

Environmental Sustainability Programme

Plan / template | ENV-PLN-001

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Title	Environmental Sustainability Programme
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Prepared by	{{roles.quality_lead.name}}, Quality lead
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Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	Adapts ASF Policy 09 (Environmental Sustainability) and Policy 33 (construction)
Standards and criteria supported	Standard 2B, criterion 2B.7
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Measure energy, water and waste use each month.
2. Set targets for each, with a date and an owner.
3. Reduce waste by segregation and by avoiding single-use items where safe.
4. Report progress each quarter to the governing body.
5. Review the programme each year.

Stop and get help straight away if: the programme has no measured baseline or no owner.

1. Purpose

To reduce the facility's environmental impact through a documented, measured programme covering energy, waste and resource use [E-006, EC].

2. Scope

Applies to	The governing body, facilities, procurement, clinical and support staff
Locations	The whole facility
When	Continuously; baseline within 6 months; reported quarterly
Does not apply to	Carbon targets set at national level, which the facility follows where required

3. Definitions and abbreviations

Term	Meaning in this SOP
Baseline	The starting measurement from which progress is judged
Target	A measurable change to reach by a date
Waste reduction	Less waste produced, and more segregated and recycled waste

4. Background and rationale

A general statement of environmental awareness does not reduce emissions or waste. Criterion 2B.7 asks for a documented programme with measured progress. The ASF environmental policy provides the principles, adapted here for a hospital [E-006].

5. Responsibilities

Role	Duties in this SOP	Competence needed
Chief executive	Approves the programme and the targets	Executive leadership
Facilities manager	Owens energy and water; runs measurement	Facilities management
Waste lead	Owens waste segregation and reduction	Waste management
Procurement lead	Specifies lower-impact products where safe	Procurement

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Meters and records for energy and water	Read monthly	Working
Waste records (WST-FRM-001)	Current	Monthly summary

7. Safety and infection prevention

- Energy and resource savings must never reduce safety. Do not switch off equipment or ventilation that keeps patients safe.
- Do not reduce disinfection or sterilisation to save water or energy.

8. Before you start

- Set the baseline for energy, water and waste.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Set the baseline.	• Measure energy, water and waste for the most recent 12 months where data exist, or for 6 months from now. • Record the baseline values and their sources.	Without a baseline, no one knows whether anything improved.
2	Set targets.	• Set one target each for energy, water and waste, with a date and an owner. • Agree the targets with the governing body.	A target with no date and no owner is a wish.
3	Act on the main sources.	• Identify the largest energy and water users and the largest waste streams. • Plan at least three actions, such as lighting controls, leak repair, waste segregation or buying reusable items where safe.	Focus on the largest sources first.
4	Measure and report progress.	• Measure each month and report each quarter with the trend against the baseline. • Explain changes and actions taken.	Progress is only shown by a trend against a baseline.
5	Review yearly.	• Review the targets, the actions and the results each year. • Update the programme and record the version.	The programme must adjust to what the data show.

Decision points

- If a target is missed for two quarters, the owner proposes new actions to the governing body.

10. Special situations

Situation	What to do
Construction or refurbishment	Include environmental and social screening for the project, as in ASF Policy 33, before work starts.

11. Problems and escalation

- Significant environmental incidents (spills, emissions) are reported as incidents at once (INC-POL-001).

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Baseline measured	Yes	Within 6 months	Facilities manager	Escalate to governing body
Progress reports each quarter	100%	Quarterly	Facilities manager	Escalate to chief executive
Targets met or action plan in place	100%	Quarterly	Chief executive	Review at governing body

13. Records

Record	Where it is kept	Kept for
Baseline and monthly measurements	Facilities file	{{facility.records_retention_years}} years
Quarterly progress report (ENV-FRM-003)	Governance file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are briefed on the programme and their part in it at induction (EC).

15. Related documents

ID	Title	Relationship
ENV-FRM-003	Sustainability Progress Report	Quarterly report
WST-SOP-001	Sharps and Clinical Waste Management	Waste segregation
GOV-PLN-001	Strategic Plan	Programme links to goals

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus. Targets are set by the facility, to be checked by the committee.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Approved by the ASF Expert Committee
1.1	{{document.effective_date}}	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee