(Music)

Mark Masselli: This is Conversations on Health Care. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Margaret, we tried to take a look at the waterfront of issues that are focused in on improving health and we looked at how communities are managing through this transition as well as states and federal government. Anything that has caught your eye recently?

Margaret Flinter: Well I will tell you on a daily basis I have my Google engine, set to deliver me Innovations in Healthcare. There are things happening everywhere from technology to the service delivery but on a very close to home level, last week some of our community health center staff participated in our very first Run/ Walk at Work. It's a national event. It was created by the Road Runners Club of America to inspire organizations all across the country to promote physical activity among staff and I can't think of a better time than this beautiful early fall season to get out and move or a better way to start wellness with our own staff who preach wellness to our patients everyday.

Mark Masselli: You know it sounds like a bright idea to me, maybe we should make one out of it. And it is great to see how communities are coming together to promote health and wellness, we try to have conversations with people who are leaders in that and remind people that it's not the organization of your municipality or your state or your federal government rather it's your own interest and I know a lot of people out there who listen to us are bright and creative and have their own ideas and we look forward to seeing how well they execute on them. On a different note, the Department of Health is pushing federal-state partnerships for insurance exchanges.

Margaret Flinter: Right. And it's been a while since we talked about the health insurance exchanges on the show though we have been following the development pretty closely. They are required under the Affordable Care Act to be operational in States by 2014. The exchanges are going to be the place to go and shop for affordable insurance options and so far planning efforts have failed in 16 states.

Mark Masselli: Well they have and it's kind of sad that they have. The federal government though is looking at ways that it can come in and manage those states that haven't been successful. Some haven't been successful because of the political makeup, I think it's about the President rather than about the health of their people but we will see how the federal government resolves those problems.

Margaret Flinter: Well, as I recall, most of the states took the million dollars of planning money so there is some at least thinking activity going on. And you know Mark, one of the things that I think we have both been most interested in following is the development of the co-op plans in the States each day where people within states have the opportunity to apply for loans both to start up and then support a cooperative plan which is described in the legislation as a mission-focused health insurance plan which I thought is really a very interesting area that hasn't had a lot of attention and maybe we will get somebody on the show to talk about that.

Mark Masselli: I look forward to it. Health care isn't the only topic where there are considerable political 3:02_____, politicians also argue about the importance of establishing a greener economy and our guest today confronts both of those issues. Dr. Linda McCauley is the Dean of the Nell Hodgson Woodruff School of Nursing at Emory University and a national leader on green initiatives in health care. We are happy she can join us today to talk about how health care is going green.

Margaret Flinter: That's great. And no matter what the story, you can always find all of our shows and hear more about us by Googling www.chcradio.com.

Mark Masselli: And as always, if you have feedback, e-mail us at www.chcradio.com, we would love to hear from you. Before we speak with Dr. Linda McCauley, let's check in with our producer Loren Bonner with Headline News.

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Loren Bonner: I am Loren Bonner with this week's Headline News. President Obama laid out his plan to trim the deficit this week.

Barack Obama: It's a plan that reduces our debt by more than \$4 trillion and achieves these savings in a way that is fair by asking everybody to do their part so that no one has to bear too much of the burden on their own.

Loren Bonner: The proposal calls for health savings in a few different areas first, cutting \$320 billion to Medicare and Medicaid mainly through changing how the federal government pays health providers, also slashing payments to drug companies and dramatically changing the way the federal government splits the cost of Medicaid with states. President Obama vowed to Veto any approach that does not include new levies on the wealthy alongside any benefit cuts in Medicare.

A new study published in pediatrics finds that $1/3^{rd}$ of surveyed parents report well child visits lasting 10 minutes or less and that these shorter visits were associated with less discussions about preventive care. The study was

conducted by researchers from the UCLA center for Healthier Children, Families, and Communities. Survey questions covered the length of time spent with the pediatrician in which age appropriate issues that doctor brought up, quality proponents like the Agency for Healthcare Research and Quality suggest that pediatricians help parents better prepare for visits by sending out information in advance about what the visit will cover and providing pre-visit checklist to help structure the appointment efficiently.

Mark Masselli: Today, Margaret and I are speaking with Dr. Linda McCauley, a national leader in green initiatives in health care. Dr. McCauley, is also Dean of the Nell Hodgson Woodruff School of Nursing at Emory University in Atlanta. Welcome Dr. McCauley.

Dr. Linda McCauley: Thank you.

Mark Masselli: You know, you are at an interesting intersection of two popular industries, health care and green technology, and as we all know, creating safer and healthier environments through green initiatives has become a priority for many sectors of our society in recent years and yet, the public may not be aware that health care sector is an important part of this. Can you start out by telling us how health care is leading some of these green initiatives and what's significant about that?

Dr. Linda McCauley: Well it's very significant because many people in health care believe that profession, groups of profession should set the best model, the best practices which in fact we weren't doing. As people began to look at where our waste and contamination and pollution were occurring, health care was one of the major problems environmentally and so it's just very important I think philosophically to really walk the walk and if you are really talking about helping make populations more healthy then our care environments need to be the healthiest of the healthy. And so when you look at the statistics on the waste production of health care facilities, they were astronomical numbers and our incinerators, what we were burning and the amount of energy that we used to run our physical plant and so it's time that we push health care forward as the best models.

Margaret Flinter: So Dr. McCauley, you are both a renowned environmental health researcher and a distinguished nurse leader of one of the most recognized university schools of nursing in America and I think it's safe to say that professional nursing has actually been quite prominent on environmental issues and particularly as they relate to health care institutions but as they relate to consumers with ANA taking a strong stand on issue like reducing exposure to PVCs and kids' lunchboxes and other places and the emphasis on reducing consumer exposure to environmental toxins. So, we are maybe curious to know a little bit about how these two worlds came together for you personally and

maybe a little bit about what other initiatives are nurses leading in the area of environmental health.

Dr. Linda McCauley: You know that's a good question. I have told you that as a pediatric nurse specialist and was interested in the health of children and particularly I was interested in children who have undergone chemotherapy and effects on their health. And you learn when you are a graduate student that the best way to get out of your program is to do what your professors think you should do instead of always what you want to do. And I remember one of my professors telling me that she wasn't particularly interested in doing cancer research around children but had I ever thought about nurses that handled Antineoplastic drugs in their work practices and are they exposed to these chemicals in their work and do they have health effects. And it was just a different, a light just came on to me that of course that's important also, you should get sick from the environment in which you work in. And then if you study nursing and you look at Florence Nightingale from the deepest in our roots, she really was an environmentalist and during the Crimean War she pointed out that most of the soldiers in the hospitals were not dying from the casualties, the wounds, or the trauma that they received on the battlefield, but from infections that they caught in the hospital environment.

Mark Masselli: Speaking about the environment I want to sort of pull together a couple of threads here. You are both a professor and you are the Dean at the Emory University now Hodgson Woodruff School of Nursing. There is a group called Health Care Without Harm and I think it draws its roots from the Hippocratic Oath of first do no harm and that's focused in on promoting the health of people in the environment. And I was wondering if you thought about this, not particularly this group but that philosophy, tell us how you are trying to integrate this philosophy into the next generation of health care providers and what are you doing around curriculum development and the like.

Dr. Linda McCauley: I have been in nursing education for more than 30 years now and it's never been easier to do this integration. It was very difficult in the 1980s, became easier in the 1990s and now it's very, very easy because young people I think in their elementary and high school education are really introduced to concepts of environmental sustainability.

Margaret Flinter: So Dr. McCauley, I kind of want to pull that thread a little bit and go back to sort of the focus of our show is innovation and health reform and health policy and of course we can't help but talk a lot about controlling costs, eliminating waste, protecting patient safety and quality and sort of in that vein Dr. Peter Pronovost at Johns Hopkins who we have had on the show I noted was referenced in a release from Johns Hopkins in which the authors talked about the tremendous contribution to waste and thus to pollution that hospitals create. And he noted that we have gone so much to a culture of disposables, of throwing everything away including tools and instruments rather than re-sterilizing and

reusing and that in fact the evidence which he obviously is a expert in around infection control based on his work in savings lives from acquired infections, shares that you can safely do this. But we have a huge public relations and marketing problem on hands because we have made people so frightened about contracting infections in the hospital that the standard of care has become throw everything away. What's your thoughts on this and how does this factor into the equations around cost, waste, quality and evidence-based practice when it comes to decision making that affects the environment?

Dr. Linda McCauley: So it's a very careful balance that you need to make. When you reuse something, yes, you certainly have to be absolutely 100% sure that you are able to clean that effectively. And you do use power and energy to resterilize things and there are some things that actually probably should be disposable but there are other things that are just as energy efficient to sterilize those products. And so it's really what I have been working on is trying to bring the health care provider closer to the supply chain. For instance, they can get a disposable package, a kit for some type of procedure that's being done and you open that blue plastic wrapping and there may be 10 different instruments in that package and the health provider will use two of those instruments and throw the other 8 away. That's a basic problem, why is it only being produced, why is the packaging in such a way that you can't just use the disposable items that you really need. And I don't think most consumers know that you can open a package and only use a guarter of what's in that package and the rest you toss away. And so nurses and physicians don't think about well who orders this type of package, and many times it's not a health provider that orders the package. One of the things that has received a lot of attention are plastics, phthalates that are in IV tubing and so plastic tubing is a concern in terms of disposal and incineration but there is no one arguing that there is any better way to deliver a fluid to a baby or an adult with an IV or blood transfusion. But what we realized is that there are some plastics that leach out into the fluid that you are running through the tubing and there are other plastics that don't have phthalate in on that don't leach out. There is absolutely no cost difference, you can buy the phthalate-free product or the product with phthalate.

Mark Masselli: This is Conversations on Health Care. Today, we are speaking with Dr. Linda Mccauley, a national leader on green initiatives in health care. When you are designing and creating a green healthcare facility, I think there is probably an initial sticker shock when you look at the cost of it and yet you have to balance off the long term savings and benefits to the society. Now Emory University has adopted the United States' Green Building Council's LEED in energy and environmental design and I think most of the public hears this as LEED Standards which is its acronym. And it's really a guiding light for lots of progressive folks who are building buildings in health care and education and across the country. What lessons can you share with us about the cost and savings of green health care facility construction?

Dr. Linda Mccauley: I think there is the public value of saying that you have a sustainability philosophy is what people are balancing and they really do see it as worthwhile. So also it's not just the cost, and this is where it gets very complex, it's not just the cost of building the building, you have to think ahead say like in hospital complexes how many years later will that building be replaced. There is a huge cost associated with demolition and removal of buildings that you are tearing down. And what's really nice about the LEED buildings is when you have to tear that building down, you are going to save cost at that point. So if you look at the whole lifecycle of the building, it may be somewhat more at the front end but you will have savings throughout and then the day that you have to tear that building down.

Margaret Flinter: Dr. Mccauley, as I am remembering from my brief stint in Atlanta, Georgia of several months, you are right down the road from the Centers for Disease Control, is that right?

Dr. Linda Mccauley: Yes I am looking out at the CDC right now.

Margaret Flinter: Perfect. So that's a great image to think of relative to your work as the dean and nurse leader and environmental leader about cross disciplinary interventions and study to understand the impact of environmental issues on the community. So maybe thinking less about health care and a little more just about the community, can you share with us some of the projects that your students or faculty or your cross-disciplinary teams are involved in your area relative to improving the environment or promoting environmental health or consumer awareness of environmental issues?

Dr. Linda Mccauley: Well there are many different levels in which one can do work. In Atlanta, right now many of my colleagues are focused on air pollution and the link with asthma and cardiovascular disease because like so many urban cities we have to deal with huge amounts of pollution from coal burning plants and also from transportation. And so as Atlanta is planning whether to invest in mass transit or whether you want to rebuild the roads and put more cars on them, environmentalists have to step up to the plate and really explain why given this choice where you would make the wiser investment. My own work, what I am passionate about is the fact that so much about environmental health is not under the control of the individual. There are many things we can do in terms of the diets that we choose to eat and the cars that we drive and how far we want to commute but there are many people who have no control over where they live and many times what food's available to eat, climate change that may be occurring is many times outside of the control of the individual. And so what I love about Emory and being close to CDC is that we do stress vulnerable populations and people who have to depend on public policy to protect them to whatever extent is possible whether that is through the use of pesticides and where they live or traffic patterns around their homes or the scarcity of grocery stores, any healthy grocery store much less accessibility to organic foods which are more healthy choice. So, Emory University has been a wonderful environment with our proximity to CDC to really be able to focus on some of these larger issues.

Mark Masselli: Sure. And one of the things that Emory does very well is its sustainability program which has a strong focus on sustainable foods. At our health center, we are building a new building hopefully LEED Gold we are hoping and we have a rooftop garden and so we are engaged in trying to have young children plant food and sell it in our farmer's markets. But Emory University is a big champion of educational food gardens and in addition, Emory focuses on the importance of farmer's markets. How does food offer additional opportunities for green whether through community gardens supporting farmer's markets or having hospitals serve healthier foods? Are there any special success stories you would like to share with us?

Dr. Linda Mccauley: One of the things, well we do have wonderful gardens throughout Emory. In fact, we have a garden coming into my backdoor here but to give you an example of something that's in action, each of the schools at Emory with the economic recession were kind of charged with ways to look at our budgets and economic picture and way to generate new income. component of the Emory which is the Oxford College which is actually a section of Emory that's 30 miles outside of the city had been given a gift by a generous donor of some acreage and they have decided to make \$250,000 investment into sustainable gardens. So students on campus will be fed from those gardens but what they are also doing is they are developing educational programs so that people can come to that campus and learn about sustainable gardening. And I thought what a wonderful opportunity that you 23:02 a wonderful gift from a donor, you bring healthy food to the students on campus and you blend that with the educational mission of the university by teaching students and people in the community how to do this work in their own neighborhoods. That's what a university environment can do and so that's when you really see that it's real, when it's more than just a building, when it's integrated into the campus life of the students and the educational mission of the university.

Mark Masselli: Today, we have been speaking with Dr. Linda Mccauley, a national leader on green initiatives in health care. Thank you so much for joining us today.

Dr. Linda Mccauley: You are welcome, thank you.

Mark Masselli: Each week, Conversations highlights a bright idea about how to make wellness a part of our communities and every day lives. This week's bright idea should bring some comfort to the many hardworking parents out there who are struggling to put healthy meals on the dinner table each night.

We can all agree that in the wealthiest nation on earth all children should have the basic nutrition they need to learn and grow and to pursue their dreams because in the end nothing is more important than the health and well being of our children, nothing.

Mark Masselli: The Healthy, Hunger-Free Kids Act was signed into law last year with bipartisan support by President Obama and championed by First Lady Michelle Obama as part of our campaign to fight childhood obesity. The reauthorized law targets low income students in an effort to narrow the nutrition gap by ensuring that all kids receive high quality healthy meals in schools. This goes for dinner as well. This new program will give children in need access to both a healthy dinner and to after school academic and enrichment programs that can open doors for all students. The new dinner program already exists in about a dozen states and the new law extends federal reimbursement to states for this new school supper program. Addressing childhood obesity and childhood hunger at the same time to make sure that all children have a chance at a promising future, now that's a bright idea.

(Music)

Margaret Flinter: This is Conversations on Health Care. I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli, peace and health.

Conversations on Health Care, broadcast from the campus of Wesleyan University at WESU, streaming live at www.wesufm.org and brought to you by the Community Health Center.