



Chemicals

Introduction

Chemical minimization programs are an extremely important part of any sustainability program. The use of certain chemical constituents in products and materials can have significant health repercussions for building occupants, patients, staff, and the community. Please use this section of the application to highlight how the facility is addressing the use and minimization/elimination of certain **chemicals of concern**.

Policy

- 1.** Does the facility have **chemical or purchasing policies** that identify and avoid **specific chemicals of concern** contained in products that may be hazardous to human health and the environment?

Yes

- 1.a** Please attach chemical or purchasing policies that address **chemicals of concern**:

Multiple policies can be attached via **zip file**, if necessary.

- 1.b** Please check all **chemical and materials** included in the policy.

(Please note that other environmental attributes, such as water, energy, and packaging are evaluated in the EPP portion of this application.)

- ☐ Bisphenol A and its structural analogues
- ☐ CA Proposition 65 listed chemicals (carcinogens and reproductive toxicants)
- ☐ Flame retardants, including chlorinated, brominated, and phosphate-based flame retardants
- ☐ Formaldehyde
- ☐ Latex
- ☐ Lead
- ☐ Mercury
- ☐ Persistent, Bioaccumulative, and Toxic substances (PBTs)
- ☐ Perfluorinated compounds (PFAS)
- ☐ Phthalates (DEHP, BBP, DnHP, DIDP, DBP, DINP, and DiBP)
- ☐ Polystyrene
- ☐ Polyvinyl chloride, or PVC
- ☐ Triclocarban
- ☐ Triclosan
- ☐ Volatile organic compounds (VOCs)
- ☒ Other prioritized chemical constituents

- 1.b.a** Other prioritized chemical or material (#1):

- 1.b.b** Other prioritized chemical or material (#2):

- 1.b.c** Other prioritized chemical or material (#3):

- 2.** Does the facility contract with an outside vendor for environmental services (EVS)?

- ☒ Yes
☐ No

- 2.a** Please indicate the facility's contracted vendor for environmental services:

- ☐ Aramark
☐ Crothall
☐ Sodexo
☒ Other

2.a.a If other contracted vendor, please indicate which company:

Green Cleaning

3. Has the facility conducted an inventory **in the last 18 months** of all products used at the facility for cleaning and disinfection of surfaces?

- ☐ Yes
☐ No

Conducting an inventory can identify where the hospital may be using multiple products for the same purpose in different areas of the institution. Standardization of cleaning and disinfection products can lower costs and improve training effectiveness and safety.

4. Is the facility actively working on the **transition to third-party certified green cleaning chemicals**, in alignment with Practice Greenhealth's **Green Cleaning Goal**?

- ☐ Yes
☐ No

*The facility should not respond yes to this question unless it has specifically tasked a person/team with this product(s) transition. For more comprehensive guidance about selecting green cleaning chemicals, see Practice Greenhealth's [green cleaning resources](#).

5. Does the facility utilize any **Green Seal or UL ECOLOGO-certified** cleaning products?

Select an option... ▾

6. Does the facility utilize **automatic scrubbing machines** that use **only water** for floor cleaning?

- ☒ Yes
☐ No

6.a Was your facility able to reduce or replace other cleaning chemical use as a result of automatic scrubbing machines?

- ☐ Yes
☐ No

7. Has Environmental Services collaborated with the **Infection Control Committee** to identify areas where use of **disinfectants can safely be minimized or eliminated**?

- ☐ Yes
☐ No

Safer Hand Hygiene

8. Is the facility actively working on the elimination of hand hygiene products that contain triclosan and triclocarban, in alignment with Practice Greenhealth's **Safer Hand Hygiene Goal**?

- ☐ Yes
☐ No

*The facility should not respond yes to this question unless it has specifically tasked a person/team with this product transition.

Hand hygiene products include any product used for hand hygiene, including liquid soap, bar soap, foam soap, hand sanitizer, hand rub, antiseptic, or lotion.

9. Has the facility **completely eliminated the purchase and use** of antimicrobial hand hygiene products **that contain triclosan or triclocarban** throughout the facility?

- ☐ Yes
☐ No

10. Has the facility eliminated the purchase and use of hand hygiene products that contain any antimicrobial in **non-clinical areas**?

- ☐ Yes
☐ No

Sterilization and Disinfection

11. Has the facility eliminated the use of the high-level disinfectant **glutaraldehyde** and moved to safer alternatives (as defined by the **ICRA process** involving Infection Prevention & Control and Employee Health)?

- ☒ Yes

☐ No

An **Infection Control Risk Assessment (ICRA)** is a multidisciplinary, organizational, documented process that after considering the facility's patient population and program The **ICRA process** focuses on reduction of risk from infection, acts through phases of facility planning, design, construction, renovation, facility maintenance, and coordinates and weighs knowledge about infection, infectious agents, and care environment, permitting the organization to anticipate potential impact.

11.a What alternatives to glutaraldehyde does the facility use?

- ☐ OPA (ASP Cidex OPA, Metrex Metricide OPA)
☐ Hydrogen peroxide
☐ Peracetic acid
☒ Other

11.a.a Please describe other alternatives to glutaraldehyde being used:

12. Has the facility **eliminated** the use of the sterilant **ethylene oxide (EtO)** onsite ?

- ☒ Yes
☐ No

12.a What alternatives to EtO does the facility use?

- ☐ Steam Sterilization
☐ Ozone plasma
☐ Low temperature hydrogen peroxide gas plasma
☐ Peracetic Acid
☒ Other

12.a.a Please describe other alternatives to EtO being utilized:

Integrated Pest Management

Integrated Pest Management (IPM) is an approach to managing pests that protects health and the environment. Learn more at: [IPM Frequently Asked Questions](#)

13. Has the facility **reduced or eliminated** the use of **chemical pesticides** by implementing an IPM program?

- ☒ Yes
☐ No

13.a Please describe IPM program:

PVC and DEHP

14. Is the facility actively working to reduce the purchase of medical products containing **PVC** and **DEHP**, in alignment with Practice Greenhealth's **PVC and DEHP Reduction Goal**?

- ☐ Yes
☐ No

*The facility should not respond yes to this question unless it has specifically tasked a person/team with this product transition.

15. Has the facility eliminated both **PVC** and **DEHP** from at least **two** product lines?

Yes

15.a Please select all product lines that are **both PVC** and **DEHP**-free:

- ☐ Breast Pumps and accessories
☐ Enteral Nutrition Products
☐ Enteral Tubes
☐ General Urological
☐ Gloves
☐ Parenteral Infusion Devices and Sets
☐ Respiratory Therapy Products
☐ Vascular Catheters
☒ Other

For more information, see the Practice Greenhealth **PVC and DEHP Elimination Goal** guidance.

15.a.a Please list other **PVC** and **DEHP-free** product lines:

16. Is the facility actively working to achieve a **DEHP-free NICU**?

Select an option...

17. Is the facility actively working to achieve a **PVC-free NICU**?

Select an option...

Healthy Interiors

18. Is the facility actively working to purchase furnishings and furniture **that eliminate the use of all** of the following target chemicals: flame retardants, formaldehyde, perfluorinated compounds, **PVC** (vinyl) and antimicrobials, in alignment with Practice Greenhealth's **Healthy Interiors Goal**?

Select an option...

*The facility should not respond yes to this question unless it has specifically tasked a person/team with these product transitions.

Please report dollars spent on furnishings and furniture (including medical and non-medical) **that eliminate the use of ALL** of the following target chemicals: flame retardants, formaldehyde, perfluorinated compounds, **PVC** (vinyl) and antimicrobials. Please also enter the **total dollars spent on conventional** furnishings and furniture that **do not avoid chemicals of concern** to determine **% Spend on Healthy Interiors** in Table C below.

Mercury

19. Has the facility won the **Making Medicine Mercury Free Award (MMMF)**?

☒ Yes

☐ No

19.a Which year was the Award won?

19.b Does the facility **periodically inventory purchasing practices** to make certain that mercury-containing devices are not purchased and re-entering the facility?

☐ Yes

☐ No

19.c Has the facility conducted an **inventory of mercury-containing products** within the institution in **last five years**?

☒ Yes

☐ No

19.c.a Please describe inventory of mercury-containing products and results:

Other Chemicals Program Successes

Please describe below any other innovative techniques, initiatives, or success stories (not already described above) related to the reduction of **chemicals of concern** in the facility in 2019. Please feel free to provide commentary and/or attach supporting files.

20. Chemicals of Concern Success 1: Please describe

21. Please attach any additional documentation (optional) for **Chemicals of Concern** Success 1:

22. Chemicals of Concern Success 2: Please describe

23. Please attach any additional documentation (optional) for **Chemicals of Concern** Success 2:

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