



دائرة الصحة
DEPARTMENT OF HEALTH

**Department of Health - Abu Dhabi
Enhancement of Abu Dhabi Quality Index: Muashir**

***Emerald Sustainability Index - Measure
Cards***

Issue: June 2023

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1. Executive Summary

The DOH Health Facility Guidelines for Emerald Sustainability Index is focussed on sustainability and green building initiatives specifically for healthcare.

Abu Dhabi construction industry is already covered by the requirement of Estidama. However, these requirements are not healthcare-specific. Part S of the DOH Guidelines should be seen as complementary to Estidama and a natural extension of the other components of the Guidelines.

It is hoped that through the Emerald Sustainability Index, the Healthcare Industry will introduce initiatives and features that will put the healthcare facilities at the forefront of innovation in sustainability.

The DOH approvals will indicate the level of Sustainability achieved. Dimensions must reflect performance across the 3 pillars prioritized under DoH's sustainability goals to achieve net zero.

The guidance sets out the full definition and method of calculation for Emerald Sustainability Index - Measure Cards.

For enquiries about this guidance, please contact jawda@doh.gov.ae

This document is subject for review and therefore it is advisable to utilize online versions available on the DOH website at all times.

Published: March 2023

2. Introduction

2.1 The Department of Health– Abu Dhabi (DOH) is the regulative body of the Healthcare Sector in the Emirate of Abu Dhabi and ensures excellence in Healthcare for the community by monitoring the health status of the population. DOH is mandated:

- To achieve the highest standards in health curative, preventative and medical services and health insurance in the Emirate.

Emerald Sustainability Index - Measure Cards

- To lay down the strategies, policies and plans, including future projects and extensions for the health sector in the Emirate, and to follow-up their implementation
- To apply the laws, rules, regulations and policies which are issued as they are related to its purposes and responsibilities, in addition to what is issued by the respective international and regional organizations in line with the development of the health sector.
- To follow up and monitor the operation of the health sectors, to achieve and exemplary Standard in the provision of health, curative, preventive and medicinal services and health insurance

2.2 DOH defines the strategy for the health system, monitors and analyses the health status of the population and performance of the system. In addition, DOH shapes the regulatory framework for the health system, inspects against regulations, enforces standards, and encourages adoption of world – class best practices and performance targets by all healthcare service providers in the Emirate of Abu Dhabi.

2.3 DOH also drives programs to increase awareness and adoption of healthy living standards among the residents of the Emirate of Abu Dhabi in addition to regulating scope of services, premiums and reimbursement rates of the health system in the Emirate of Abu Dhabi.

2.4 The Health System of the Emirate of Abu Dhabi is comprehensive, encompassing the full spectrum of health services and is accessible to all residents of Abu Dhabi. The system is driven towards excellence through continuous outcome improvement culture and monitoring achievement of specified indicators. Providers of health services are independent. Predominately private and follow highest international quality standards. The system is financed through mandatory health insurance.

In doing so DOH will:

- Drive structure, process and outcome improvements across health sector
- Put people first and champion their rights
- Focus on quality and act swiftly to eliminate poor quality of care
- Work with Stakeholders and apply fair processes.
- Gather information and utilize knowledge and expertise to improve care.

- Link the care to payment in a way that results in a continuous improvement and maximize the value of the care provided in Abu Dhabi.

3. Planning for data collection and submission

In planning for data collection and submission Healthcare must adhere to reporting, definition and calculation requirements as set out in this guidance. Healthcare providers must also consider the following:

- Nominate responsible data collection and quality leads(s).
- Ensure data collection leads are adequately skilled and resourced.
- Understand and identify what data is required, how it will be collected (sources) and when it will be collected.
- Create a data collection plan.
- Ensure adequate data collection systems and tools are in place.
- Maintain accurate and reliable data collection methodology.
- Data collation, cleansing and analysis for reliability and accuracy.
- Back up and protect data integrity.
- Have in place a data checklist before submission.
- Submit data on time and ensure validity.
- Review and feedback data findings to the respective teams in order to promote performance improvement.
- Failing to submit valid data will be in breach of the licensing condition and could result in fines being applied, penalties associated with performance or revoke of license.
- When needed, documentation and tracks will be provided instantly to DOH, or their representative, to assure DOH that all due processes are being followed in collecting, analyzing, validating and submitting your performance

4. About this Guidance

“Emeral Sustainability Index”

This guidance sets out to contribute to a healthier environment by implementing Sustainability Standards without compromising healthcare principles and concerns. The guidance sets out the definitions, parameters and frequency by which JAWDA Quality indicators will be measured and submitted to DOH and will ensure Healthcare Providers provide safe, effective and high quality services.

Q. Who is this guidance for?

All DOH Licensed Healthcare general and specialist Hospital Providers in the Emirate of Abu Dhabi

Q. How do I follow this guidance?

Each Hospital will nominate one member of staff to coordinate, collect, quality control, monitor and report relevant Inpatient data as per **communicated dates**. The nominated healthcare facility lead must in the first instance e-mail their contact details (if different from previous submission) to JAWDA@doh.gov.ae and submit the required quarterly quality performance indicators through Online Portal.

Q. What are the Regulation related to this guidance?

- Legislation establishing the Health Sector
- As per DOH Health Facility Guidelines 2022 Part S – Sustainability, this guidance applies to all DOH Licensed Hospital Healthcare Facilities in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E001

| | |
|--|--|
| KPI Description (title): | Annual Energy Consumption Per Patients Covered |
| Dimension | Operations |
| Definition: | Measure of an organization's energy consumption |
| Calculation: | <p><u>Numerator:</u> Total Energy consumption (megawatt hours [MWh])</p> <p><u>Denominator:</u> Total number of patients (All patients including outpatient and inpatient).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Megawatt hours [MWh] Per patients |
| International comparison if available | <p>https://www.health.vic.gov.au/planning-infrastructure/energy-efficiency-in-hospitals</p> <p>Energy Use in Hospitals (energystar.gov)</p> |
| Desired direction: | Improving energy efficiency means using less energy to achieve the same level of outcome |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Energy meters related to ADDC (Abu Dhabi Distribution Company) |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E002

| | |
|--|--|
| KPI Description (title): | Percent of Renewable Energy |
| Dimension | Operations |
| Definition: | Organization's effort to reduce its use of non-renewable energy |
| Calculation: | <p><u>Numerator:</u> Total annual MWh generated from renewable sources</p> <p>Definition: Renewable energy is energy derived from natural sources that are replenished at a higher rate than they are consumed:</p> <ul style="list-style-type: none"> • SOLAR ENERGY • WIND ENERGY • GEOTHERMAL ENERGY • HYDROPOWER • OCEAN ENERGY • BIOENERGY <p><u>Denominator:</u> Total annual megawatt hours [MWh]</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | megawatt hours [MWh] |
| International comparison if available | https://www.un.org/en/climatechange/what-is-renewable-energy https://u.ae/en/information-and-services/environment-and-energy/water-and-energy/types-of-energy-sources/solar-energy |
| Desired direction: | Higher the better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Energy meters related to ADDC (Abu Dhabi Distribution Company) |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E003

| | |
|--|--|
| KPI Description (title): | Annual Carbon Emissions Per Patients Covered |
| Dimension | Operations |
| Definition: | Measure of an organization's GHG emissions across all scopes |
| Calculation: | <p><u>Numerator:</u> Annual carbon emissions across all scopes (1,2,3) (CO2Eq)</p> <p>Scope 1 (Direct) GHG emissions</p> <ul style="list-style-type: none"> All Scope 1 emissions must be accounted for. These occur from sources owned or controlled by the organisation. Examples include emissions as a result of combustion in boilers owned or controlled by the organisation and fugitive emissions from equipment such as air conditioning units. This includes emissions from organisation-owned fleet vehicles (including vehicles on finance leases). An analysis of related gas consumption, in kWh, must also be included. <p>Scope 2 (Energy indirect) emissions.</p> <ul style="list-style-type: none"> All Scope 2 emissions must be accounted for. These results from energy consumed which is supplied by another party (e.g. electricity supply in buildings or outstations), and purchased heat, steam and cooling. An analysis of related energy consumption, in kWh, must also be included. <p><u>Denominator:</u> Annual Total number of patients (All patients including outpatient and inpatient).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Per patients |
| International comparison if available | https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832776/sustainability_reporting_guidance_2019-20.pdf Scope 1 and Scope 2 Inventory Guidance US EPA |
| Desired direction: | Lower the better |
| Notes for all providers | |
| Data sources and guidance: | - DOH Health Facility Guidelines 2022 Part S – Sustainability |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E004

| | |
|--|---|
| KPI Description (title): | Percent of Virtual Patient Visits |
| Dimension | Operations |
| Definition: | Organization's efforts to reduce its carbon intensity by implementing telehealth initiatives |
| Calculation: | <p><i>Numerator:</i> Count of virtual patient visits</p> <p>Telehealth procedure codes: 99441, 99442, 99443, 99446, 99447, 99448, 99449, 01-01, 01-02, 01-03, 01-04</p> <p><i>Denominator:</i> Count of total patient visits or encounters (inpatient + outpatient + virtual)</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Patient Visits/Encounters |
| International comparison if available | <p>https://health.ucdavis.edu/news/headlines/telehealth-cuts-health-cares-carbon-footprint-and-patients-costs-during-pandemic/2023/01</p> <p>https://www.healthaffairs.org/doi/10.1377/hlthaff.2020.01103</p> |
| Desired direction: | Higher is Better |
| Notes for all providers | |
| Data sources and guidance: | - DOH Health Facility Guidelines 2022 Part S – Sustainability |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E005

| | |
|--|---|
| KPI Description (title): | Energy Use by Intensities |
| Dimension | Operations |
| Definition: | <p>Energy Use Intensity (EUI) captures a building’s annual energy use as a function of its size. It is a measure that determines the building’s energy performance and is useful for benchmarking and setting targets.</p> <p>Energy data reported by facilities should be in Kwh to maintain consistency, and so various energy types could be compiled and then divided by the reported floor area (m2) to calculate a final EUI (Kwh/m2). The total average EUI across all hospitals was calculated to be 2.8 Kwh/m2/year.</p> |
| Calculation: | <p><u>Numerator:</u> Total energy used (Kwh)</p> <p><u>Denominator:</u> Floor space (m2)</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Kwh/M2 |
| International comparison if available | <p>2019-Green-Hospital-Scorecard-Report.pdf (greenhealthcare.ca) Energy Use in Hospitals (energystar.gov) Measuring hospital energy performance HFM Health Facilities Management (hfmagazine.com)</p> |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Energy meters related to ADDC (Abu Dhabi Distribution Company) |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E006

| | |
|--|---|
| KPI Description (title): | Water Use Intensities |
| Dimension | Operations |
| Definition: | <p>Water Use Intensity (WUI) is expressed as the hospital's annual water use relative to the total conditioned floor area. It is a measure that is used to determine the facility's water performance and is useful for benchmarking and setting targets.</p> <p>Facility water data is collected in cubic meters (m³) and divided by the reported conditioned floor area (m²) to calculate a final WUI (m³/m²).</p> |
| Calculation: | <p><u>Numerator:</u> Total Water consumption (cubic meter)</p> <p><u>Denominator:</u> Reported conditioned floor area (m²)</p> <p><i>Conditioned floor area:</i> means the sum of areas of all floors in conditioned space in the structure, including basements, cellars, and intermediate floored levels measured from the exterior faces of exterior walls or from the center line of interior walls, excluding covered walkways, open roofed-over areas, porches, exterior terraces or steps, chimneys, roof overhangs and similar features.</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | m ³ /m ² |
| International comparison if available | <p>2019-Green-Hospital-Scorecard-Report.pdf (greenhealthcare.ca) HTM 07-04 Final.pdf (england.nhs.uk) Reducing water use at healthcare facilities Conditioned floor area Definition Law Insider</p> |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Water meters related to ADDC. This is reflected as well in the bills for water and electricity paid by the facility. |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E007

| | |
|--|--|
| KPI Description (title): | Non-Fossil fuel led CCHP units operated on site |
| Dimension | Infrastructure |
| Definition: | <p>To define the percentage of separate non-fossil fuel led CCHP (Combined Cooling, Heat and Power) units operated on the site.</p> <p>Combined cooling, heat & power (CCHP), also known as trigeneration, is an extension of combined heat & power (CHP). While CHP only generates electricity and heat, CCHP adds cooling to the list. In other words, trigeneration or CCHP means some of the heat that is produced is also used to generate cooling energy.</p> <p>Inclusions: CCHP operating on;</p> <ul style="list-style-type: none"> o Oil o Gas o Coal |
| Calculation: | <p><i>Numerator:</i> Total number of separate non-fossil fuel led CCHP units operated on the site</p> <p><i>Denominator:</i> Total number of CCHP units operated on the site</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | <p>Estates Returns Information Collection, Summary page and dataset for ERIC 2021/22 - NDRS (digital.nhs.uk) CCHP: Combined Cooling, Heat & Power energyst.com</p> |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Sections: - Commitment to Carbon Footprint Reduction (GHG) & Net Zero Carbon - Renewable Energy |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E008

| | |
|--|--|
| KPI Description (title): | Percent of Employees Trained on Environmental and Social Health Drivers |
| Dimension | Infrastructure |
| Definition: | Organization's actions to raise awareness on environmental and social health drivers among employees |
| Calculation: | <p><u>Numerator:</u> Number of employees trained on environmental and social health drivers</p> <p>Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.</p> <p><u>Denominator:</u> Total Employees (include anyone providing care or services at the site).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Number of employees |
| International comparison if available | https://www.anthem.com/blog/your-health-care/social-drivers-of-health-and-how-they-affect-you/ |
| Desired direction: | Higher is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Abu Dhabi Occupational Safety and Health System - Abu Dhabi Public Health Center (ADPHC) |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E009

| | |
|--|---|
| KPI Description (title): | Percent of Trained on Climate Change or Sustainability |
| Dimension | Infrastructure |
| Definition: | <p>Extent to which medical and non-medical staff are trained on the relationship between climate/environment and human health conditions/illnesses/diseases</p> <p>Geneva Sustainability Masterclass: An in-person, one-day learning programme which will allow to hone hospital leaders' competencies and provide key information and tools to assess, plan and address the required organizational changes.</p> <p>The learning objectives of the Geneva Sustainability Masterclasses are to:</p> <ul style="list-style-type: none"> • Gain a deeper understanding of the causes and long-term threats of environmental hazards to human health & health equity • Identify health and social co-benefits associated with environmentally sustainability • Evaluate options for strengthening organizations' mitigation and resiliency strategies • Identify the most important next steps for their organization to take in pursuing an environmental sustainability strategy |
| Calculation: | <p><u>Numerator:</u> Number of employees that have attended at least one training on climate change or sustainability.</p> <p>Inclusion: can be Attendance Certificate of Healthcare Providers in Geneva Sustainability Masterclasses OR other trainings.</p> <p><u>Denominator:</u> Total Employees (include anyone providing care or services at the site).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Number of employees |
| International comparison if available | <p>https://greenbusinessbureau.com/business-function/executive/executive-guide/corporate-sustainability-training-an-executive-guide/</p> <p>https://www.sustainability.gov/federalsustainabilityplan/workforce.html</p> |

Emerald Sustainability Index - Measure Cards

| | |
|-----------------------------------|---|
| Desired direction: | Higher is better |
| Notes for all providers | |
| Data sources and guidance: | - DOH Health Facility Guidelines 2022 Part S – Sustainability |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E010

| | |
|--|--|
| KPI Description (title): | Energy Efficient Schemes Costs |
| Dimension | Operations |
| Definition: | <p>Annual amount of all capital (not revenue) invested in energy efficiency projects/programs</p> <p>Inclusions:</p> <ul style="list-style-type: none"> • All large- and small-scale capital energy schemes such as the installation of Combined Cooling, Heat, and Power (CCHP) units, LED lighting, photovoltaic (PV) solar etc.; • All discrete projects such as improvements to Building Energy Management systems or personal computer (PC) power management; • All items such as energy efficiency focused behavioral change programs; • Where refurbishment schemes have included larger elements e.g., CCHP or complete lighting replacements. <p>Exclusions:</p> <ul style="list-style-type: none"> • Public Sector Grants • Charitable funds |
| Calculation: | <p><i>Numerator:</i> Annual amount of all capital (not revenue) invested in energy efficiency projects /programmes</p> <p><i>Denominator:</i> Annual amount of all capital (not revenue) invested by the organization in a year.</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | Estates Returns Information Collection, Summary page and dataset for ERIC 2021/22 - NDRS (digital.nhs.uk) Greener NHS (england.nhs.uk) Financial Value Calculator ENERGY STAR |
| Desired direction: | Higher is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Facility financial report |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E011

| | |
|--|---|
| KPI Description (title): | LED Lighting Coverage |
| Dimension | Infrastructure |
| Definition: | <p>Percentage of Gross internal area that is covered by working LED lighting</p> <p>Inclusions:</p> <ul style="list-style-type: none"> • Temporary buildings; • Embedded education and training facilities; • University accommodation; • Underground and multi-story car parks; • Areas temporarily in the possession of building contractors that is either owned or defined in the terms of a lease <p>Exclusions:</p> <ul style="list-style-type: none"> • Leased-out areas; • Open car parks; • Premises that are vacant and awaiting disposal |
| Calculation: | <p><u>Numerator:</u> Gross internal area that is covered by working LED lighting</p> <p><u>Denominator:</u> Gross internal area lit.</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | <p>Estates Returns Information Collection, Summary page and dataset for ERIC 2021/22 - NDRS (digital.nhs.uk)</p> <p>Greener NHS (england.nhs.uk)</p> <p>LED LIGHTING IN HOSPITALS Final.pdf (paho.org)</p> |
| Desired direction: | Higher is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Facility Management Department Reports and Inspections |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E012

| | |
|---------------------------------|---|
| KPI Description (title): | Biomedical Waste Generation |
| Dimension | Disposal |
| Definition: | <p>It represents the percentage of biomedical waste in comparison to the total waste generated by a healthcare organization.</p> <p>Group A Medical Waste Anatomical or pathological waste, waste contaminated with human blood or other body fluids, excreta, vomit, human tissue, wastes from contagious diseases, dirty bandages, bed sheets, animal remains and all other materials on which animal lay or cloth or used by animal whether contaminated or not and mortuary wastes.</p> <p>Group B Medical Waste Sharps, usually syringes and needles, surgical tools, different medicine and medical equipment vessels, broken glass and all other sharp equipments, tools and materials.</p> <p>Group C Medical Waste Blood, tissue and microbial cultures and microbiology laboratory waste, carcasses of inoculated lab animals, stools from cholera patient or body fluid of highly infectious diseases, and mortuary waste not specified under Group A.</p> <p>Group D Medical Waste Pharmaceutical and chemical waste to which medical specifications apply.</p> <p>Group E Medical Waste Disposable linings used for patient beds, caps of bottles for receiving and storing blood, urine, urine diapers, bags or vessels used for receiving stomach waste and similar wastes.</p> <p>Group F Medical Waste Waste resulting from treatment with radio active materials and wastes resulting from all operations related to radio active materials.</p> <p>General Waste Non-Hazardous Waste; similar to Domestic waste</p> <p>Radioactive waste: such as products contaminated by Radionuclides including radioactive diagnostic material or radiotherapeutic materials</p> |

Emerald Sustainability Index - Measure Cards

| | |
|--|--|
| Calculation: | <p><i>Numerator:</i> Weight of generated biomedical waste in tons (Group A-F)</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • General waste • Radioactive waste <p><i>Denominator:</i> Total weight of all generated waste in tons (e.g. Medical and Non-Hazardous).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | 2019-Green-Hospital-Scorecard-Report.pdf (greenhealthcare.ca) www.canadacoalition.ca Health-care waste (who.int) |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - WasteReductionGuidelinesEn.pdf (tadweer.gov.ae) - Clinical Medical Waste Management Program in Abu Dhabi (cwtme.ae) - Health Sector EHSMS Standards- List of content.pdf - PPR/HCP/P0002/07 (Medical Waste Management in Health Care Facilities) - Facility Management Reports and Waste Invoices generated by the finance department to the Waste Disposal Contracted Company. |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E013

| | |
|--|--|
| KPI Description (title): | Non-Hazardous waste generation |
| Dimension | Disposal |
| Definition: | It represents the percentage of Non-Hazardous waste (general waste) in comparison to the total waste generated by a healthcare organization. |
| Calculation: | <p><i>Numerator:</i> Weight of generated Non-Hazardous waste in tons</p> <p>Non-hazardous or general waste: waste that does not pose any particular biological, chemical, radioactive or physical hazard</p> <p><i>Denominator:</i> Total weight of all generated waste in tons (e.g. Medical and Non-Hazardous).</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | 2019-Green-Hospital-Scorecard-Report.pdf (greenhealthcare.ca) www.canadacoalition.ca |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - WasteReductionGuidelinesEn.pdf (tadweer.gov.ae) - Facility Management Reports and Waste Invoices generated by the finance department to the Waste Disposal Contracted Company. |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E014

| | |
|--|--|
| KPI Description (title): | Recyclable waste generation |
| Dimension | Disposal |
| Definition: | It represents the percentage of recyclable waste in comparison to the total waste generated by a healthcare organization. |
| Calculation: | <p><i>Numerator:</i> Weight of generated recyclable waste in tons</p> <p>Inclusions:</p> <ul style="list-style-type: none"> • Plastic • Glass • Metal/cans • Paper • Construction and demolition recyclable material <p><i>Denominator:</i> Total weight of all generated waste in tons</p> |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | 2019-Green-Hospital-Scorecard-Report.pdf (greenhealthcare.ca) www.canadacoalition.ca |
| Desired direction: | Higher is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - WasteReductionGuidelinesEn.pdf (tadweer.gov.ae) - Facility Management Reports and Waste Invoices generated by the finance department to the Waste Disposal Contracted Company |

Emerald Sustainability Index - Measure Cards

Type: Core Indicator

Indicator Number: E015

| | |
|--|--|
| KPI Description (title): | Food Waste Cost |
| Dimension | Disposal |
| Definition: | Invoiceable costs of all food waste. The costs entered should be directly linkable to invoices received and entered by the finance department for waste costs. |
| Calculation: | <i>Numerator:</i> Cost of Food Waste <i>Denominator:</i> Total Cost of All Organization's Waste Disposal per year |
| Reporting Frequency: | Annual |
| Unit of Measure: | Percentage |
| International comparison if available | Estates Returns Information Collection, Summary page and dataset for ERIC 2021/22 - NDRS (digital.nhs.uk) Greener NHS (england.nhs.uk) https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2022/06/Devon-DPT-Green-Plan-2022.pdf https://ojin.nursingworld.org/table-of-contents/volume-27-2022/number-2-may-2022/articles-on-previously-published-topics/hospital-food-waste/ https://www.blog-qhse.com/en/food-waste-sorting-in-hospitals-and-care-homes-where-to-start |
| Desired direction: | Lower is better |
| Notes for all providers | |
| Data sources and guidance: | <ul style="list-style-type: none"> - DOH Health Facility Guidelines 2022 Part S – Sustainability - Invoices paid for food waste disposal through finance department |