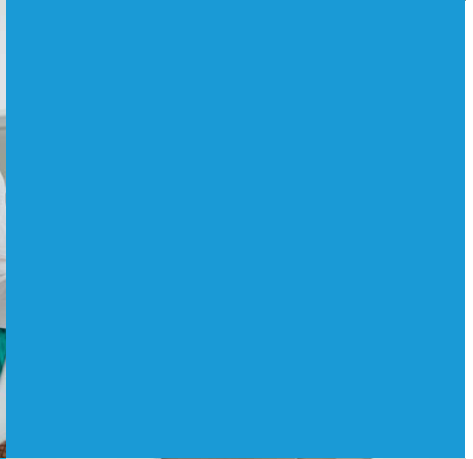
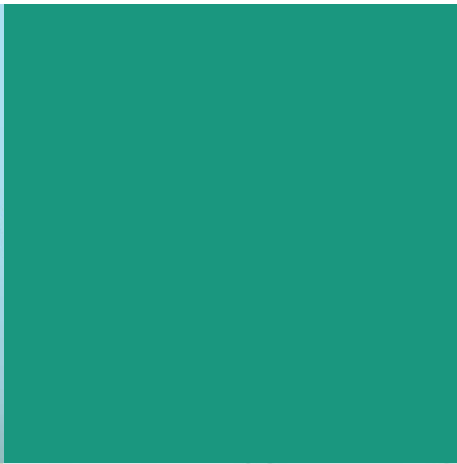
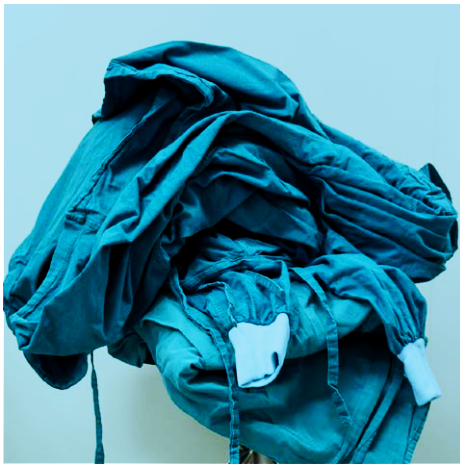


# Global Green and Healthy Hospitals Pacific Region Annual Report 2024/25

Delivered by



Pacific coordinator of



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# Global Green and Healthy Hospitals (GGHH) Pacific Region Annual Report 2024/25

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### **A note about this report:**

**This report reflects a transition from a financial-year to a calendar-year report and therefore encompasses an 18-month interval from July 2024 through December 2025.**

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# About Global Green and Healthy Hospitals



Established by Health Care Without Harm in 2011, Global Green and Healthy Hospitals (GGHH) is a collaborative network of health institutions that are committed to reducing their ecological footprint and promoting public and environmental health.

In August 2024, the global GGHH network reached 2,000 members. This celebratory video features Pacific members, Wide Bay Hospital and Health Service and Barwon Health.

GGHH is based around a framework of 10 interconnected goals outlined in the GGHH Agenda. All GGHH members endorse this agenda when they become members.



## LEADERSHIP

Prioritise environmental health as a strategic imperative



## CHEMICALS

Substitute harmful chemicals with safer alternatives



## WASTE

Reduce, treat and safely dispose of healthcare waste



## ENERGY

Implement energy efficiency and clean, renewable energy generation



## WATER

Reduce hospital water consumption and supply potable water



## TRANSPORTATION

Improve transportation strategies for patients and staff



## FOOD

Purchase and serve sustainably grown, healthy food



## PHARMACEUTICALS

Prescribe appropriately, safely manage and properly dispose of pharmaceuticals



## BUILDINGS

Support green and healthy hospital design and construction



## PURCHASING

Buy safer and more sustainable products and materials

# About GGHH Pacific Region

The **Climate and Health Alliance (CAHA)** is proud to coordinate the Pacific region of the GGHH network (since 2012), which includes 100+ health institutions across Australia and New Zealand.

Coordinating the GGHH Pacific Network contributes to CAHA's purpose to build the power of the health movement for climate action, community resilience and sustainable healthcare. One of CAHA's core strategies is Health Sector Transformation to support a health system that is decarbonised, sustainable and resilient.

You can read further information about CAHA's work in the [CAHA 2024-25 Annual Report](#), and the [CAHA's 2025-2029 Strategic Plan](#), and [GGHH Pacific Annual Report 2023-24](#).

From July 2024 to December 2025, our GGHH Pacific network has grown to 186 member organisations representing 2865 individual hospitals and health services.



# 186

**GGHH members in the Pacific region**



representing over

# 2,865

**hospitals and health services**

As of December 2025



Over the past 18 months, GGHH members have accelerated their progress and achievements. In 2025, we proudly launched the CARE (Community of Action for the Reduction of Emissions) Program, addressing key areas such as governance, emissions measurement, and value-based care. We welcomed the release of the Healthcare Sustainability and Resilience Module by the Australian Commission on Safety and Quality in Health Care, a long-awaited and strongly advocated resource with significant potential to embed environmental sustainability and resilience into the safety and quality of care. We look forward to continuing to support members on this journey in 2026.



**Dr Stefanie Carino**

Sustainable Healthcare Manager, Climate and Health Alliance

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## What we do

GGHH is a community in which members learn from one another by sharing information and experiences to help accelerate the transition to low carbon, climate resilient and environmentally sustainable healthcare across the world.

**The three goals of GGHH are to:**

**1**



**Facilitate connection**

between people driving sustainable healthcare to share information, support one another and build a community of practice

**2**



**Provide tools and resources**

**3**



**Document, promote and celebrate achievements.**



### Facilitate connection:

#### Quarterly online member meetings

CAHA facilitates online Pacific region GGHH member meetings every quarter. These meetings are an opportunity for members to hear from guest speakers on an array of sustainable healthcare topics and connect with sustainable healthcare champions throughout our region.

#### Online community

The GGHH Pacific region online community facilitates communication between members in our region, enabling members from across the Pacific to share ideas and inform practical actions.

#### Community of Practice (Waste and Food)

The GGHH Communities of Practice are an opportunity for members to deep dive into topic specific issues and learn from the experts. The Waste CoP and Food CoPs run meetings with guest speakers and case study presentations are held several times per year.



## Provide tools and resources:

### **GGHH Member update newsletter**

On alternating Thursdays, GGHH Pacific Members receive a Member Update newsletter featuring sustainable healthcare insights, including event highlights, valuable resources, case studies, fostering connections with fellow members.

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### **Sustainable Healthcare Officers**

GGHH Pacific Sustainable Healthcare Officers provide direct advice to Members, answer inquiries, and facilitate connections within the network.

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### **Tailored support for new Members**

We run 1-1 orientation meetings for new members which provides an overview of our resources, GGHH connect and an opportunity to get to know the team.

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### **GGHH connect**

This platform provides members with tools and resources including guidance documents, data management tools including the Climate Impact Check Up Tool, discussion forums, recordings and a library of case studies.



## Document, promote and celebrate achievements:

### **The Climate + Health Summit** (previously Greening the Healthcare Sector Forum)

This yearly event has been run by Climate and Health Alliance along with a partner healthcare organisation since 2012. Further information about the 2024 forum is included in the following section.

### **Case studies and annual awards**

These case studies showcase innovative sustainable healthcare projects by GGHH members, providing inspiration and highlighting their achievements. The annual Health Care Climate Challenge awards recognise member contributions to advancing sustainability in healthcare.

### **GGHH Annual Report**

Each year, we prepare the GGHH Annual Report to summarise and track progress across the Pacific region. This report provides members with the opportunity to showcase their achievements and ensure their efforts contribute to collective action.

### **Race to Zero**

Led by the UN Climate Change High-Level Champions, the Race to Zero rallies non-state actors to take rigorous and immediate action to halve emissions by 2030 and achieve net zero emissions by 2050.



The Pacific winners of the 2025 Health Care Climate Challenge Awards receiving their awards at The Climate + Health Summit 2025 on Yugambah/Kombumerri Country (Gold Coast) 26-28 October 2025.

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# GGHH Pacific Region 2024-25

From July 2024 to December 2025, our GGHH Pacific network has grown to 186 member organisations representing 2865 individual hospitals and health services.



## NEW MEMBERS

- **Advanced Oral & Maxillofacial Surgery**  
(July 2024)
- **Metro South Health**  
(July 2024)
- **Silverchain**  
(August 2024)
- **Hollywood Private Hospital**  
(August 2024)
- **Chris O'Brien Lifehouse**  
(September 2024)
- **Royal Flying Doctor Service WA**  
(November 2024)
- **Murrumbidgee LHD** (January 2025)
- **Forte Health**  
(February 2025)
- **Central Coast Local Health District**  
(February 2025)
- **MQ Health**  
(May 2025)
- **Mackay Hospital and Health Service**  
(June 2025)
- **Colac Area Health**  
(June 2025)
- **Seymour Health**  
(June 2025)
- **Nexus Hospitals'**  
(July 2025)
- **DPV Health**  
(August 2025)
- **Sexual Health Quarters**  
(September 2025)
- **Hesse Rural Health**  
(October 2025)
- **Maryborough District Health Service**  
(November 2025)
- **Stirling Hospital**  
(November 2025)



## MEMBERS CASE STUDIES

We worked with members to release 5 new GGHH case studies. They are all accessible to GGHH members on GGHH connect. They include:

[Sustainable Christmas Decorations in a Hemodialysis Unit](#) - Monash Health  
(December 2024)

[Reducing Low-Value Tests in the Barwon Health Emergency Department](#) (December 2024)

[Reusable surgical gowns and drapes](#) - Peter MacCallum Cancer Centre (July 2025)

[Green Champions at Mercy Health](#) (July 2025)

[Reusing Oral Nutrition Supplements](#) - Eastern Health (August 2025)



# GGHH Pacific Region Members in Action

Image: Emily Davis, and Klara DeMeare, Bathurst Uniform Swap 2025. Klara DeMeare from Western NSW LHD presented her project The Clothing Connection, a uniform fair/pop up shop where staff could bring in uniforms no longer needed for redistribution or recycling.

# GGHH Pacific Initiatives

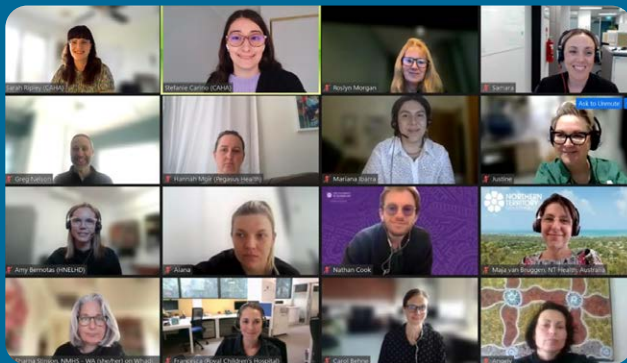
## Waste Community of Practice

The Waste Community of Practice was established in September 2024.

A survey was conducted with members to understand key challenges and opportunities. While landfill remains the predominant waste management system, there is a growing recognition of the need for improved waste reduction strategies, composting, and recycling. The results underscored the significant gaps in regulatory awareness and staff education, emphasising the importance of targeted training and resources to enhance familiarity with local waste management guidelines.

Other challenges identified included inadequate infrastructure, waste segregation issues, and difficulties in managing specific waste types like plastics and organic materials, calling for collaborative efforts among healthcare facilities, regulatory bodies, and waste management experts.

The CoP currently has 96 individual members across 44 institutions in all states and territories.



### Topic 1 - Waste avoidance

The meeting featured a presentation from Dr Trevor Thornton, Senior Lecturer at Deakin University, who discussed the essentials of waste auditing, covering various methods, outcomes, and regulatory aspects. This was followed by three case studies:

- Dr. Hayden Snow, Surgeon at Peter MacCallum Cancer Centre, shared the hospital's transition to reusable surgical gowns and drapes. The reusable products received positive feedback from staff, and the success of this change is now laying the groundwork for a National Roadmap aimed at eliminating single-use gowns in theatres nationwide.
- Sharon Harding, Equipment and Consumables CNC at Royal Darwin Hospital, discussed efforts to gain consensus among surgeons and anaesthetists to remove unnecessary items from theatre packs.
- Patricia Knight, Infection Prevention Clinical Nurse Consultant at Hunter New England Local Health District, presented the "Gloves Off" campaign, which successfully reduced unnecessary glove usage on two wards at John Hunter Hospital.

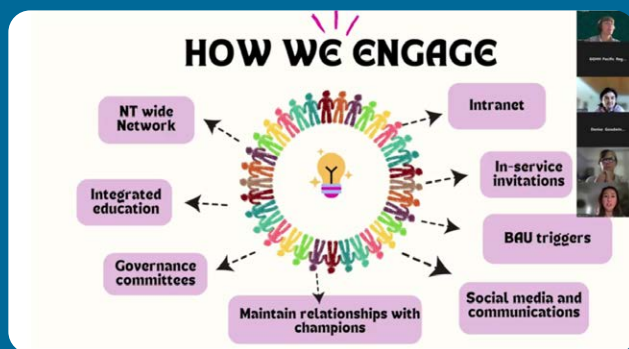


## Topic 2 - Behaviour Change and Staff Engagement

This meeting featured presentations from:

- Dr Denise Goodwin, Co-Director of Health Programs at BehaviourWorks Australia, who introduced behavioural frameworks demonstrating how they can be used to systematically design interventions that make sustainable practices easier and more consistent for staff.
- Jade Tavane, Sustainability Education and Engagement Lead at Northern Territory Health, described the importance of “connecting to the vision, the operations, the team and each other” when leading change. Jade linked staff engagement with education strategies, sharing NT-wide initiatives such as the “Think Before You Glove” campaign and work to reduce unnecessary “blueys” in operating theatres at Royal Darwin Hospital. These examples highlighted how targeted education, clear messages and collaborative design can shift everyday practice at scale.

Members shared practical initiatives underway including closed-loop printer cartridge systems, projects to reduce antibiotic waste and efforts to strengthen staff engagement in appropriate waste segregation.



| The Nine Intervention Functions (BCW) |   |
|---------------------------------------|---|
| Education                             | ... Increase knowledge or understanding   |
| Persuasion                            | ... Use communication to induce positive/negative feelings or stimulate action  |
| Incentivisation                       | ... Create an expectation of reward   |
| Training                              | ... Impart skills   |
| Modelling                             | ... Provide an example for people to aspire to or imitate   |
| Enablement                            | ... Increase means/reduce barriers to increase capability/opportunity   |
| Environmental Restructuring           | ... Change the physical or social context/environment   |
| Restriction                           | ... Use rules to reduce opportunity to engage in target behaviours, or reduce opportunity to engage in competing behaviours |
| Coercion                              | ... Create an expectation of punishment or cost   |

## Topic 3 - Green Procurement

This meeting was a panel discussion involving Pat Wheaton, the Managing Director and Specialist Advisor Healthcare, Core Connect Group; Associate Professor Kerstin Wysusek from the University of Queensland and Department of Anaesthesia and Perioperative Medicine, Queensland Health; and Kellie Williams, the Environmental Sustainability and Climate Change Manager, at Metro North Health, bringing procurement, clinical and sustainability perspectives together.

Speakers described ways they are changing tender documents, adding environmental criteria to contracts and redesigning processes so sustainability is considered from the very beginning. They discussed the importance of starting conversations early with key stakeholders and using cross-functional forums to balance safety, cost, supply and environmental impact. Panellists also highlighted the value of working with suppliers as partners, setting clear and ambitious expectations while maintaining quality and safety. Robust governance, including trials, evaluation and risk management, was identified as essential for introducing “greener” products.

## Topic 4 - Circular Economy

This meeting covered the principles of a circular economy and the need for the healthcare sector to change from a linear economy to a circular economy, and to keep the resources and materials we have in circulation for as long as possible. Two case studies were presented:

- Klara Demaere from Western NSW LHD presented her project The Clothing Connection. A uniform fair/pop up shop where staff could bring in uniforms no longer needed for redistribution or recycling. More than 450 items were taken saving \$12,500 in staff uniforms.
- Anna Brady from Austin Health presented her Marketplace trial for unwanted goods and furniture through a redistribution platform available to staff using Microsoft Lists.

# Food Community of Practice

The Food Community of Practice continued into its second year, consisting of 70 members from 43 organisations.

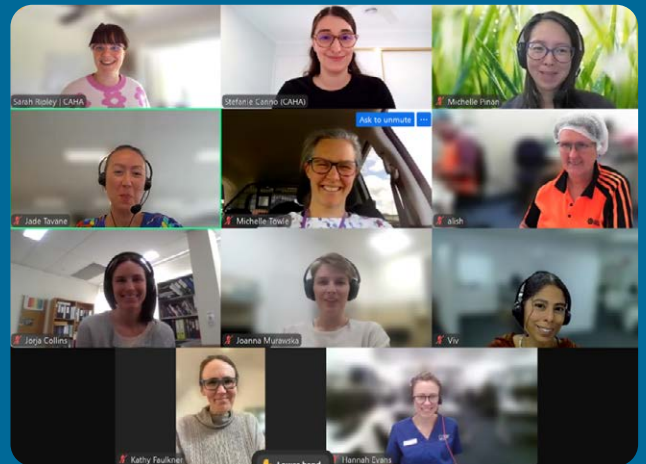
## Topic 3 - Sustainable food procurement (December 2024)

This meeting featured two guest speakers. Leah Galvin presented on the Sustainable Institutional Food Procurement Tasmania project and findings from her Churchill fellowship. Kathy Faulkner presented her research on a food origin audit conducted at a Victorian hospital and literature review describing the extent, range and nature of local food procurement models in healthcare foodservices.

In late 2025, we contributed an overview of sustainable food procurement in the Australian healthcare sector, featuring case studies of success from GGHH members, as part of the [Australian Institutional Food Procurement Project](#). The report is due for release in early 2026.

## Food waste in hospitals and aged care

In collaboration with researchers from The University of Adelaide, for a project funded by End Food Waste Australia, we hosted a workshop for Food CoP members to contribute their insights for the development of a sector action plan to reduce food waste in hospitals and aged care. In this co-design workshop, members shared their experiences of the root causes of food waste, and potential solutions to prevent, reduce and manage food waste. The [Hospital and Aged Care Sector Action Plan](#) was released in 2025.



## Member experience of the CoP

After 12 months of the Food CoP, members shared their experiences of participating in the group. Within the 12 months, ~70% of members had shared new learnings and information from the CoP with colleagues, worked with others in their health service to implement a new initiative, and made a new connection with other health services.

Some positive experiences shared by members:

“ So many benefits to this group. The information sharing is incredibly helpful, especially in not ‘reinventing the wheel’. It is great for networking and becoming a collective to hopefully push forward easier with the changes everyone hopes to see. The range of topics have been great as well. From more grass roots achievements/ideas to much larger scale issues, gaining an appreciation for different state policies and barriers.

“ I enjoy this group pooling their ideas as most people are at different stages of projects on various topics. It makes it a lot easier to find benchmarking information and resources.

“ I’ve appreciated the opportunity for connection with folks in different yet relevant positions such as climate, sustainability, foodservice, procurement, dietetics.

## Reusing unopened packaged food items in hospitals

A key initiative that generated significant interest was the re-use of packaged food items. These items return on patient trays to the kitchen completely unopened and are destined for landfill - the food and its packaging. A workshop was held where members shared their successes, common challenges, and practical strategies for implementing food re-use within their hospitals. These collective insights informed the development of a guidance document designed to support health services to adopt this initiative and reduce food and plastic packaging waste sent to landfill. [Read it here.](#)

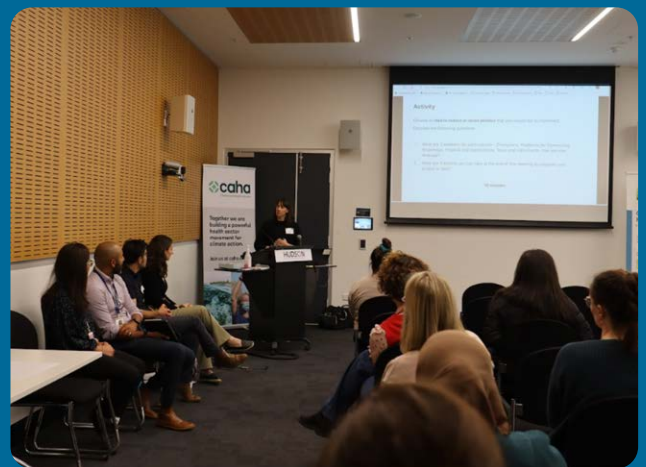
## New publication

In collaboration with researchers from the George Institute, a commentary piece was published in Public Health Nutrition about the role of hospitals in providing nutritious and sustainable foods for human and planetary health. [Read more.](#)

# Tackling Plastics in Healthcare - World Environment Day at Monash Health

CAHA facilitated an event at Monash Health on World Environment Day focusing on plastics in healthcare. Approximately 30 staff members from both clinical and non clinical backgrounds attended the session. The first part of the session covered global and local contexts of plastics in healthcare, explored relevant case studies and demonstrated frameworks for change.

The participants then split into groups to identify opportunities in plastics in their departments and apply the framework to create change. The session was interactive and engaging, whilst acting as a springboard for staff at all levels to address plastics at Monash Health.



# CARE (Community of Action for Reduction of Emissions) Program



A total of

# 82

individual participants across the CARE program in 2025, representing



# 34

organisations.

In March 2025, the team was thrilled to launch the new CARE Program for GGHH members, following several months of planning, research and member engagement. CARE is a multi-year program which aims to build an international community focused on learning, innovation and collaboration for climate action and decarbonisation of healthcare. The CARE Program is also being rolled out in Europe and Latin America by our global partners, tailored to local context.

The CARE Program aims to provide:

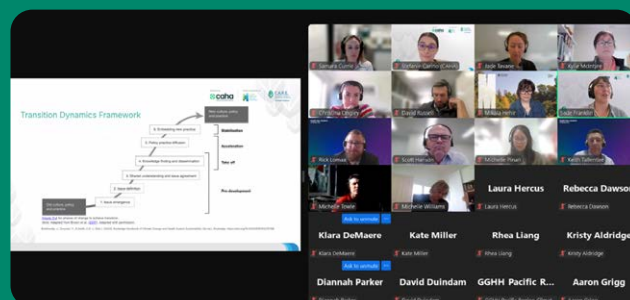
- Learning opportunities to build a transformative approach to sustainable and climate resilient healthcare
- An engaged community of learning amongst healthcare institutions in the GGHH network
- An opportunity for peer-to-peer learning between members, and with topic experts.

The program for Year One was developed in consultation with members, considering current challenges and areas for deeper learning required in the network. The following sessions were run:

## Topic 1 - Integrating Sustainability into Governance

This topic explored governance as a practical lever for system-wide, sustainable transformation. Across both sessions, the emphasis was on culture, relationships, and shared accountability as much as on structures and frameworks.

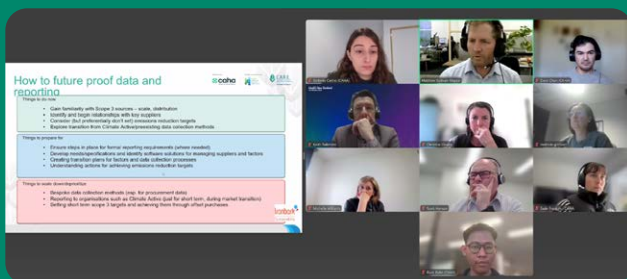
- In **Session One**, Mikala Hehir framed “good” governance as finding the balance of “doing well and doing good,” illustrated through member case studies from Dave Russell and Rick Lomax on embedding sustainability into boards, executive decision-making, and advisory structures.
- **Session Two** then shifted into practice, with an interactive workshop led by GGHH member Renae McBrien, and guests Darlene Cox and Fiona Sherwin on working with consumers, staff, and leaders to drive change, anchored in Darlene’s reminder that “it’s all about change. It’s going to be messy.” Together, the sessions showed that integrating sustainability into governance is not a technical exercise alone, but an ongoing, relational process of engaging people, sharing responsibility, and aligning organisational purpose with action.



## Topic 2 - Healthcare Greenhouse Gas Measurement

This topic provided guidance on measuring emissions across Scopes 1, 2, 3 and waste using the Climate Impact Check Up (CIC) tool.

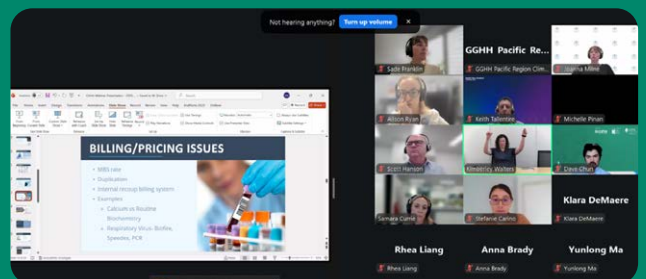
- In **Workshop 1**, Rizal Bahri introduced the CIC tool and the complementary “top-down” and “bottom-up” approaches to greenhouse gas accounting. Mara Manalang-Medrano unpacked Scopes 1 and 2 and waste emissions, reminding participants that these “often fly under the radar when it comes to healthcare operations.” GGHH members Greg Nelson and Lateisha Stam then grounded the concepts in practice, walking through data collection from internal and external stakeholders, metric standardisation, and how to communicate results in ways that are meaningful for decision-makers.
- **Workshop 2** extended this foundation with Sanskrithi Thakur clarifying Scope 3 categories and examples within healthcare. While Bridget Egan shared practical lessons on measuring transport-related emissions, reflecting that “it was very much a learning curve, and one that was valuable.”
- The **final session**, led by guest expert Matthew Sullivan-Kilgour from Ironbark Sustainability, took participants on a deeper dive into Scope 3 reporting, compliance and governance. Together, the sessions moved from seeing emissions as abstract numbers to understanding measurement as a strategic, collaborative process that underpins credible climate action and governance.



## Topic 3 - Value-based Care in Practice

This topic explored value as a guiding way of thinking, rather than a new metric. Across three sessions, the focus was on how value emerges from the relationship between patients, clinicians, and systems.

- In **Session One**, Joachim Sturmberg grounded the topic in a demanding but straightforward question: “Do I contribute to meeting this patient’s need? and if so, how, and by how much?” Simon Radmore showed how these are being translated into strategy and decision-making within the Northern Sydney Local Health District.
- **Session Two** focused on implementation, with Sadé Franklin outlining key strategies and frameworks and noting that most care sits in a “grey zone” where what’s appropriate depends on timing, context, and what matters to the person receiving care. Kimberley Walters then grounded these ideas in practice through the Think Before You Test initiative, showing how value-based care can safely reduce unnecessary pathology while protecting clinical judgement. Her case study highlighted the tensions between over- and under-testing, and underscored that, “to achieve that, we want care that’s evidence-based, without duplication, and free from harm.”
- **Session Three** provided an informal space for GGHH members to network and share examples from their own services. Together, the sessions presented value-based care as a practical, nuanced approach to decision-making that aligns clinical practice, resource use, and sustainability with the core purpose of healthcare: meeting patients’ needs well and wisely.



## CARE Gathering at The Climate + Health Summit

The CARE program wrapped up the 2025 year with a CARE gathering and celebrations at the Climate and Health Summit on the Gold Coast. We recapped the years' learnings and workshopped what CARE 2026 would look like. The highlight of the CARE gathering was having the chance to come together and meet in person and connect with our peers from all around the Pacific region. We were extremely grateful to have our Health Care Without Harm partners from the USA attend in person, Nick Thorpe and Diana Picon Manyari.



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# Health Care Climate Challenge & Climate Champion Awards

The Health Care Climate Challenge is a Health Care Without Harm initiative that mobilises healthcare institutions around the world to play a leadership role in addressing climate change.

The Challenge is based on three pillars:



## Mitigation

---

Reducing health care's own carbon footprint and/or fostering low carbon health care

1



## Resilience

---

Preparing for the impacts of extreme weather and the shifting burden of disease

2



## Leadership

---

Educating staff and the public while promoting policies to protect public health from climate change

3

To take part in the Challenge, health institutions first [sign the Climate Challenge Pledge](#), then report their mitigation, resilience and leadership actions annually (as available and appropriate).

Health institutions taking part in the Challenge are contributing to a global collaborative effort to address climate change within the health sector, and have the opportunity to be internationally recognised for their efforts through the annual **Health Care Climate Champions Awards**.

# Health Care Climate Champions

In 2024, 4 GGHH Pacific members received awards for the Healthcare Climate Challenge.



Health Care Climate Challenge

2024 HEALTH CARE  
**CLIMATE ACTION  
AWARDS**

## Health Care Climate Action Awards 2024

### **UnitingCare (Australia)**

Silver - Climate Mitigation

### **Hunter New England Local Health District (Australia)**

Gold - Climate Leadership

### **Your Community Health (Australia)**

Silver - Climate Leadership

### **The Eye Surgery Hastings (New Zealand)**

Gold - Climate Mitigation

Gold - Climate Resilience

Gold - Climate Leadership

Read more [here](#).



**The 2024 Pacific winner of the Health Care Climate Champions Award is Hunter New England Local Health District (Australia), congratulations!**

# Health Care Climate Champions

In 2025, 5 GGHH Pacific members received awards for the Healthcare Climate Challenge.



## Health Care Climate Action Awards 2025

### Northern Sydney Local Health District

- Silver - Climate Mitigation
- Gold - Climate Leadership

### Te Whatu Ora

- Gold - Climate Mitigation
- Silver - Climate Leadership

### The Eye Surgery Hastings (New Zealand)

- Gold - Climate Mitigation
- Gold - Climate Resilience
- Gold - Climate Leadership

### Your Community Health

- Gold - Climate Mitigation
- Silver - Climate Leadership

### UnitingCare

- Commitment Recognition



The 2025 Pacific winner of the Health Care Climate Champions Award is Northern Sydney Local Health District (NSLHD), congratulations!

Read more [here](#).

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# Race to Zero (RtZ)

Race to Zero (RtZ) is a global campaign initiated by the United Nations Framework Convention on Climate Change (UNFCCC) to rally leadership and support from non-state actors for a healthy, resilient, zero-carbon recovery that prevents future threats, creates decent jobs, and unlocks inclusive, sustainable growth. All members are committed to the same overarching goal: reducing emissions across all scopes swiftly and fairly in line with the Paris Agreement, with transparent action plans to achieve 50% greenhouse gas emissions reduction by 2030 and net zero emissions by 2050 at the latest.

**We are proud to have a growing cohort of Race to Zero members including:**

- **Ambulance Victoria**
- **Echuca Regional Health**
- **Hunter New England Local Health District**
- **Metro South Hospital & Health Service**
- **Northern Sydney Local Health District**
- **Sunshine Coast Hospital and Health Service (SCHHS)**
- **The Eye Surgery Hastings**
- **Your Community Health**

# Member Decarbonisation Commitments

Up to 31 December 2025, a growing number of members had shared their own public carbon emissions reduction targets including:

Ambulance Victoria

Net zero by

**2045**

60% reduction by 2030

Hunter New England  
Local Health District (NSW)

Carbon Neutral by

**2030**

Northern Health (VIC)

Net zero by

**2040**

Australian Nursing and  
Midwifery Federation  
(VIC branch)

Net zero by

**2035**

North Metropolitan  
Health Service (WA)

Net zero by

**2050**

80% reduction by 2030

Metro North Health (QLD)

Net zero by

**2050**

30% reduction by 2030

Mercy Health (VIC/NSW)

Net zero by

**2030**

Northern Sydney Local  
Health District (NSW)

Net zero by

**2035**

for scope 1 + 2, with a  
70-80% reduction by 2030

Monash Health (VIC)

carbon neutral by

**2030**

Peter MacCallum  
Cancer Centre (VIC)

Net zero by

**2045**

Interim target  
26% from baseline 2030  
70% from baseline 2035

Net zero by

**2050**

for scope 3, with a  
50% reduction by 2035

Austin Health (VIC)

Net zero by

**2040**

Barwon Health (VIC)

Net zero by

**2045**

Peninsula Health (VIC)

Net zero by  
**2050**

Ramsay Health  
Care Australia

Net zero by  
**2040**

Royal Flying Doctor  
Service (Victoria)

Net zero by  
**2040**

The Royal Womens  
Hospital (VIC)

Net zero by  
**2030**

St Vincent's Health  
Australia

50% reduction in Scope 1 + 2  
by 2030

St Vincent's Hospital  
Melbourne (VIC)

Net zero by  
**2045**  
50% reduction in Scope 1 + 2  
by 2030

South Metropolitan  
Health Service (WA)

Net zero by  
**2040**

St John of God  
Health Care

Net zero emissions by  
**2050**

50% reduction by  
**2030**

Sydney Children's  
Hospitals Network (NSW)

Net zero by  
**2035**

Tasmania  
Health Service

Net zero by  
**2030**

Health New Zealand  
Te Whatu Ora  
(Health NZ)

Carbon Neutral by  
**2050**  
24% reduction by 2026/27

Child and Adolescent  
Health Service (WA)

Net zero by  
**2040**

Western NSW LHD (NSW)

Netzero by  
**2050**

50% reduction by 2030

Your Community  
Health (VIC)

Net zero carbon by  
**2040**

60% reduction by 2030

Cairns and Hinterland  
Hospital and Health  
Service (QLD)

Net zero by  
**2050**  
75% reduction by 2035

Southern Cross  
Healthcare (NZ)

Net zero by  
**2040**

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## Nationally



### Australia Federal

The Australian Government has committed to reduce national emissions by 43% below 2005 levels by 2030, and to achieve net zero national emissions by 2050. These targets apply to all parts of the Australian economy, including the health system.



### Aotearoa New Zealand

Health New Zealand | Te Whatu Ora (Health NZ) has made significant progress in 2024 and 2025, key highlights include:

- Health NZ published its third [GHG Emissions Inventory](#), and publicly released its first Emissions Reduction Plan in line with the New Zealand [Carbon Neutral Government Programme](#). The updated inventory illustrated a ~19% emissions reduction from FY22/23 baseline, primarily achieved through the transition away from coal-fired energy.
- Health NZ's [Statement of Intent 2024 – 2028](#) discusses Health NZ becoming a sustainable organisation, and outlines next steps for the work programme, making specific comment on the connection between climate change and human health and wellbeing.
- Health NZ supported the cross-sector development of [climate change scenarios](#), outlining three plausible futures for the health sector in the face of climate change, and is using this information to inform planning. Development of a Climate Adaptation Framework is nearing completion.
- Health NZ also supported the New Zealand Ministry of Health | Manatū Hauora to publish Aotearoa New Zealand's first [Health National Adaptation Plan](#) and preparation of a Vulnerability and Adaptation Assessment is underway.

[More information.](#)

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## By state

### Australian Capital Territory

The ACT is committed to net zero emissions by 2045 and following the ACT Climate Change Strategy. ACT Health (including Canberra Health Services) have a net zero target by 2040. To help meet these targets, ACT:

- Opened in August 2024, the Canberra Hospital’s new Critical Services Building - Australia’s first all-electric major hospital building.
- Continues to plan and design a new northside hospital in Bruce, which will be all-electric.
- Continues to implement the Canberra Hospital masterplan, which establishes a pathway for the Canberra Hospital campus to transition to net zero emissions.

Emission mitigation opportunities will be addressed in all health infrastructure projects, including ensuring all new builds are all-electric. ACT Health Directorate is committed to the ACT Government’s targets for net zero, this will include an assessment of existing infrastructure and plans.

### Northern Territory

NT Health maintains its goal to net zero emissions by 2050. Strategic commitment is under the NT Health Sustainability and Climate Adaptation Strategy 2024-2030. Decarbonisation deliverables are set across 14 focus areas under the NT Health Sustainability Road Map 2025-2027, with emission reduction targets to be set 2025-2026 financial year.

### Western Australia

WA Health has committed to a reduction of scope 1 and 2 emissions by 80% by 2030 from the 2020 levels (based on the WA government target) and achieve net zero emissions by no later than 2040, in recognition of the overwhelming scientific consensus for urgent climate action to safeguard human health. (Strategy for an environmentally sustainable, low carbon and climate-resilient healthcare system 2024 – 2030)

The WA Climate Policy articulates the state government’s commitment to net zero by 2050 for WA public sector agencies.

### South Australia

The South Australian Government’s emissions reduction targets are to reduce GHG emissions by at least than 60% by 2030 (from 2005 levels) and achieve net zero emissions by 2050. In 2025, SA Health has moved from planning to delivery, with the release of the SA Health Climate Change Framework 2025–2030 which guides mitigation and adaptation across the system. The Premier and Cabinet Circular 007 was also released, mandating adaptation and mitigation across all government agencies, including SA Health. This has assisted with the acceleration of carbon emissions reduction across the system, supported by strengthened governance through the Climate Change Executive Governance Group and dedicated workstreams for emissions reduction, climate risk, and clinical impacts. Early implementation has already commenced, including the rollout of Carbon Management Plans across all areas of SA Health.

### Victoria

Victoria has a legislated a target to achieve net zero emissions by 2045. To contribute to this target, from 1 July 2025, Victorian Government operations—including eligible public Victorian Health Services— transitioned to 100% renewable electricity supplied through the State Electricity Commission of Victoria (SEC).

The department continues to deliver upon its 2022-26 Health and Human Services Climate Change Adaptation Action Plan.

### Tasmania

State-wide target of net zero emission by 2030.

The Department of Health is currently in the process of developing and implementing an environmental sustainability strategy that prioritises the four of GGHH top sustainability goals: Leadership, Waste, Transportation and Buildings

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## By state

### Queensland

The QLD Government targets, which apply to the whole of QLD Health, are

- Generate 50% of electricity from renewable energy by 2030
- Reduce emissions by at least 30% below 2005 levels by 2030; and
- Achieve zero net emissions by 2050.

Queensland Health has a new interim emission target of 75% below 2005 levels by 2035, and is working towards net zero emissions by 2050. Queensland Health has a [Climate Risk Strategy 2021-26](#).

### New South Wales

Change to NSW Health commits to a high-quality, low-carbon and climate resilient health system, and to halving healthcare emissions by 2030, and achieving net zero emissions by 2050. (In line with the state-wide target of net zero by 2050, halving scopes 1 and 2 emissions by 2030 and reducing emissions by 70% by 2035 [compared to 2005 levels]). NSW Health has published their [Net Zero Roadmap 2025-2030](#).

# Member Spotlights

## North Metropolitan Health Service

### The Green Ward Initiative – Redefining Sustainable Maternity Care

North Metropolitan Health Service (NMHS) launched the Green Ward Initiative at King Edward Memorial Hospital in early 2025 to address the environmental impact of maternity care. Maternity wards are resource-intensive environments, with high volumes of single-use consumables, plastics, and chemical-based products. The goal was to create a model ward that demonstrates practical, scalable solutions for high-quality healthcare that is greener and provides the best start to life for babies and their families.

With a focus on reducing single-use consumables, problematic plastics, harmful chemicals and waste. Staff engagement is central, and multidisciplinary teams are collaborating to audit current practices, introduce reusable products where clinically appropriate, source sustainable alternatives, and educate staff on sustainability principles. Early actions include replacing plastic discharge bags with paper, introducing reusable linen and cups, installing water fountains and waste management improvements. Initial feedback is positive, with strong staff involvement and rapid adoption of successful changes by other wards. The Green Ward is more than a pilot—it's a blueprint for future healthcare. NMHS plans to expand these strategies across other wards and hospitals, positioning the Green Ward as a blueprint for sustainable healthcare.

## Monash Sustainable Development Institute

### Accelerating towards net zero guide

Australia's health system is a significant contributor to the country's total carbon emissions, but there are big opportunities in the net-zero transition that will lead to lower health costs and better patient care.

[Accelerating towards net zero: A guide for the Australian health system](#) has been prepared with participation from health practitioners and policy makers from across Australia, led by the members of the [Transitions to Sustainable Health Systems consortium](#), convened by Monash Sustainable Development Institute (MSDI).

The guide brings together research and practice wisdom from Australia's health system across a broad range of health settings to lay out:

- what we need to do to decarbonise the Australian health system
- how we can build the enabling environment to do this effectively and efficiently, while contributing to other health system priorities
- leading real-world examples of action, case studies and useful resources, and
- nine priorities for collaborative action to unlock emissions reduction in the health system.
- It draws heavily on insights generated from a series of participatory workshops with 135 healthcare professionals from 54 healthcare organisations from across Australia, informed by a rapid review of the effectiveness of sustainable healthcare interventions.

Designed to be used by healthcare organisations across Australia, the guide can be used to support organisational strategy development and review, staff and stakeholder engagement and to support a compelling case for change.

## Western NSW Local Health District

### Greenify Medical Imaging

Western NSW Local Health District was a finalist in the NSW Health Environmental Sustainability Awards for their project *Greenify Medical Imaging*.

Contrast-enhanced CT scans use a special dye to improve visibility of blood vessels and soft tissues. Single-use contrast injector systems have led to high plastic waste, emissions, and costs. While dedicated multi-use injector systems exist, the cost can be prohibitive for smaller facilities.

Medical Imaging Services identified an opportunity to reduce environmental impact and improve efficiency by trialing two approaches: a dedicated multi-use injector system at Dubbo Hospital and a simple, low-cost retrofit for existing equipment at Bathurst Hospital.

Pilots were run over three months, replacing single-use injectors with multi-use systems. Baseline data on waste, clinician set-up time, and consumable costs was compared to post-pilot data. Both approaches delivered comparable results, including:

- 78% reduction in plastic waste and carbon emissions, over 2.35 tonnes annually
- 69% reduction in equipment set-up time, more than 500hrs of clinical times saved each year
- 40% reduction in consumable costs, with further savings from reduced waste



Radiographers reported increased efficiency, completing 1-2 additional scans per day and reducing patient wait times. Together, the pilots offer practical, scalable solutions for regional and smaller imaging sites, delivering environmental, financial, and patient benefits. Across the pilot sites, annual savings now exceed \$70,000.

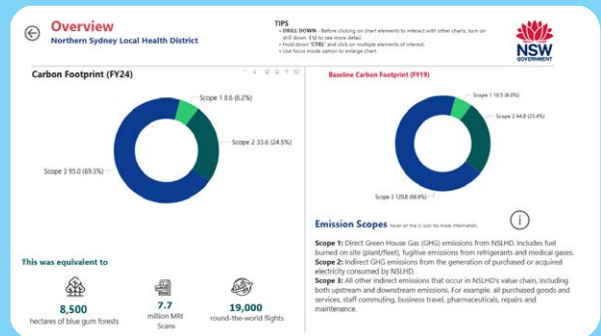
# Northern Sydney Local Health District (NSLHD)

## Estimating a carbon footprint

Northern Sydney Local Health District (NSLHD) is advancing its goal of achieving net zero emissions—by 2035 for those it controls (Scopes 1 and 2) and by 2050 for those it can influence (Scope 3). Working with Arup and the NSW Department of Climate Change, Energy, Environment and Water, NSLHD calculated its baseline carbon footprint for FY19 and recently completed its FY24 footprint using the Greenhouse Gas Protocol. This internationally recognised method combines consumption and financial data to provide a full picture of emissions across all scopes.

To monitor progress, NSLHD has launched an interactive carbon dashboard for staff via the NSLHD intranet. The dashboard breaks down emissions by hospital, scope, consumption, and spend, comparing FY19 and FY24 data. Results show a strong downward trend in emissions over the five-year period, indicating significant progress and a positive outlook toward achieving planned targets.

A public version of the dashboard will be released shortly, and work is underway to calculate the FY26 footprint.



Carbon Dashboard for FY24 - Northern Sydney Local Health District

Looking ahead, NSLHD will assist other Local Health Districts and the NSW Ministry of Health in developing similar dashboards and improving Scope 3 data. By leveraging tools like [MedZero](#) and automating data feeds, NSLHD aims to enhance data quality and timeliness, enabling faster, more effective action to reduce emissions.

[Read more.](#)

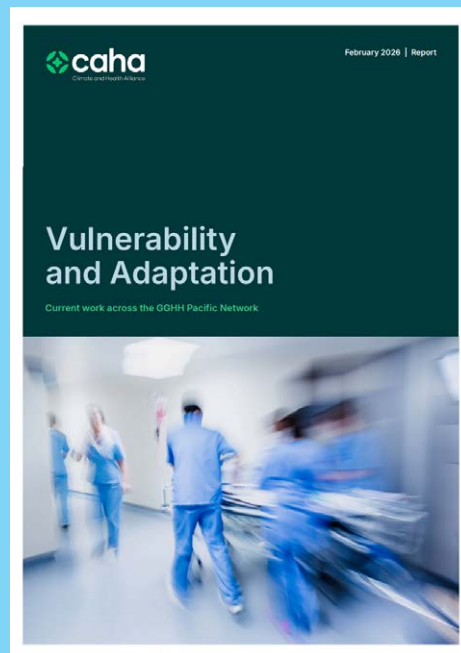
# New reports

## Vulnerability and Adaptation

This report establishes a shared baseline of climate vulnerability and adaptation practice across the GGHH Pacific network. A mixed-methods approach was used, combining a member survey, a desktop review of relevant policy and planning documents, and semi-structured interviews to consolidate current knowledge, map adaptation activity, and identify priority gaps. The aim is to support more coherent, coordinated adaptation efforts.

Findings suggest that practices across the GGHH Pacific network are emerging, but remain variable in scale, maturity and focus. Planning for health and climate is progressing in many jurisdictions, yet coverage and depth differ across settings and levels of governance, reflecting diverse risk profiles, mandates and capacities. Documented actions include awareness-raising, knowledge-building, service redesign and behavioural or cultural initiatives, with growing examples of more systemic approaches. However, investment in structural resilience for WASH, energy and critical infrastructure, and in addressing cascading and cross-sector risks, is still developing. Governance capacity, role clarity, monitoring and evaluation, and stable resourcing continue to shape what is feasible and at what pace. At the same time,

financing often prioritises disaster response over prevention and risk reduction. Overall, the region recognises climate risk and is actively experimenting with ways to respond, but climate resilience is not yet consistently integrated into core health system planning, governance and investment. Read the [full report](#).



## How our health systems are reporting on their greenhouse gases

A greenhouse gas (GHG) measurement of health systems is essential to establish a baseline, identify major contributors, and track progress over time. However, policies on measuring and reporting GHG emissions within health systems in Australia and New Zealand are not well-documented. Although there has been progress in reporting GHG emissions within health systems in both countries, the criteria and methods used for these reporting schemes differ. This variation exists even among states and territories in Australia, leading to challenges in establishing benchmarks and comparing the GHG emissions of different health systems.

This report aims to map policies related to the reporting of GHG emissions from health systems in Australia at national and state and territory levels, and in New Zealand at the national level. The policy mapping in this report helps identify opportunities for unifying and standardising GHG emissions reporting in Australian health systems. The first stage of the study involved a desktop review of existing climate change mitigation policies, with a focus on GHG reporting in Australia and New Zealand. The second stage involved online discussions with health departments at both state/territory and national levels.

The report highlights the strengths and weaknesses of standardising existing emissions reporting policies in both the Australian public and private health systems, including mandatory reporting requirements, scope of reporting, reporting timeframes, and measurement methods or emission factors. The New Zealand experience, where GHG emissions reporting policies are

standardised for public health systems and with many private health organisations adopting similar policies, offers a way forward for Australia to standardise the health systems' GHG emissions reporting across states and territories. It is recommended that health governing bodies in Australia integrate the reporting requirements for public and private health systems and standardise these requirements to facilitate benchmarking. Read the [full report](#).

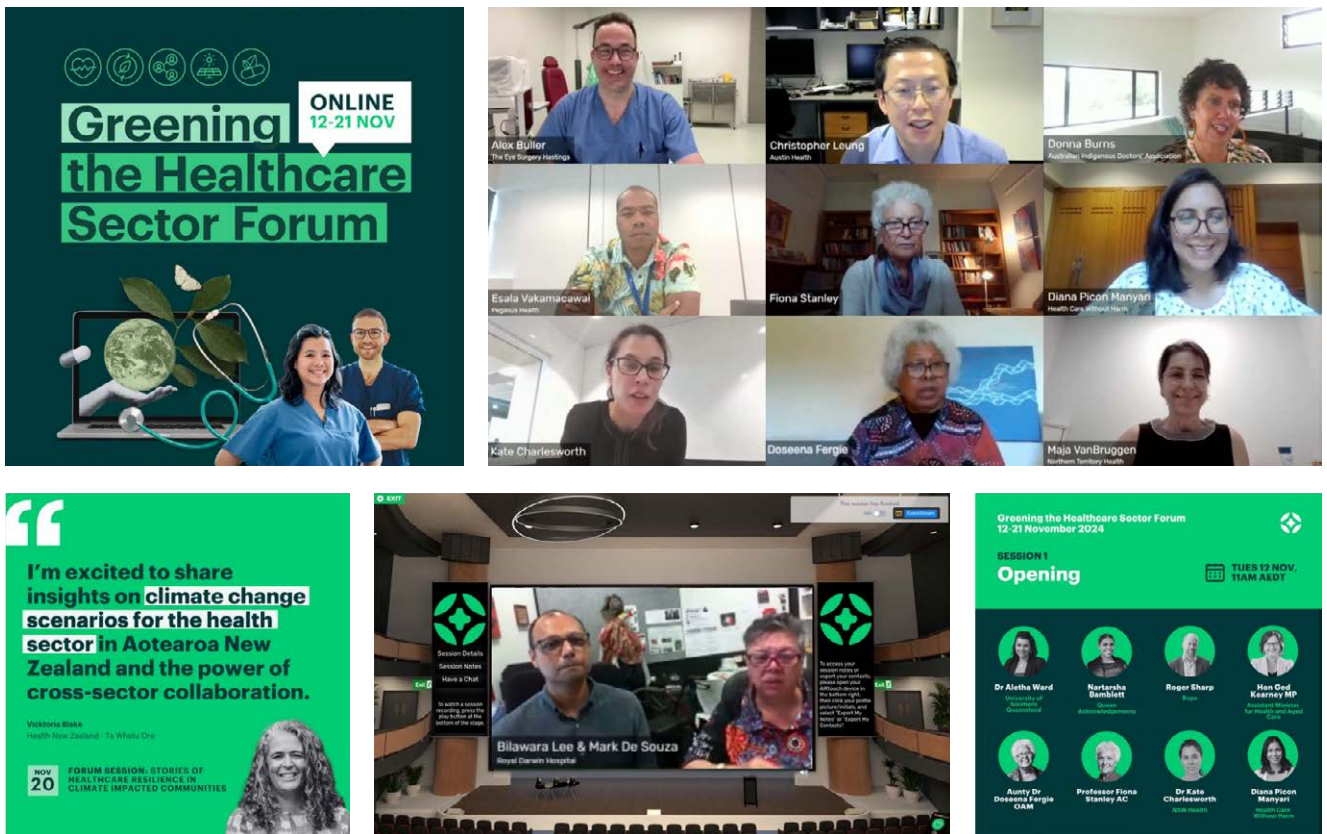


# Greening the Healthcare Sector Forum 2024

In 2024, the Forum took a fresh and climate conscious approach, with CAHA hosting a series of dynamic events entirely online from 12-21 November.

The theme “Accelerating collective action for sustainable and climate-resilient healthcare” emphasised the need to reshape the future of healthcare and climate action through collective efforts, resilience and innovation. The Forum inspired thoughtful questioning of existing practices, including low value care, with a climate-conscious lens. Diverse content was delivered across six sessions and three workshops. [Read more.](#)

A special thank you to Platinum sponsor Bupa for supporting the event.



More information about the forum is available in the report [here](#) and the recordings are available [here](#).

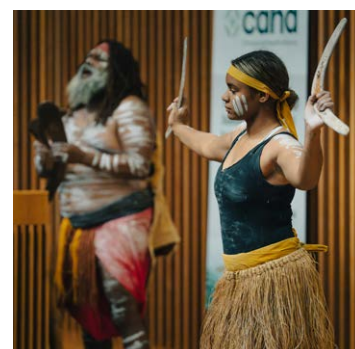
# The Climate + Health Summit 2025

The Climate + Health Summit was hosted on the Yugambeh/Kombumerri Country (Gold Coast), a region on the frontline of the climate crisis, on 26-28 October 2025. The Summit focused on the theme of building sustainable and resilient communities and facilitated learning to:

- Accelerate knowledge transfer from evidence to policy and action
- Actively involve and meaningfully connect every participant
- Learn from Queensland health organisations in the wake of recent climate impacts
- Showcase practical innovations in public health, health systems and supply chains
- Offer experiences to build personal resilience for health leaders

The Summit showcased health sector leaders across Australia, New Zealand and the Pacific who are improving the environmental footprint in their operations, building the power of the health movement for climate action, community resilience and sustainable healthcare. The Summit provided an opportunity to build connections, share knowledge, learn from others, and build new skills.

A special thank you to our platinum sponsor Bupa, venue partner Griffith University, and our bronze sponsors Novo Nordisk and Natural Capital & Climate for making the Summit possible.



More information about the Summit is available [here](#), including the full [program](#).



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# Join us

GGHH membership is free of charge for hospitals, health services, health and aged care facilities, health systems and health organisations.

Once an organisation becomes a member, nominated employees can access sustainable healthcare resources and connect with sustainable healthcare colleagues.

To become a member, visit the GGHH [Join the Network](#) webpage.

For questions related to GGHH and how to join, please email [gghh@caha.org.au](mailto:gghh@caha.org.au)

GGHH is proudly coordinated in the Pacific region by the Climate and Health Alliance.

The Climate and Health Alliance unites health organisations to create a powerful movement for climate action and sustainable healthcare.

Health professionals and health organisations are welcome to boost their support by [joining CAHA as a member](#).



Coordinated in the Pacific region by

