

Policy/Procedure/Guideline**ENVIRONMENTAL POLICY****Version no:** 1.0**Issue Status:** Approved**Date of Ratification:** April 2016**Ratified by:** Clinical Governance & Risk Board**Policy Author:** Bradley Woods**Policy Owner:** CG&RB**Review Frequency:** 2 Years**Identifiable Document Code:** PTUK005**Last Review:** April 2020**Next Review:** April 2022

POLICY AWARENESS	
People who need to know this policy in detail	All Managers and Directors
People who need to have a broad understanding of this policy	All Staff
People who need to know this policy exists	All Staff

CHANGE CONTROL DETAILS			
Date DD/MM/YY	Version	Description	Reason for changes
11/04/2016	1	New Policy	New Policy

Policy location:

Main Policy Folder in Control Room and Crew Room
On PTUK Server

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1.0 Introduction

- 1.1 Patient Transport UK (PTUK) operates a fleet of ambulances used to convey patients to, from and between centres of care and treatment both in the UK and Europe, runs a number of training courses and operates headquarters including garaging facilities, vehicle cleaning and administrative and management offices.
- 1.2 PTUK continually strives to ensure that its activities are safe for staff, patients, visitors neighbours and others affected by its work.
- 1.3 PTUK fully recognises its responsibilities in respect of environmental protection, in reducing where practicable general pollution to air, land and water. Environmental issues should constitute a fundamental element in company procedures and long-term strategy. PTUK has successfully achieved ISO14001, an accredited Environmental Management System and is committed to reducing carbon emissions from its fleet and its effect on the environment. Working towards this objective, PTUK have piloted a number of innovative environmentally sound solutions to deliver a true green policy
- 1.4 PTUK recognises the importance of co-operation and partnership with outside agencies to achieve environmental efficiency. To that effect we work with organisations such as the Carbon Trust, MCC Business Solutions (Go Green Plus) and Carbonica to ensure commitment is maintained and retrospective action taken.

2.0 Purpose

- 2.2 The purpose of this policy is to enshrine environmental issues into all company activities, ensuring minimal environmental impact from our operations.
- 2.3 To meet this objective it is imperative that all staff are aware of the potential environmental impacts of their work and are committed to improving PTUK environmental performance.
- 2.4 This policy directs environmental issues and policy development through a formal structured process. In order to comply with ISO 14001, the policy must:
 - Be available to the public
 - Be appropriate to the organisation
 - Commit to preventing pollution and to continual improvement
 - Commit to compliance with relevant legal and other environmental requirements
 - Provide a framework for setting objectives and targets
 - Be documented, implemented, maintained and communicated to all employees and people working on behalf of the organisation.

3.0 Duties

- 3.1 The Operations Director has overall responsibility for the implementation of this policy and day to day accountability. Our Health and Safety Manager is responsible reporting on the progress of environmental projects and their benefit to the organisation.
- 3.2 Managers at all levels of the company are required to maintain the company's environmental policy. Managers will ensure that the staff they manage, permanent, temporary, bank or contract, are made aware of PTUK's Environmental Policy and of PTUK's commitment towards environmental management.
- 3.3 All employees are made aware of the company environmental policy and are encouraged to abide by it. Staff will also be encouraged to participate in and fully support environmental initiatives and to put forward suggestions for environmental improvements.
- 3.4 All staff will make attempts to minimise energy and utility usage by observing good housekeeping measures, and assist in minimising waste production, maximising the re-use and recycling of waste material.

4.0 Consultation and Communication with Stakeholders

- 4.1 The biggest stakeholder with regard to this policy is the public. As such this policy must be available to members of the public on request. On receipt of an email enquiry or an enquiry via the website, the Director of Technology will arrange to forward a copy. Telephone enquiries will most probably initially come to control staff, who will forward a copy electronically via email or post a hard copy to the enquirer's address.
- 4.2 Staff are made aware of this policy on induction, and of where it can be found.
- 4.3 Staff are informed of new revisions or subsequent versions of this policy via internal email and the posting on notice boards.

5.0 Definitions

- 5.1 EMS: An Environmental Management System refers to the management of an organization's environmental programs in a comprehensive, systematic, planned and documented manner. A well planned EMS is a requirement for ISO 14004 certification.
- 5.2 Sustainability: the goal of sustainable development is to meet the needs of today, without compromising the ability of future generations to meet their needs.
- 5.3 Carbon Footprint: A carbon footprint measures the total greenhouse gas emissions caused directly and indirectly by an individual, organisation, event or product (UK Carbon Trust 2008). The footprint considers all six of the Kyoto Protocol greenhouse gases: Carbon dioxide (CO₂), Methane (CH₄), Nitrous oxide (N₂O), Hydrofluorocarbons (HFCs), Perfluorocarbons (PFCs) and Sulphur hexafluoride (SF₆). A carbon footprint is measured in tonnes of carbon dioxide equivalent (tCO₂e). The carbon dioxide equivalent (CO₂e) allows the different greenhouse gases to be

compared on a like-for-like basis relative to one unit of CO₂. CO₂e is calculated by multiplying the emissions of each of the six greenhouse gases by its 100 year global warming potential (GWP).

6.0 Continual improvement in prevention of pollution

- 6.1 It is PTUK policy that all new projects, proposals and practices have their environmental impact considered at a late stage of their development.

7.0 Compliance with legal and other environmental requirements

- 7.1 Requirements in leases and insurances

8.0 Environmental Management System (EMS)

- 8.1 PTUK is working towards a certified Environmental Management System. A working party has been formed to investigate the format of such systems and are currently looking into the Eco Management Audit Scheme as the EU standard and comparing its suitability to standards such as BS8555, ISO 14001 and BS7750. PTUK as a comparatively small but fast growing company necessarily need to balance the economic and business viability of such schemes with its environmental benefits.

- 8.2 The environmental impacts have been identified within the operational function of the company as well the internal departments and their functions. In order to achieve, sustain and monitor ongoing environmental awareness and accreditation it is imperative that our environmental management systems incorporate the following:

- Reduction in carbon emissions
- Assessment and the implementation of monitoring mechanisms of the environmental effects of the organisation's activities in line with our KPI's
- Training of employees in environmental issues and awareness
- Minimise the production of wastage
- Minimise material wastage
- Minimise energy wastage
- Apply the principles of continuous improvement in respect of air, water, noise and light pollution
- Reduce the impacts from our operations on the environment, local community and our employees

- 8.3 Whilst our Environmental Policy affects every aspect of our business, PTUK have identified four key areas that require company investment in order to achieve our goals:

- Transport and Operations
- Energy Use
- Management of Waste
- Procurement

- 8.4 PTUK adopts the EMS model specified by the international standard ISO14001. It is based on an implementation model; Plan – Do – Check – Review.

8.4.1 Plan

The plan stage starts by identifying and understanding the effects or impacts which PTUK's activities have upon the environment and by identifying legal and other similar constraints on the organisation. This includes PTUK's usual operating conditions and also reasonably foreseeable deviations such as emergencies. The impacts are then evaluated and classed as 'significant' or 'not currently significant'. After this evaluation process, the working version of this draft policy can be drafted.

8.4.2 Do

All impacts previously evaluated as 'significant' are now managed, either as improvement projects with objectives, targets, and management programmes or controlled by operational procedures. Issues identified as potential emergencies will be managed by processes of emergency prevention.

8.4.3 Check

This includes measuring, monitoring and calibration procedures to ensure that the controls and programmes are functioning as intended. It also involves checking on compliance with legislation. An Internal Environmental Audit is then undertaken to verify the developed system is operating as planned.

8.4.4 Review

Following the audit the whole system is reviewed to ensure it is functioning, delivering what is required and is still up to date and appropriate for PTUK and its modes of operation.

9.0 Framework For Setting Objectives

- 9.1 All PTUK policy and activities are examined annually by the CG&R Board with a view to identifying areas where improvement in environmental impact can be made.
- 9.2 Environmental objectives must be realistic and achievable. Whatever is written on paper, must be enactable.
- 9.3 Objectives proposed by the Environmental Working Party will be scrutinised by and when agreed, ratified by the Clinical Governance and Risk Board (CG&RB). The process of approval may mean rejection with proposal for changes to be presented to subsequent meetings.
- 9.4 Environmental objectives brought before the CG&RB will identify stakeholders who will be affected by, or enact proposed changes.
- 9.5 Objectives should be measurable, and proposals should include details on how compliance is monitored and whether the objective is achieved.

10.0 Transport

- 10.1 PTUK will benefit from a more sustainable approach to transport. This key area includes the deployment of low emission diesel vehicles, and the increased use of public transport for staff movements and business journeys.
- 10.2 Staff are encouraged to travel to work by cycle, on foot or using public transport. PTUK participate in the government backed cycle to work scheme, where tax incentives are offered for cycle purchase. Garaged cycle storing facilities are offered on the premises, whilst no private car parking is permitted.
- 10.3 Car sharing by staff is actively encouraged where car journeys are necessary.
- 10.3 Patient journeys are planned with minimal environmental impact as far as possible. Where practical, within reason, patient journeys are combined to minimise mileage.
- 10.4 PTUK has a continual program of vehicle replacement to ensure that the most fuel efficient vehicles are being purchased to meet Euro 4 emission standards. The company also informs all clients of the emissions that have been created during any journeys undertaken. This is printed on all invoices.

11.0 Procurement

- 11.1 PTUK recognise that the responsible procurement and use of resources is vital to environmental sustainability. We recognise that sustainability encompasses environmental, social and economic concerns. We are therefore committed to seeking continuous performance on sustainability, in both our internal and procurement functions.
- 11.2 All company purchasing is undertaken by the procurement manager whose primary role is to maximise the value for money in the stocking and replacement of assets and consumables.
- 11.3 The Procurement Manager is a key member of the environmental working group and sits on the Clinical Governance and Risk Board (CG&RB) to advise on issues regarding procurement.
- 11.4 PTUK will, where practical and financially viable use recyclable and renewable materials through FSC accredited suppliers.

12.0 Facilities Management

- 12.1 Sustainable facilities management is about minimising impacts on the environment through better energy usage, reducing carbon emissions, recycling, effective policies on waste, chemical use and use of water.

13.0 Carbon Offsetting

- 13.1 To achieve CarbonNeutral® status, PTUK is working with The CarbonNeutral Company, a world-leading provider of carbon reduction solutions. PTUK has reduced its greenhouse gas (GHG) emissions in accordance with The CarbonNeutral Protocol, the global standard for carbon neutral certification. The programme involved an independent assessment of the CO2 emissions produced, followed by an offset-inclusive emissions reduction programme. This means that for every one tonne of GHG emissions that PTUK produces, it purchases a verified carbon offset which guarantees an equivalent amount of GHG emissions is reduced from the atmosphere through a renewable energy or clean technology project.

14.0 Recycling Of Resources (Reduce, Reuse then Recycle)

- 14.1 PTUK minimise the waste our business generates through good practice and innovation such as encouraging staff not to print e-mails unless strictly necessary and to recycle a maximum of waste, as well as electronic archiving and data management. We invest in software, to manage work electronically and we ensure that our clients benefit through innovation in waste treatment and disposal.
- 14.2 By working with our suppliers, PTUK has been able to demonstrate continued success in reducing carbon emissions.
- 14.3 PTUK take the following steps to reduce its environmental impact through recycling schemes:
1. Recycling of all waste paper and recyclable waste.
 2. Recycling of printer cartridges.
 3. Recycling of product packaging.
 4. All clinical waste is correctly disposed.

15.0 Use of Electronic Documents

- 15.1 PTUK uses our internally developed electronic system to replace paper documentation wherever possible.
- 15.1.1 Vehicle Checks
Each crew is issued with a Personal Digital Assistant (PDA) which holds a program to take the crew through the stages of a vehicle check. The data is sent electronically to control on completion eradicating the need for paper crib sheets and documentation.
- 15.1.2 Electronic Logs. All human resources logs eg. Disciplinary hearings, incident log, annual leave, sick leave etc are held on electronic databases which are not routinely printed.
- 15.1.3 As far as possible, both internal and external communications are made by e-mail rather than pen and paper. All e-mails sent have the "CarbonNeutral Certified Company" Carbon reduction logo at the bottom with the ensignia;

 Please consider the environment before printing this email.

16.0 Partnerships in the Environment

PTUK take responsibility for its own environmental impact and work alongside clients to help them do the same. Environmental impact is being built into every aspect of the business, particularly within operations and procurement. We want our clients to be confident that we are committed and, importantly, continually looking for ways to improve.

17.0 Process for Monitoring Compliance

- 17.1 All environmental processes and procedures are subject to continuous audit by the Health & Safety Manager. Annual reports will be made to the Clinical Governance and Risk Board.

18.0 Standards/Key Performance Indicators

- 18.1 Our performance is measured and monitored against the same standards as ISO14001.

19.0 References

The UK Carbon Trust 2008, <http://www.carbontrust.co.uk> accessed October 2011.

ISO 14001 <http://www.iso-14001.org.uk/iso-14001.htm> accessed October 2011.

20.0 Appendices

Appendix A - Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
	• Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this procedural document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

Appendix B - Checklist for the Review and Approval of Procedural Document

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

	Title of document being reviewed:	Yes/No/ Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Is the method described in brief?	Yes	
	Are people involved in the development identified?	Yes	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	Yes	
4.	Content		
	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	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
	Are the references cited in full?	Yes	
	Are supporting documents referenced?	Yes	
6.	Approval		
	Does the document identify which committee/group will approve it?	Yes	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes	
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be	Yes	

	Title of document being reviewed:	Yes/No/Unsure	Comments
	done?		
	Does the plan include the necessary training/support to ensure compliance?	Yes	
8.	Document Control		
	Does the document identify where it will be held?	Yes	
	Have archiving arrangements for superseded documents been addressed?	Yes	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes	
	Is there a plan to review or audit compliance with the document?	Yes	
10.	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
11.	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes	Governance Officer & I.T. Dept

Individual Approval

If you are happy to approve this document, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name		Date	11.04.2020
Signature			

Committee Approval

If the committee is happy to approve this document, please sign and date it and forward copies to the person with responsibility for disseminating and implementing the document and the person who is responsible for maintaining the organisation's database of approved documents.

Name		Date	11.04.2020
Signature			