

# **Environmental Management Policy**

## **CORP-0032-v2**

**Status: Ratified**

**Document type: Policy**

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## 1 Introduction

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The aim of this Policy is to state and communicate the Tees, Esk and Wear Valleys NHS Foundation Trust intention, organisation of and arrangements for Environmental Management and Sustainability.

The Trust recognises that the business activities which it undertakes have a significant impact on the environment and the Trust is committed to incrementally/continually improve its overall Environmental performance and its approach to Sustainability.

We accept our responsibility to minimise, wherever possible, our impact on the environment and to comply with statutory environmental legislation and additional environmental requirements that the Trust has subscribed to.

The Trust will contribute towards the protection of the local, national and global environments through the development and implementation of a robust Sustainable Development Management Plan.

## 2 Why we need this policy

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### 2.1 Purpose

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This policy is a statement of our intentions and principles in relation to our overall environmental performance and provides a framework for action and for setting our environmental and sustainability objectives and targets.

It covers all activities undertaken and services provided by the Trust and extends to include related healthcare organisations which operate from the Trust's premises.

The Trust Board and Management Executive recognise their responsibility in this area, including conformance to statutory requirements.

### 2.2 Objectives

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We aim to continually promote and develop a pro-active approach to Environmental Management and Sustainability by:

- Maintain a Sustainable Development Management Plan (SDMP)
- Developing a programme to ensure compliance with the NHS Carbon Reduction Strategy to reduce carbon emissions by 80% by 2050
- Implementing an action plan which targets activities that will improve sustainability
- Demonstrate our commitment to sustainable development by adopting and implementing the NHS Sustainable Development Assessment Tool (SDAT)
- To embed sustainable development into management and governance processes this will assist with the delivery high quality healthcare.
- Champion sustainability at the highest level and cascade right throughout the organisation
- Develop an SDMP Steering Group of senior managers charged with implementing the Environmental Management Policy through a range of service based Green Implementation Teams
- Engaging with our PFI and Service Providers to develop and deliver a robust efficiency strategy in line with the Trust commitment
- Deliver the Trust capital program of building and refurbishments in compliance with relative legislation in respect of environmental sustainability

## 3 Scope

### 3.1 Who this policy applies to

This policy applies to ALL staff, patients, visitors and contractors

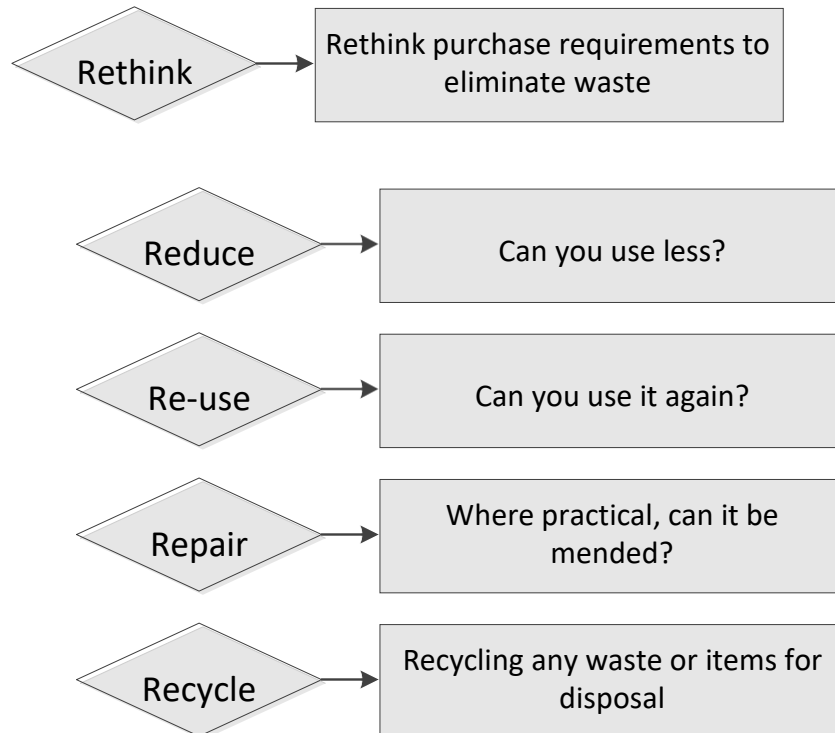
### 3.2 Roles and responsibilities

Role	Responsibility
Chief Executive	Ensures compliance with the relevant statutory requirements relating to all aspects of environmental management that impact on the Trust.
Director of Estates, Capital Planning and Facilities Management	Designated director responsible for overseeing all aspects of environmental safety management for the Trust
Head of Estates and PFI	Manages the safe, efficient and effective operation of the Trusts estate and will act as the day to day lead for environmental management
Estates Energy and Sustainability Officer	Day to day management and monitoring of the Trust's compliance with UK Environmental legislation and to notify any breaches to the Trust. Implementation of the Trust's Sustainable Development Management Plan (SDMP)
Estates Officers and Maintenance Supervisors	Ensures all buildings in the Trust are properly maintained to ensure their efficient performance reducing wastage of energy and water.
Capital Development Officers	Ensure all new and refurbished buildings are designed to meet the requirements as set out within HTM 07-07 (Sustainable health and social care buildings planning, design, construction and refurbishment)
Heads of Service/Service Managers/Locality Managers/Site Managers	Ensure all the staff in their respective area are aware of and follow guidance and procedures related to sustainability, energy conservation, disposal of waste, and any other environment related activity.
Trust employees	All employees have a responsibility to safeguard the environment by following the relevant Trust Policies and following guidelines designed to minimise the environmental impact of their activities.

## 4 Policy

The Trust will:-

- Ensure that it has an on-going action plan to reduce waste and develop a sustainable environment to enable the Trust to minimise environmental risk arising from its activities and comply with statutory legislation.
- Undertake waste minimisation audits throughout its premises, observing the following principles in managing emissions to air, water and land:



- Use best practice to reduce electricity, gas and water use to a minimum through investment in efficient equipment and optimising staff awareness on efficiency issues and carry out regular Energy Audits to identify risk areas
- Make continual measurable progress in improving its environmental performance to help reduce its environmental impacts, whilst maintaining the Trust's economic viability. The principles of best practice and best available technology will be adopted wherever possible within financial constraint.
- Effectively plan, organise, implement, control, monitor and review the preventative and protective environmental measures as a commitment to pollution prevention.
- Ensure that its activities comply with all legislative, statutory and Department of Health guidance on environmental requirements.
- Train key staff and, where appropriate, other personnel, visitors, contractors and suppliers, in environmental management, consistent with their responsibilities. Communicate and work in partnership with interested parties regarding the shared goal of environmental improvement.

## 5 Definitions

Term	Definition
<b>Environmental Management Policy</b>	A statement, approved by the management team of an organisation, which sets out the intentions and principles in relation to its overall environmental performance and provides a framework for action against which to implement environmental objectives and targets.
<b>Sustainable Development Management Plan</b>	A board approved document that assists the organisation to clarify their objectives on sustainable development and set out a plan of action which the Trust will implement to all environmentally related activity and specifically how, by whom and when it is to be carried out.
<b>Sustainable Development Assessment Tool</b>	A self-assessment tool which demonstrates the Trust commitment to sustainable development, health improvement and tackling health inequalities, through their day to day business activities.
<b>Environmental Process</b>	The methodology by which the organisation will deliver a set of goals, objectives and performance targets which will demonstrate how the organisation embeds the principles of environmental management throughout the Trust to ensure that there is engagement and continuous improvement in the process of minimising the impact on the environment
<b>Sustainable Development Management Plan Steering group (SDMP)</b>	A Board approved steering group of senior managers charged with implementing the Sustainable Development Management Plan a range of service based Green Implementation Teams.
<b>Environmental Impact</b>	Any change to the environment, whether adverse or beneficial, wholly or partially resulting from an organisation's activities, products or services.

## 6 Related documents



This Policy defines the Tees Esk and Wear Valleys NHS Foundation Trust approach to Environmental Management and Sustainability and should be read in conjunction with the Tees Esk and Wear Valleys NHS Foundation Trust Sustainable Development Management Plan.

## 7 How this policy will be implemented

<ul style="list-style-type: none"> <li>This policy will be published on the Trust's intranet and external website.</li> </ul>
<ul style="list-style-type: none"> <li>Line managers will disseminate this policy to all Trust employees through a line management briefing.</li> </ul>
<ul style="list-style-type: none"> <li>Specific responsibility for policy implementation is delegated to respective Directors and Heads of Service etc.</li> </ul>
<ul style="list-style-type: none"> <li>A Senior Manager within the Estates Department will appoint the Energy and Sustainability Officer to adopt responsibility for managing the actions resulting from the Sustainability Development Management Plan.</li> </ul>
<ul style="list-style-type: none"> <li>The implementation of this policy shall be delegated to appropriate identified staff who comprise the SDMP Steering Group, with assistance from "green champions". Those persons appointed to carry out this task shall be suitably informed, instructed and trained to a standard which, ensures that tasks are carried out in a safe, competent manner.</li> </ul>

### 7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
None identified			

## 8 How the implementation of this policy will be monitored

Auditable Standard/Key Performance Indicators		Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Sustainable Development Assessment Tool	Reviewed annually in conjunction with the SDMP Steering Group by a Senior Manager	
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3			

## 9 References

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The Sustainable Development Strategy for the Health, Public Health and Social Care System 2014-2020

NHS Carbon Reduction Strategy for England

NHS Sustainable Development Assessment Tool The Climate Change Act (2008)

Health Technical Memorandum HTM 07-01 (Safe Management of Healthcare Waste) Health Technical Memorandum HTM 07-02 (Encode – Making Energy Work in Healthcare) National Guidance for Healthcare Waste Water Discharge (2014)



## 10 Document control

Date of approval:	28 October 2020	
Next review date:	28 October 2023	
This document replaces:	CORP/0032/V1 – Environmental Management Policy	
Lead:	Name	Title
	Ken Tench	Head of Estates and PFI
Members of working party:	Name	Title
	Steve Kent	Energy and Sustainability Officer Estates Officer (Specialist Services) PFI/Contracts Compliance Manager
	George Watson	
Ken Tench		
This document has been agreed and accepted by: (Director)	Name	Title
	Paul Foxtan	Director of Estates, Capital Planning and Facilities Management
This document was approved by:	Name of committee/group	Date
	Health Safety and Security Working Group	07 February 2020
This document was ratified by:	Name of committee/group	Date
	Senior Leadership Group	28 October 2020
An equality analysis was completed on this document on:	03 January 2020	

### Change record

Version	Date	Amendment details	Status
2	28 Oct 2020	Name and job title changes Corporate Citizenship Assessment Model replaced by Sustainable Development Assessment Tool Environmental Steering group replaced by Sustainable Development Management Plan Steering group	Published

## Appendix 1 - Equality Analysis Screening Form

Please note; The Equality Analysis Policy and Equality Analysis Guidance can be found on InTouch on the policies page

Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.	Estates and Facilities Management			
Name of responsible person and job title	Ken Tench, Head of Estates and PFI			
Name of working party, to include any other individuals, agencies or groups involved in this analysis	Ken Tench George Watson			
Policy (document/service) name	Environmental Management Policy			
Is the area being assessed a...	Policy/Strategy	<input type="checkbox"/>	Service/Business plan	<input type="checkbox"/>
	Procedure/Guidance	<input type="checkbox"/>	X	Code of practice
	Other – Please state			
Geographical area covered	Trust Wide			
Aims and objectives	This policy aims to provide up to date information in relation to the arrangements for Environmental Management and Sustainability.			
Start date of Equality Analysis Screening (This is the date you are asked to write or review the document/service etc.)	03/01/2020			
End date of Equality Analysis Screening (This is when you have completed the equality analysis and it is ready to go to EMT to be approved)	03/01/2020			

**You must contact the EDHR team if you identify a negative impact. Please ring Sarah Jay or Ian Mhlanga on 0191 3336267/3046**

1. Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?					
Patients, Staff, Visitors and FM Provider					
2. Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups below?					
<b>Race</b> (including Gypsy and Traveller)	Yes/No	<b>Disability</b> (includes physical, learning, mental health, sensory and medical disabilities)	Yes/No	<b>Sex</b> (Men, women and gender neutral etc.)	Yes/No
<b>Gender reassignment</b> (Transgender and gender identity)	Yes/No	<b>Sexual Orientation</b> (Lesbian, Gay, Bisexual and Heterosexual etc.)	Yes/No	<b>Age</b> (includes, young people, older people – people of all ages)	Yes/No
<b>Religion or Belief</b> (includes faith groups, atheism and philosophical belief's)	Yes/No	<b>Pregnancy and Maternity</b> (includes pregnancy, women who are breastfeeding and women on maternity leave)	Yes/No	<b>Marriage and Civil Partnership</b> (includes opposite and same sex couples who are married or civil partners)	Yes/No
<p><b>Yes</b> – Please describe anticipated negative impact/s</p> <p><b>No</b> – Please describe any positive impacts/s</p>					

<p>3. Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.? <b>If 'No', why not?</b></p>	<p>Yes</p>	<p>X</p>	<p>No</p>	
<p><b>Sources of Information may include:</b></p> <ul style="list-style-type: none"> <li>• Feedback from equality bodies, Care Quality Commission, Equality and Human Rights Commission, etc.</li> <li>• Investigation findings</li> <li>• Trust Strategic Direction</li> <li>• Data collection/analysis</li> <li>• National Guidance/Reports</li> </ul>	<ul style="list-style-type: none"> <li>• Staff grievances</li> <li>• Media</li> <li>• Community Consultation/Consultation Groups</li> <li>• Internal Consultation</li> <li>• Research</li> <li>• Other (Please state below)</li> </ul>			
<p>4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Sex, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership</p>				
<p><b>Yes</b> – Please describe the engagement and involvement that has taken place</p>				
<p><b>No</b> – Please describe future plans that you may have to engage and involve people from different groups</p>				

5. As part of this equality analysis have any training needs/service needs been identified?					
<b>Yes/No</b>	Please describe the identified training needs/service needs below				
A training need has been identified for;					
Trust staff	Yes/No	Service users	Yes/No	Contractors or other outside agencies	Yes/No
<b>Make sure that you have checked the information and that you are comfortable that additional evidence can provided if you are required to do so</b>					
The completed EA has been signed off by: You the Policy owner/manager: Type name: George Watson					Date: <b>03/01/2020</b>
Your reporting (line) manager: Type name: Ken Tench					Date: <b>03/01/2020</b>
If you need further advice or information on equality analysis, the EDHR team host surgeries to support you in this process, to book on and find out more please call: 0191 3336267/3046					

## Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

	Title of document being reviewed:	Yes/No/ Unsure	Comments
<b>1.</b>	<b>Title</b>		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
<b>2.</b>	<b>Rationale</b>		
	Are reasons for development of the document stated?	Yes	
<b>3.</b>	<b>Development Process</b>		
	Are people involved in the development identified?	Yes	
	Has relevant expertise has been sought/used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
	Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
<b>4.</b>	<b>Content</b>		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
<b>5.</b>	<b>Evidence Base</b>		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are supporting documents referenced?	Yes	
<b>6.</b>	<b>Training</b>		
	Have training needs been considered?	Yes	
	Are training needs included in the document?	Yes	
<b>7.</b>	<b>Implementation and monitoring</b>		
	Does the document identify how it will be implemented and monitored?	Yes	

	Title of document being reviewed:	Yes/No/ Unsure	Comments
<b>8.</b>	<b>Equality analysis</b>		
	Has an equality analysis been completed for the document?	Yes	
	Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
<b>9.</b>	<b>Approval</b>		
	Does the document identify which committee/group will approve it?	Yes	
Signature:			