

ENVIRONMENTAL MANAGEMENT

Standard

All tasks and processes that pose an environmental risk are managed to minimise any negative impact on the environment.

Overview

This standard is based on the requirements set out in the International standard ISO 14001 – Environmental management systems. ISO 14001 specifies the key requirements of an environmental management system and some of these requirements are contained in this standard. It should be noted that it is not the intention of this standard to require HPSS organisations to achieve **independent accreditation** to ISO 14001, although this is an option individual organisations may wish to work towards. This standard only specifies the minimum requirements for controlling environmental risk, which include:

- Establishing accountability arrangements
- Environmental policy and strategy
- Preparatory environmental review
- Register of significant environmental risks
- Environmental programmes
- Environmental risk management process
- Environmental capability
- Monitoring and review
- Audit

Assessment Guidance

HPSS organisations vary significantly in size and in the nature of the services they deliver. It follows that not all controls assurance standards will apply to each organisation. This is implicit in the current Departmental guidance, eg. *The Reference Table on Applicability and Expected Levels of Compliance* which should be referred to before commencing the self-assessment exercise.

Even where a standard is generally applicable to the work of an organisation it is quite possible that not all of the criteria will be materially applicable. Before self-assessing against a standard, therefore, an organisation should consider the relevance of each criterion to its own business and conduct its assessment accordingly. Thus, where a criterion is clearly relevant to an organisation, the score should be based on the **totality of the action taken to address the requirement**. Where there is little or no relevance, the criterion should be considered “not applicable” and ignored for scoring purposes as explained in the guidance on *Reporting Compliance* issued by the Department.

This approach will ensure that the assessment has no unfairly detrimental effect on the organisation's overall score but reflects a proper evaluation of the key areas of risks identified and the actual levels of controls put in place to manage those risks.

Likewise, the *Examples of Verification* set out in the standard are just that – examples, for guidance only. Once again, it is the nature of each organisation's business that determines the type of evidence needed to prove that appropriate controls are in place. In effect, this may mean that only some of the examples listed are relevant to a particular HPSS organisation or, indeed, that there are other more relevant examples which can be adduced as evidence of compliance. It is also the case that some evidence can be deployed to demonstrate compliance with more than one criterion or standard.

KEY REFERENCES

British Standards Institution BS EN ISO 14001 (1996) *Environmental management systems – Specification with guidance for use*. BS. 14001:1996. London, BSI.

British Standards Institution BS EN ISO 14010 (1996) *Guidelines for environmental auditing – general principles*. BS. 14010:1996. London, BSI.

British Standards Institution BS EN ISO 14011 (1996) *Guidelines for environmental auditing – Audit procedures- Auditing of environmental management systems*. BS. 14011:1996. London, BSI

British Standards Institution BS EN ISO 14012 (1996) *Guidelines for environmental auditing – Qualification Criteria for environmental auditors*. BS. 14012:1996. London, BSI

British Standards Institution BS EN ISO 14004 (1996) *Environmental management systems – General guidelines on principles, systems and supporting techniques*. BS. 14004:1996. London, BSI.

British Standards Institution BS EN ISO 14031; 2000 *Environmental Performance Evaluation Guidelines*. BS. 14031:2000. London, BSI.

Department of Health (2001) *Guidance: First Principles 2001*

Department of Health (2000) *Sold on Health- Modernising procurement, operation and disposal of NHS estate*. The Stationery Office, London

Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003

The Environmental Protection Act 1990.(there are several pieces of primary legislation in NI mirroring Parts I, II, IV, VI and various provisions of Parts V and VIII of EPA 1990) The Stationery Office, Belfast

Northern Ireland (Miscellaneous provisions) Act 2006 (commencement No2) Order SI 2006/2966 - section 25 on sustainable development, on 31 March 2007

The Environment (Northern Ireland) Order 2002. The Stationery Office, Belfast.

The Pollution, Prevention and Control Regulations (Northern Ireland) 2003. The Stationery Office, Belfast.

Radioactive Substances Act 1993. The Stationery Office, Belfast.

Ionising Radiations Regulations (Northern Ireland) 2000. The Stationery Office, Belfast

Great Britain (1998) *Our Healthier Nation, A Contract for Health*. The Stationery Office, London

Transport of Dangerous Goods (Safety Advisers) Regulations 2000. The Stationery Office, Belfast

Great Britain (1999) *A better quality of life – a strategy for sustainable development in the UK*. ISBN 0-10-143452-9 The Stationery Office, London

Great Britain (1999) *Quality of life counts – indicators for a strategy for sustainable development for the UK: A baseline assessment*. ISBN 1-851123-43-1 The Stationery Office, London

Institute of Environmental Management and Assessment, Chartered Institute of Purchasing and Supply and NHS Purchasing and Supply Agency 2002 *Environmental Purchasing in practice – guidance for organisations*. NHS Purchasing and Supply Agency, Reading

NHS Estates (2002) *New Environmental Strategy for the National Health Service*. NHS Estates, Leeds

NHS Estates (2002) *NHS Environmental Assessment Tool (NEAT)* NHS Estates, Leeds

NHS Estates (2001) *Sustainable development in the NHS*. The Stationery Office, London

Health Estates Agency, Composite Biodiversity Report, 2007

HSS (PPM) 3/02 Corporate Governance: Statement on Internal Control

HSS (PPM) 4/05 AS/NZS 4360: 2004 – Risk Management

HSS (PPM) 8/02 Risk Management in the Health and Personal Social Services

HSS (PPM) 10/02 Governance in the HPSS – Clinical and Social Care Governance: Guidelines for Implementation

HSS (PPM) 13/02 Governance in the HPSS: Risk Management

HSS (PPM) 5/03 Governance in the HPSS: Risk Management and Controls Assurance

HSS (PPM) 8/04 Governance in the HPSS: Controls Assurance Standards – Update

NORTHERN IRELAND, Corporate Governance: Statement on Internal Control DAO (DFP) 5/2001

NORTHERN IRELAND, Statement of Internal Control DAO (DFP) 25/2003

NHS Executive (1999) *Guidelines for Implementing Controls Assurance in the NHS: Guidance for Directors*. NHS Executive, London

NHS Executive (1995) *NHS Internal Audit Manual 1995*. NHS Executive, London.

Regional Supplies Service Policy & Strategy documents (2004). CSA, Regional Supplies Service.

Standards Australia (2004) Risk Management AS / NZS 4360:2004. Standards Association of Australia. Strathfield NSW.

A considerable amount of additional environmental reading is available, and a comprehensive list can be found in the document entitled “New Environmental Strategy for the Health Service”

INDEX OF ENVIRONMENTAL MANAGEMENT CRITERIA

Criteria 1 & 2 (Accountability)

Board level responsibility for environmental management is clearly defined and there are clear lines of accountability throughout the organisation, leading to the Board.

The organisation has an effective policy and whole life strategy for environmental management, which has been endorsed by the Board and adopted throughout the organisation.

Criteria 3, 4 & 5 (Processes)

A thorough environmental review has been carried out to establish significant environmental risks.

There are agreed environmental targets and management objectives, which are fulfilled by an on going programme.

The risk management process contained within the Risk Management standard is applied to the management of environmental risk.

Criteria 6 & 7 (Capability)

There is access to up-to-date information on environmental legislation and guidance to all within the organisation who require the information.

Appropriate training relevant to the achievement of environmental policies, objectives and targets is provided to all staff within the organisation.

Criterion 8 (Outcomes)

Key indicators capable of showing improvements in environmental management and the management of associated risks are used at all levels of the organisation, including the Board, and the efficacy and usefulness of the indicators is reviewed regularly.

Criterion 9 (Monitoring and Review)

The system in place for environmental management, including risk management arrangements, is monitored and reviewed by management and the Board in order to make improvements to the system.

Criterion 10 (Internal Audit)

The Board seeks independent assurance that an appropriate and effective system of managing environmental risks is in place and that the necessary level of controls and monitoring are being implemented.

CRITERION 1

Board level responsibility for environmental management is clearly defined and there are clear lines of accountability throughout the organisation, leading to the board.

Source

- Governance in the HPSS: Clinical and Social care Governance – Guidance on Implementation, HSS (PPM) 10/2002
- Northern Ireland, Corporate Governance: Statement on Internal Control, HSS (PPM) 3/2002 NHS Estates (2002) *New environmental strategy for the National Health Service*. NHS Estates, Leeds
- Standards Australia (2004) *Risk Management AS / NZS 4360:2004*. Standards Association of Australia. Strathfield NSW

Guidance

The Chief Executive of the organisation has overall responsibility for environmental management. Roles, responsibility and authorities shall be defined, documented and communicated in order to facilitate effective environmental management.

It is the responsibility of the Risk Management Committee (in some organisations this role may be undertaken by a sub-committee of the Board responsible for risk management issues) to ensure the Board is kept fully informed of significant environmental management risks, and any associated significant developments or issues.

Examples of Verification

- Accountability arrangements chart
- Minutes of Risk Management Committee or equivalent
- Minutes of any Environmental committee or group
- Board minutes

Links with other standards

All standards (generic criterion)

CRITERION 2

The organisation has an effective policy and whole life strategy for environmental management, which has been endorsed by the board and adopted throughout the organisation.

Source

- British Standards Institution BS EN ISO 14001 (1996) *Environmental management systems – Specification with guidance for use*. BS. 14001:1996. London, BSI
- Department of Health (2000) *Sold on Health- Modernising procurement, operation and disposal of NHS estate*. The Stationery Office, London
- Great Britain (1998) *Our Healthier Nation, A Contract for Health*. The Stationery Office, London
- NHS Estates (2001) *Sustainable development in the NHS*. NHS Estates, Leeds
- NHS Estates (2002) *New environmental strategy for the National Health Service*. NHS Estates, Leeds
- Regional Supplies Service Policy & Strategy documents (2004). CSA Regional Supplies Service

Guidance

The development of an environmental policy is fundamental for the effective management of environmental issues.

To be effective the policy should:

- Be appropriate to the nature, scale and environmental impacts of its activities, products and services
- Include a commitment to continual improvement and prevention of pollution
- Include a commitment to comply with relevant environmental legislation, government targets and regulations, and with other requirements to which the HPSS subscribes
- Provide a framework for setting and reviewing environmental objectives and targets
- Be documented, implemented and maintained
- Be communicated to all employees
- Be available to the public and Stakeholders.

Relevant procedures and requirements resulting from the policy should be communicated throughout the organisation and to others who do business with the HPSS, such as suppliers and contractors.

Examples of Verification

- Current policy document (s)
- Board approved strategy (ies)
- Board minutes
- Evidence of Policy review

Links with other standards

Fleet and Transport Management
Management of Purchasing and Supply
Waste Management

CRITERION 3

A thorough environmental review has been carried out to establish significant environmental risks.

Source

- British Standards Institution BS EN ISO 14001 (1996) *Environmental management systems – Specification with guidance for use*. BS. 14001:1996. London, BSI
- NHS Estates (2002) *NHS Environmental Assessment Tool*. NHS Estates, Leeds
- NHS Estates (2001) *Sustainable development in the NHS*. The Stationery Office, London
- NHS Estates (2002) *New environmental strategy for the National Health Service*. NHS Estates, Leeds
- **Corporate** Greencode Environmental Management System (2005). – NHS Scotland Property Environment Forum Executive
- **Health Estates Agency, Composite Biodiversity Report, 2007**

Guidance

An initial environmental review is the first step in developing an effective environmental management system.

To be effective, the review should:

- Consider all significant environmental risks, such as may be identified during the environmental impact assessment review, resulting from current and past operations
- Examine all existing environmental management practices and procedures
- Consider those risks generated by contractor activity
- Consider legislative, regulatory and related HPSS requirements
- Evaluate and provide feedback of previous incidents
- Consider abnormal, normal and emergency operating situations

Once an environmental review has been undertaken, the significant potential and actual environmental aspects and impacts found in this review should be placed in the organisation's risk register.

The register should include significant environmental risks such as emissions to air, energy efficiency, releases to water, waste management, contamination of land, use of raw materials, natural resources, biodiversity management, transport, and local environmental and community issues.

The register should be maintained on a regular basis as new risks are identified and other risks are minimised.

The register should be updated at least annually.

Examples of Verification

- Environmental review report (however named)
- Risk register, identifying environmental risks
- Register of environmental aspects and impacts
- Land management plans
- N.E.A.T. scores

Links with other standards

Buildings, Land, Plant and non-medical Equipment
Fleet and Transport Management
Management of Purchasing and Supply
Waste Management
Decontamination of Re-usable Medical Devices

Criterion 4

There are agreed environmental targets and management objectives, which are fulfilled by an on going programme.

Source

- NHS Estates (2001) *Sustainable development in the NHS*. The Stationery Office, London
- NHS Estates (2002) New environmental strategy for the National Health Service. NHS Estates, Leeds
- Institute of Environmental Management and Assessment, Chartered Institute of Purchasing and Supply and NHS Purchasing and Supply Agency 2002 *Environmental Purchasing in practice – guidance for organisations*. NHS Purchasing and Supply Agency, Reading

Guidance

The environmental management programme should be established within the general planning of activities to address all of the organisation's environmental objectives. To be effective, the programme should be integrated into the organisation's strategic and business plans.

The programme should include:

- Designation of responsibility for achieving objectives and targets at each relevant function and level of the organisation
- The means and time-frame by which they are to be achieved
- Schedules
- Resources

If a project relates to new developments and new or modified activities, the programme should be amended, where relevant, to ensure that environmental management applies to such projects.

The programme should be kept under regular review and modified as necessary.

Examples of Verification

- Corporate Greencode EMS
- Documented management programme, with evidence of review
- Documented environmental objectives and targets

Links with other standards

Buildings, Land, Plant and non-medical Equipment
Fleet and Transport Management
Management of Purchasing and Supply
Waste Management
Decontamination of Re-usable Medical Devices

CRITERION 5

The risk management process contained within the risk management standard is applied to the management of environmental risk.

Source

- Standards Australia (2004) *Risk Management AS / NZS 4360:2004*. Standards Association of Australia. Strathfield NSW

Guidance

Building on the environmental review, environmental risks should be systematically identified and recorded on a continuous basis. Environmental risks can be systematically identified using a number of approaches including:

- Review of environmental monitoring results
- Review of compliance with legislation
- Review of environmental audit reports
- Workshops with staff

The following risk management elements should be in place:

- All identified risks should be documented as part of a 'risk register' and systematically assessed and prioritised
- Environmental risk treatment plans should be developed and implemented (in order of priority and alongside other risk treatments which are necessary to deal with wider risks faced by the organisation, where appropriate) in order to minimise risk
- Risks and the effectiveness of implemented risk treatments should be monitored and reviewed on a continuous basis
- Senior management and the Board should be informed of any significant risks and associated risk treatment plans
- All relevant staff, including those on fixed term contracts, and other relevant stakeholders should receive information on systems in place to minimise environmental management risks
- Where appropriate, staff training should be undertaken

Good records need to be maintained at all times.

Examples of Verification

- Risk Register
- Risk treatment plans
- Staff training/information log
- Correspondence with stakeholders
- Environmental impact assessments

Links with other standards

Risk Management

CRITERION 6

There is access to up-to-date information on environmental legislation and guidance to all within the organisation who require the information.

Source

- HSS (PPM) 3/02 Corporate Governance: Statement on Internal Control
- HSS (PPM) 4/05 AS/NZS 4360: 2004 – Risk Management
- HSS (PPM) 8/02 Risk Management in the Health and Personal Social Services

Guidance

Access to legislation and guidance is essential for the organisation to carry out the statutory duties imposed upon it by law and mandatory duties imposed by the Department of Health, Social Services and Public Safety.

There are many sources of information on legislation and environmental management guidance, including books and, through subscriptions to specialist information providers, of CD-ROMs containing the full text. Her Majesty's Stationery Office web site contains up to date information on all Northern Ireland legislation (www.hmso.gov.uk)

As does the Environment and Heritage Service (www.ehsni.gov.uk) Useful information is available from the Action Energy (formerly the Energy Efficiency Best Practice Programme) Help line (tel: 0800 585 794)

Several sources can be used to identify environmental regulations and ongoing changes, including:

- Government departments, including the Department of Health, Social Services and Public Safety and its agencies
- Professional institutions
- Subscriptions to professional journals and/or services.
- Sharing of information with other HSS bodies
- European Law websites

Examples of Verification

- Library
- CD-ROMs
- Internet access

Links with other standards

All standards (generic criterion)

CRITERION 7

Appropriate training relevant to the achievement of environmental policies, objectives and targets is provided to all staff within the organisation.

Source

- British Standards Institution BS EN ISO 14004 (1996) *Environmental management systems – General guidelines on principles, systems and supporting techniques*. BS. 14004:1996. London, BSI
- NHS Estates (2002) *New environmental strategy for the National Health Service*. NHS Estates, Leeds

Guidance

Part of the requirements for the effective implementation of an environmental management system is the training of all staff in environmental awareness.

The awareness training should cover the importance of conformance to an environmental policy, significant environmental effects, roles and responsibilities for environmental management functions, and the consequences of non-conformances.

Staff performing particular environmental management functions (e.g. energy management, water management, land management etc.) should be appropriately trained and their competencies recorded.

The organisation should also require that contractors working on its behalf are able to demonstrate that their employees have the requisite training.

There should be integration of environmental awareness training into mandatory on going training programmes.

Examples of Verification

- Training needs analysis
- Training records
- Job description
- Individual appraisal records

Links with other standards

Human Resources

CRITERION 8

Key indicators capable of showing improvements in environmental management and the management of associated risks are used at all levels of the organisation, including the board, and the efficacy and usefulness of the indicators is reviewed regularly.

Source

- British Standards Institution BS EN ISO 14031; 2000 *Environmental Performance Evaluation Guidelines*. BS. 14031:2000. London, BSI

Guidance

The organisation should develop indicators, which demonstrate environmental management performance. One indicator is the degree of compliance with this standard. Ideally the indicators should be designed to demonstrate improvement in environmental management performance over time. The number of indicators devised should be sufficient to monitor key environmental concerns (e.g.CO₂ emissions). Some of the information already being collected via the Estates Returns and the NHS Environmental Assessment Tool (N.E.A.T.) system may be utilised in the process of indicator development. It is not necessarily the case that the Board will use all indicators. The Board should select those which are useful for ensuring that the internal controls are working satisfactorily and environmental management services are meeting their objectives.

Examples of Verification

- Indicators
- Evidence of usage at all levels
- Feedback through the Estates Returns and NHS Environmental Assessment Tool (N.E.A.T.) system performance monitoring reports

Links with other standards

All standards (generic criterion)

CRITERION 9

The system in place for environmental management, including risk management arrangements, is monitored and reviewed by management and the board in order to make improvements to the system.

Source

- NHS Executive (1995) NHS Internal Audit Manual 1995. NHS Executive, London

Guidance

It is the responsibility of the Chief Executive and the Board to monitor and review all aspects of the environmental management system, including:

- Accountability arrangements
- Processes, including risk management arrangements
- Capability (technical competences)
- Outcomes
- Internal audit findings

The Risk Management Committee will play a significant role in monitoring and reviewing all aspects of the system as a basis for establishing significant information that should be presented to, and dealt with by the Board. The Audit Committee should review internal audit findings.

Examples of Verification

- Internal audit report(s) e.g. Corporate Greencode Management Audit Reports
- Risk Management Committee minutes
- Audit Committee minutes

Links with other standards

All standards (generic criterion)

CRITERION 10

The Board seeks independent assurance that an appropriate and effective system of managing environmental risks is in place and that the necessary level of controls and monitoring are being implemented.

Source

- British Standards Institution BS EN ISO 14010 (1996) *Guidelines for environmental auditing – general principles*. BS. 14010:1996. London, BSI
- British Standards Institution BS EN ISO 14011 (1996) *Guidelines for environmental auditing – Audit procedures- Auditing of environmental management systems*. BS. 14011:1996. London, BSI
- British Standards Institution BS EN ISO 14012 (1996) *Guidelines for environmental auditing – Qualification Criteria for environmental auditors*. BS. 14012:1996. London, BSI
- NHS Executive (1999) *Guidelines for Implementing Controls Assurance in the NHS: Guidance for Directors*. NHS Executive, London
- HSS (PPM) 8/2002 – Risk Management in the Health and Personal Social Services.
- HSS (PPM) 13/2002 – Governance in the HPSS: Risk Management.
- HSS (PPM) 5/2003 – Governance in the HPSS: Risk Management and Controls Assurance. Northern Ireland
- *NHS Executive (1995) NHS Internal Audit Manual 1995. NHS Executive, London*

Guidance

Management should consider the range of independent internal and external assurance available, and avoid duplication and omission.

The adequacy of the independent assurance will depend upon the scope and depth of the work performed, bearing in mind its timeliness and the competency of the staff performing it. The level of reliance that can be placed upon such assurances should consider, among other things, the professional standing of the assurer, their level of independence, and whether they could reasonably expect to provide an objective opinion. It is important that any review that takes place results in a report, recommendations for action where necessary, and the retention of sufficient evidence to enable other potential reviewers to rely upon the work already undertaken. The reports should be made to the appropriate sub-committee of the Board.

Management arrangements will include an internal audit function, as well as other quality control and assurance functions such as clinical audit. The internal audit function is required to give an opinion to the Board on the adequacy and effectiveness of the overall system of internal control. In doing so, they will seek to work with, and rely on the work of, other review bodies as far as is practical.

The HPSS is given external assurance by such bodies as:

- External auditors, as appointed by the Audit Commission
- Health & Personal Social Services Regulation and Improvement Authority (HPSSRIA) (from 2005)

More specific assurance for this standard may be gained from visits by:

- Environment & Heritage Service DOE
- Health and Safety Executive

Examples of Verification

- Schedule of planned reviews
- Copy of reports
- Committee minutes
- Action plans
- Notes of follow up of actions
- Evidence file
- Details of staff involved in the review

Links with other standards

All standards (generic criterion)