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WALES

Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board

## Environmental Policy

This policy has been screened for relevance to equality. No potential negative impact has been identified so a full equality impact assessment is not required.

**Policy Owner:** Director of Strategy

**Approved by:** Executive Strategy Group

**Issue Date:** November 2016

**Review Date:** November 2019

3 years from date of approval or if any legislative or operational changes require.

**Policy ID:** HB 93

**Freedom of Information Status:** Open

This policy has been assessed to reflect compliance, monitoring and control of the Policy, in relevant legislation and details how the Health Board monitors its progress in reducing its environmental impacts.

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## **Policy Definition**

A policy is a high level overall guide, which sets the boundaries within which action will take place, and should reflect the philosophy of the organisation or department. It provides a prescribed plan for staff to follow, which should not be deviated from.

### **1. Purpose**

The Environmental Management Policy outlines the guiding principles of the Environmental Management System that shall encompass all of the activities, products and services undertaken by Abertawe Bro Morgannwg University Health Board.

The Policy confirms that the Environmental Management System shall meet the requirements of ISO 14001–Standard 2015 and applies to all Health Board premises.

The Policy:

- Includes a commitment to comply with relevant environmental legislation and regulations and with other requirements to which the organisation subscribes;
- Provides the framework for setting and reviewing environmental objectives and targets;
- Is documented, implemented, maintained and communicated to all employees;
- Is available to the public.

### **2. Policy Statement**

Abertawe Bro Morgannwg University Health Board was established on 1st October 2009. We provide quality healthcare to more than 500,000 people principally covering the Swansea, Neath Port Talbot Bridgend Local Authority areas.

We are responsible for delivering healthcare through two acute hospitals, four community hospitals and a network of health centres, clinics and facilities for patients with mental health and learning disabilities.

The Health Board is one of the largest employers within the local area. In delivering our role as a healthcare provider we acknowledge our responsibility to maintain a high level of environmental performance, to conform to our compliance obligations and to set and fulfil our environmental objectives with an emphasis on continual improvement.

It is a requirement of the Welsh Assembly Government and of Abertawe Bro Morgannwg Health Board that we maintain ISO 14001–2015 Environmental Standard certification to demonstrate and reaffirm the Health Boards commitment to minimize the impact of the organizations activities upon the environment.

In doing so, the Health Board requires that all staff and in particular all managers at all levels of the organisation to be aware of, and fully supportive, of our environmental responsibilities.

### **3. Principles**

#### **We shall**

- Ensure that all employees, including contractors, are responsible for working in a manner that protects the environment.
- Integrate environmental management into operating procedures to ensure that long term and short term environmental issues are considered.
- Remain committed to continual improvement.
- Prevent pollution in all areas of potential environmental impact.
- Review the Environmental Policy regularly to ensure that it remains fit for purpose and available to all interested parties.
- Audit the ISO 14001 Environmental Management System on a regular basis to identify strengths and areas for improvement, and to highlight actions required to prevent potential deficiencies.
- Ensure compliance with all relevant environmental legislation, Healthcare Standards for Wales and Welsh Government Directives.

#### **We intend to reduce our environmental impact by**

- Reducing the consumption of finite resources and to minimize our waste wherever possible;
- Adopting a carbon based management approach specifically aimed at reducing CO2 emissions. To be achieved by setting an objective of a 3% year on year reduction in our carbon footprint, and where possible purchasing or producing a portion of our energy requirements from renewable sources;
- Promoting the minimization of waste generated through Health Board activities and reducing the environmental impact of waste disposal wherever possible by diverting waste from landfill and maximizing recycling opportunities.
- Adopt site specific travel plans, to encourage modal shift away from single occupancy car journeys to more sustainable modes of transport such as public transport, car sharing and active travel.
- Integrating the principles of sustainable development into everyday purchasing decisions.

### **4. Scope**

The Environmental Management Policy applies to all activities, products and services of Abertawe Bro Morgannwg Health Board. The Policy will be applicable to all directly employed employees of the Health Board as well as any contractors or those employed to provide services.

## **5. Legislative and NHS Requirements**

For the purpose of this document, and to support the Health Board's aim to achieve environmental best practice, the leading legislative and NHS requirements in respect of environmental management are highlighted in the references section.

## **6. Procedure**

As part of the environmental management programme a detailed impacts and aspects register will be completed to include all Health Board activities. This register will act as the basis through which a suite of procedures will be developed to manage and reduce the environmental consequences of the Health Board activities. It is anticipated that the ISO14001-2015 procedures will cover the following activities:

- Document Control
- Communication
- Records Control
- Legal Register and Compliance
- Environmental Aspects
- Operational Control
- Emergency Response
- Objectives and Targets
- Internal Audit
- Environmental non Conformity
- Environmental Management Review
- Sustainability Reporting

The impacts and aspects register will also be used to identify all legislative and other requirements that the Health Board must comply with.

This Policy will be supported by the environmental manual, the operation of the environmental management system to achieve ISO 14001-2015 certification and the suite of procedures aforementioned.

## **7. Training Implications**

All Abertawe Bro Morgannwg University Health Board employees will be required to undertake general environmental awareness training upon the commencement of their employment with the Health Board.

In addition, existing members of staff will receive continuing training through various environmental initiatives.

Specialist training will be provided for key staff, to ensure compliance with environmental legislation and guidance.

## **8. Review, Monitoring and Audit Arrangements**

This Policy will be implemented, reviewed and audited in line with the requirements of ISO 14001-2015 and the Health Board shall be kept informed on changes in line with best practice and legal statute.

As a minimum this Policy shall be reviewed every 3 years to ensure compliance and best practice. An earlier review may be warranted as a consequence of:

- External audit findings;
- An annual review by the Environmental Management Steering Group;
- A suggestion or complaint concerning the Policy;
- Any other circumstances, as appropriate.

## **9. Environmental Managerial Responsibilities**

The relevant responsibilities are highlighted as follows –

### **Chief Executive**

The Chief Executive is ultimately responsible for insuring that the Health Board's Environmental Activities are managed in accordance with all Environmental Activities.

### **Director of Strategy**

The Health Board's Director of Strategy has the delegated responsibility for all Environmental Activities.

### **Assistant Director of Strategy (Estates)**

The Assistant Director of Strategy (Estates) will be responsible for:

- ensuring that effective Environmental Management Systems are in place and that they are reviewed in accordance with Health Board policy;
- notifying the Chief Executive, relevant Directors and the Executive Board of any environmental issues and/or pending or actual events that will require a coordinated response;
- the provision of advice and guidance to managers, clinicians and other relevant staff with regards to environmental issues;

### **Technical Service Manager (Energy & Environment)**

- coordinating the drafting of the suite of procedures required for the safe and effective management of Health Board Environmental impacts;
- ensuring they are reviewed in accordance with Health Board Policy and circulated for consultation to relevant groups;
- notifying the Assistant Director of Strategy (Estates) of any environmental issues and/or pending or actual events that will require a coordinated response;
- formulating a framework to implement and maintain a structured
- Environmental Management System;
- chairing the Environmental Management Steering Group and progressing the work streams identified;

### **Environmental Management Steering Group**

The Environmental Management Steering Group (EMSG) has been established to coordinate Environmental Management on their behalf of the Facilities Director. The group has no executive powers.

There is a project management team with key areas of responsibility which report to and support the work of the Environmental Management Steering Group as follows:

- Transport and Travel;
- Site management;
- Waste;
- Pharmacy;
- Pathology;
- Estates management;
- Energy;
- Procurement;
- Health and Safety

All members of the EMSG are responsible for supporting the external and internal audit process associated with the ISO 14001-2015 standard certification, the Environmental Management System and the annual sustainability report.

## **Service Director**

The Service Director is required to assist to facilitate the implementation of this policy within its departments across its site.

## **The Estates Department**

The Estates Department is responsible to ensure:

- Records are maintained in accordance with the regulations
- Undertake audits to ensure that the Health board is in compliance with this Policy and the legislation
- Contractors who supply services to the Health Board are in compliance with the Policy and legislation
- Undertake investigations and report any non-conformances to the Regulatory Authority

## **Assistant Director of Strategy (Capital)**

The Assistant Director of Strategy (Capital) will be responsible for:

- Ensuring compliance with Welsh Government publications: BREEAM Healthcare and Health Technical Memorandum HTM 07:07
- Contractors who supply services to the Health Board are in compliance with the Policy and legislation.

## **Service and Departmental Managers**

Service and Departmental Managers will be responsible to ensure that staff under their control are aware of the Policy and that the mandatory training requirements of staff are fulfilled.

Locality and Departmental Managers will assist with the Estates Department to make improvements to departmental management systems where activities do not comply with this Policy and the relevant legislation.



## **Definitions**

### **Environmental Activities:**

Any activities or organisational procedures that have a potential to cause significant Environmental impacts including; air, water, land, natural resources, flora and fauna.

### **All Staff**

It is the responsibility of all staff to adhere to Environmental Legislation, this Policy and Operational Procedures.

## **10. Retention or Archiving**

Copies of this Policy will be archived and stored in line with the Organisation's Records Management Policy.

## **11. Non Conformance**

There is a requirement for all staff to comply with this procedure and, where requested, to demonstrate such compliance. Failure to comply will be regarded as a disciplinary incident, and will be dealt with under the appropriate Health Board Human Resources Policy.

## **12. Equality Impact Assessment Statement**

This Policy has been subject to a full equality assessment and no impact has been identified.

## **13. References (Legislation)**

- Regulation (EC) 1005/2009 on substances that deplete the ozone layer
- Regulation 842/2006 on Fluorinated Greenhouse Gases
- Ozone Depleting Substances Regulations SI 2015/168
- Fluorinated Greenhouse Gases Regulations (EU)517/2014 (OJ:L150/195/2014
- Clean Air Act 1993
- Dark Smoke (Permitted Periods) Regulations 1958 (SI 1958/498)
- Road Traffic (Vehicle Emissions) (Fixed Penalty) (Wales) Regulations SI 2003/300
- Sulphur Content of liquid Fuels (England and Wales) Regulations 2007 (Amendment) SI 2014/1975
- Environmental Protection Act 1990, Part II
- The Noise Act 1996 and Control of Noise 2005
- Waste (England and Wales) Regulations 2014
- Landfill Tax Regulations 1996 (as amended)

- The Environmental Permitting (England and Wales) Regulations 2010

## References (Legislation)(Cont`d)

- Waste Batteries and Accumulators Regulations 2015
- Waste Electrical and Electronic Equipment Regulations 2015
- Hazardous Waste Regulations 2015
- Controlled Waste Regulations 2012
- Water Resources Act 1991
- Water Industries Act 1991 as amended by the Water Industry Act 1999
- Anti-Pollution Works Regulations SI 1999/1006
- Water Act 2014
- Contaminated Land (Wales) Regulations SI 2006/2989
- Town and Country Planning Act 1990
- Building Act 1984
- Building Regulations SI 2010/2214 (Amendment) 2014
- Town & Country Planning Act 1990/1999
- Regulation (EC) 1907/2006 (OJ:L396/1/2006) on the Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH) and establishing a European Chemicals Agency as enforced by the REACH Enforcement Regulations SI 2008/2852
- Health and Safety at Work etc Act 1974
- Control of Substances Hazardous to Health Regulations SI 2002/2677
- Control of Asbestos Regulations SI 2012/632
- Approved Code of Practice (ACoP) (L8), The prevention or control of Legionellosis (including legionnaires' disease)
- Finance Act 2000, Part II (Climate Change Levy)
- The Climate Change Act 2008 as amended by the Climate Change. Act 2008 (2020 Target, Credit Limit and Definitions) Order SI 2009/1258
- Carbon Reduction Commitment Energy Efficiency Scheme (Amendment 2014/502)
- Directive 2012/27/EU (OJ:L315/1/2012) On Energy Efficiency
- Energy Performance of Buildings (England and Wales) Regulations 2012
- Wildlife and Countryside Act 1981 as amended.
- Countryside and Rights of Way Act 2000
- Environmental Damage (Prevention and Remediation) (Wales) Regulations 2015
- Knotweed Code of Practice
- Natural Resources Body for Wales ( Establishment ) Order SI 2012/1903
- Health Technical Memorandum 07-01: Safe management of healthcare waste
- Health Technical Memorandum 07 -07: Sustainable health and social care buildings: Planning, design, construction
- Securing the Future: UK Government sustainable development strategy
- Procuring the Future Sustainable Procurement National Action Plan: Recommendations from the Sustainable Procurement Task Force
- ISO 14001: 2015 Environmental Management Systems
- Ionising Radiations Regulations SI/1999/3232.
- Control of Pesticides Regulations SI 1997/188
- Wellbeing of Future Generations (Wales) Act 2015
- Environment (Wales) Act 2016

A review of environmental legislation is carried out every 6 months; a full register of environmental legislation is available on the Health Board's intranet.

### **Principal guidance documents**

- The Climate Change Strategy for Wales (2010)
- One Wales: One Planet
- Towards Zero Waste)
- Environment and Sustainability Health Technical Memorandum 07-07: Sustainable Health and Social Care Buildings
- BREEAM Healthcare
- Energy Efficiency in Wales – 10 year strategy 2016-2026

**From:** ABM Inquiries

**Sent:** 07 August 2018 15:03

**To:** Adel Davies (ABM ULHB - Surgical Specialties); Amanda Smith (ABM ULHB - Postgraduate Centre); Angela Hopkins (ABM ULHB - Corporate Nursing); Angela Kind (ABM ULHB - Estates); Anne Biffin (ABM ULHB - Medical Directors Department); Bellina Jenkins (ABM UHLB - Children's Services); Cathy Dowling (ABM ULHB - Corporate Nursing); Ceri Matthews (ABM ULHB - Clinical support services); Christine Morrell (ABM ULHB - Therapies And Health Sciences); Darren Griffiths (ABM ULHB - Strategy); David Murphy (ABM ULHB - Health & Safety); David Roberts (ABM ULHB - Mental Health & Learning Disabilities); Debbie Bennion (ABM ULHB - Nursing Division); Des Keighan (ABM ULHB - Estates); Dougie Russell (ABM ULHB - Musculo Skeletal); Eve Jeffery (ABM ULHB - Mental Health And Learning Disabilities); Fiona Reynolds (ABM ULHB - Singleton Hospital); Gemma Otter (ABM ULHB - Acct); Hamish Laing (ABM ULHB - Medical Directors Department); Helenna Jarvis-Jones (ABM ULHB - Medicine Directorate, Morriston Hospital); Hilary Dover (ABM ULHB - Primary and Community Services); Jamie Marchant (ABM ULHB - Service Directors Office); Jan Worthing (ABM ULHB - Singleton Hospital); Jonathan Goodfellow (ABM ULHB - Cardiology); Kathryn Jones (ABM ULHB - Workforce and OD); Kim Clee (ABM ULHB - Workforce); Lesley Jenkins (ABM ULHB - NPT Locality); Linda Bevan (ABM ULHB - Morriston Managed Unit); Lynne Hamilton (ABM ULHB - Finance); Malcolm Thomas (ABM ULHB - Corporate Services); Martin Bevan (ABM ULHB - Neath Port Talbot Locality); Matt John (ABM UHLB - Informatics Directorate); Mike James (ABM ULHB - Corporate Hospital Management); Neil Miles (ABM ULHB - Surgery); Nicola Williams (ABM ULHB - Morriston Unit); Pamela Wenger (ABM ULHB - Corporate Governance); Rebecca Carlton (ABM UHLB - Morriston Hospital); Rhian Thomas (ABM ULHB - Estates); Sandra Husbands (ABM UHLB - Public Health); Sian Harrop-Griffiths (ABM ULHB - Strategy); Silvana Gad (ABM ULHB - Primary & community Services Delivery Un); Susan Bailey (ABM ULHB - Communications); Susan Hunt (ABM ULHB - Bridgend Locality); Tracy Myhill (ABM ULHB - Corporate); Vicky Warner (ABM ULHB - Primary Care, Community Services); Victoria Gibbs (ABM ULHB - Trauma Orthopaedic & Spinal services); Wendy Penrhyn-Jones (ABM ULHB - Administration)

**Cc:** CatherineH Williams (ABM ULHB - CEO Office); Catrin Evans (ABM ULHB - Strategy); Claire Mulcahy (ABM ULHB - Finance); Clare Dauncey (ABM ULHB - Human Resources); Ebony Smith (ABM ULHB - Corporate Services); Francesca Proietti (ABM ULHB - Informatics Directorate); Jeanie Stevens (ABM ULHB - Executive Medical Directors Department); Kirsty Joseph (ABM ULHB - Finance); Linda Smith (ABM ULHB - Nursing Division); Lyn Westacott (ABM ULHB - Strategy); Paula Picton (ABM ULHB - Strategy)

**Subject:** Policies

I write to advise that the following policy have been updated and added to the Corporate Policies database:

- Environmental Policy

The policy is available to view via the [corporate policy database](#).

Regards

Llywodraethu Corfforaethol / Corporate Governance  
Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board  
Pencadlys ABM / ABM Headquarters  
1 Talbot Gateway, Baglan, Port Talbot, SA12 7BR

Bwrdd Iechyd Prifysgol ABM yw enw gweithredu Bwrdd Iechyd Lleol Prifysgol Abertawe Bro Morgannwg /  
ABM Health Board is the operational name of Abertawe Bro Morgannwg University Local Health Board



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