, NYC Health + Hospitals: You know, we see it each and every
day that people are coming for the climate action, staying for the
performance improvement, staying for the education, staying for the ...
insert whatever.
320
00:58:06.240 --> 00:58:06.810
Jeff Thompson: Yes.
00:58:06.810 --> 00:58:08.759
Komal Bajaj, NYC Health + Hospitals: And that's really delightful to see.
322
00:58:10.630 --> 00:58:25.769
Jeff Thompson: Well, that is fantastic, and I... I want to thank, all four
of you. That was terrific. That was a great package. I think it was a
great summary to a very strong webinar series. I would encourage our
quests to... to...
323
00:58:26.030 --> 00:58:43.490
Jeff Thompson: who joined, thank you for joining, and please explore the
other... the other webinars. Share these resources. These resources are
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made to be shared. Thank you for taking action. We need to take action. This is not... not a game for sideline viewing. 324 00:58:43.490 --> 00:58:49.400 Jeff Thompson: We have to teach, we have to, collaborate. 325 00:58:49.480 --> 00:58:56.590 Jeff Thompson: And, ultimately, we have patients, organizations, and communities That need to be served. 00:58:56.710 --> 00:59:01.759 Jeff Thompson: This is a great opportunity, this is a time to define ourselves as 327 00:59:01.910 --> 00:59:06.390 Jeff Thompson: really health organizations, and I believe 328 00:59:06.690 --> 00:59:14.950 Jeff Thompson: The pathway is here. Thank you for being a part of it. We need all of you in our big and steadily expanding tent. 329 00:59:15.590 --> 00:59:16.490 Jeff Thompson: Thank you. 330 00:59:18.860 --> 00:59:19.320 Seema Wadhwa: Thank you. 331 00:59:19.320 --> 00:59:20.340 Kara Brooks: Thank you.