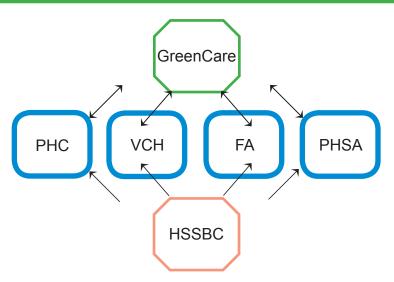
## **HSSBC/ GreenCare/ Lower Mainland Health Authorities**

The lower mainland health authorities consists of Fraser Health (FA), Provincial Health Services Authority (PHSA), Providence Health Care (PHC), and Vancouver Coastal Health (VCH). Each health authority has its own working systems, however they all share the same supply chain network. Health Shared Services BC (HSSBC) works with the health authorities to analyse/decide/manage vendor products and contracts for all lower mainland health authorities. With the number of facilities and users (both staff and patient) in all health authorities, the need for sterilized products, and the use of biomedical instruments, it is easy to imagine the amount of waste accumulated. Sustainable practices are necessary to be able to manage waste at such a large scale and it is best implemented at the very beginning of the supply chain process.



The GreenCare community is a separate entity from HSSBC, composed of members from all four health authorities works to instil sustainable practices throughout the lower mainland health authorities.

## **UBC Sustainability**

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As a sustainable scholar, one of my projects involved identifying where opportunities for sustainable practices could be implemented. The product procurement and supply chain processes for the health authorities are complex because of the number of stakeholders

involved. It was necessary for me to first research and understand the process so that i could clearly communicate the processes. I then identified key stakeholders and the amount the authority that they carried. Finally I began identifying where in the existing process the GreenCare community could intervene and what form this intervention would take.

Implementing more sustainable practices within the supply chain is a long process. Because my time with the GreenCare team was temporary, I focused more on creating avenues that can be explored after I leave.

This project has allowed me to get a hands on understanding of the systems within the BC health authorities as well as opportunities to discuss the product procurement processes with stakeholders at various levels. As a third party, I had the opportunity to explore the possibility of creative and alternative solutions

## **Recycling at Medical Facilities**

The second aspect of my internship was to work with the recycling coordinator to help move the lower mainland health authorities towards zero waste. I collaborated on existing initiatives to promote recycling and waste reducing within the health authorities. Many of which were related to the promotion and education around recycling and waste reduction.

Staff education is of vital importance, not only to ensure that recycling is being done but also to eliminate contamination. Medical waste is particularly difficult to recycle because of the possibility of contamination. Many recycling vendors avoid hospitals as a client because of the dangers associated with contamination. At a certain point recycling is hand sorted and if there is contamination from a hospital's recycling (anything that is biohazardous), it becomes a danger for those that sort it. Thus, contamination is a much larger problem for just the bin that it is in, it affects the whole health authority.





