



REPORT
Financial statement

| | JANUARY | FEBRUARY | MARCH | 2019 APRIL | MAY | JUNE | JULY |
|----|-------------|-------------|-------------|---------------|--------------|--------------|--------------|
| 1 | \$212,000 | \$170,000 | \$180,000 | \$215,000 | \$292,470 | \$412,380 | \$672,180 |
| 2 | \$30,225 | \$281,800 | \$300,980 | \$356,480 | \$484,810 | \$683,580 | \$1,114,240 |
| 3 | \$478,360 | \$382,690 | \$420,960 | \$484,100 | \$658,280 | \$928,310 | \$1,513,150 |
| 4 | \$656,440 | \$500,000 | \$577,670 | \$660,000 | \$903,470 | \$1,273,890 | \$2,076,450 |
| 5 | \$2,000,000 | \$4,000,000 | \$6,000,000 | \$8,000,000 | \$10,000,000 | \$12,000,000 | \$14,000,000 |
| 6 | \$411,000 | \$300,000 | \$300,000 | \$400,000 | \$723,130 | \$1,019,620 | \$1,661,970 |
| 7 | \$469,250 | \$375,400 | \$412,940 | \$474,880 | \$645,840 | \$910,630 | \$1,484,330 |
| 8 | \$236,520 | \$189,220 | \$208,140 | \$239,360 | \$325,530 | \$458,990 | \$748,160 |
| 9 | \$471,580 | \$377,260 | \$414,990 | \$477,240 | \$649,040 | \$915,150 | \$1,491,700 |
| 10 | \$796,320 | \$637,060 | \$700,760 | \$805,880 | \$1,095,990 | \$1,545,350 | \$2,518,920 |
| 11 | \$212,500 | \$170,000 | \$187,000 | \$215,000 | \$292,470 | \$412,380 | \$672,180 |
| 12 | \$352,250 | \$281,800 | \$309,980 | \$356,480 | \$484,810 | \$683,580 | \$1,114,240 |

Share value

2022 Sustainability Benchmark Data

NOTES

TASKS



Introduction and methods

Practice Greenhealth’s Sustainability Benchmark Report is the premier analysis of sustainability performance data for the U.S. health care sector. The data in this report is designed to help hospitals and health systems identify sustainability opportunities by benchmarking their performance alongside other Practice Greenhealth partner hospitals. This report is organized into 11 distinct impact areas.



Leadership



Waste



Chemicals



Food



Greening the Operating Room



Transportation



Environmentally Preferable Purchasing



Energy



Water



Green Building



Climate

Each section of the report highlights a mix of qualitative performance measures (actions hospitals have taken to implement sustainability programs) and key quantitative metrics (an assessment of how well the facility is performing on different programs it has implemented). The report also includes aggregate savings or impact for a range of programs. For qualitative measures, the report presents the percent of respondents answering in the affirmative for a given question (e.g. the percent of hospitals that indicated they have a sustainable procurement policy or are purchasing alternative fuel vehicles). For quantitative metrics, Practice Greenhealth reports median performance (50th percentile) and top performance (90th percentile) points across acute-care hospitals in the data set. The report also highlights the performance for academic medical centers.

In the case of most quantitative performance metrics, the report makes an effort to standardize the measurement of sustainability performance for each category through normalization of the data in order to support more informative comparisons among hospitals. Practice Greenhealth normalizes the data based on the most statistically significant factors, allowing hospitals of different sizes and scopes to more accurately compare their sustainability performance. For example, instead of reporting total water used by institutions of a certain size, it reports water utilization per sq. ft.

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Data cohorts

The report provides several distinct cohorts of hospital data to allow for the most useful comparisons. The table below highlights the different ways Practice Greenhealth distills data for maximum comparability.

| COHORT | DESCRIPTION | COHORT SIZE |
|---|---|---------------|
| All | All hospitals with overnight beds and operating rooms that responded to a given question on either the Partner for Change or the Partner Recognition award application. | 345 hospitals |
| Small | Hospitals with fewer than 200 staffed beds. Hospitals in this cohort ranged in size from 10 to 199 staffed beds. | 167 hospitals |
| Large | Hospitals with more than 200 staffed beds. Hospitals in this cohort ranged in size from 200 to more than 1,500 staffed beds. | 176 hospitals |
| Academic medical centers | An academic medical center is typically a hospital attached to a university medical school and/or a teaching hospital affiliated with a medical school. These hospitals are training grounds for residents, medical and nursing students, Ph.D. candidates, and post-doctoral researchers. Some academic medical centers (63 of the 152) include onsite research facilities, which host laboratories and other research amenities that can contribute to their environmental footprint. | 152 hospitals |
| Academic medical center with onsite research | Hospitals that identify as academic medical centers/teaching hospitals and indicated they also have onsite research facilities. | 63 hospitals |
| Academic medical center without onsite research | Hospitals that identify as academic medical centers/teaching hospitals but indicated they do not have onsite research facilities. | 89 hospitals |
| Non- academic hospitals | Hospitals that do not identify as academic medical centers/teaching hospitals. This can include both community hospitals and federal health care facilities. | 171 hospitals |
| 90 th | The 90 th percentile is the value dividing the top 10% of high-performing hospitals from the data set. The 90th percentile informs hospitals on the long-term target, providing a data-driven determination of how well hospitals can actually perform on a given metric using valid data. | Varies |



Methods and analysis

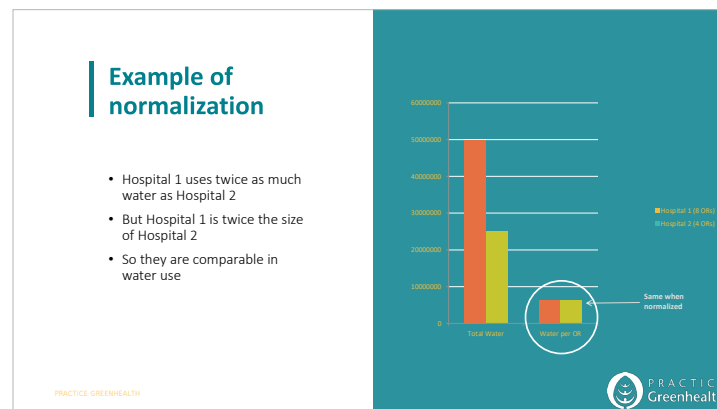
Data is from the 2021 calendar or fiscal year as reported on the 2022 Environmental Excellence Award applications. Hospitals completed the applications between November 2021 and May 2022. Practice Greenhealth reviews all data submitted by award applicants to identify outliers, which can sometimes indicate a mistake in reporting. Practice Greenhealth follows up with applicants where appropriate to inquire about outliers and to correct or remove data from the data set as necessary.

Throughout the report, the “N” (or sample size) for each group varies. This is because the “N” represents how many hospitals answered that question and can differ based on the number of hospitals reporting on that metric – not all hospitals respond to every question or provide data for every metric. Typically, the more hospitals that report on a metric (the larger the N), the better quality the data is.

Practice Greenhealth reports median values for quantitative measures, as these values typically provide a stronger basis for comparisons and benchmarking than averages and standard deviations. Averages and standard deviations can be influenced by outliers or incorrect data and can result in misleading conclusions. Median values (the middle value, or the 50th percentile) provide hospitals the chance to compare their sustainability performance, while the 90th percentile informs hospitals on a long-term target, providing a data-driven determination of how well hospitals can actually perform on a given metric. This data is then paired with analysis of the programmatic actions utilized by best performing hospitals to support improvement in these key metrics and identify potential opportunities for action.

Normalizing data

Normalizing data is an important step to allow comparisons of performance between hospitals and groups of hospitals, regardless of size or number of patients. Practice Greenhealth normalizes the data to help identify comparable metrics for each category. To normalize data is to determine how different characteristics are affected by other variables. For example, instead of looking at waste generation by tons alone, one would look at which variables might impact the amount of waste generated by a facility and then try to normalize or standardize data by those variables (e.g., tons of waste per patient day). Normalizing data not only helps compare metrics between hospitals but also helps a hospital compare their own data over a number of years, adjusting for variations in patient volume each year. Through the use of multiple regression techniques, Practice Greenhealth uses statistical analysis to determine which variables have the greatest impact on characteristics of interest that reveal which variables best correlate with each characteristic. The variables that emerge as important influences on each characteristic are called normalizing factors.



Due to the COVID-19 pandemic, applicants’ demographic data may look somewhat different than in a typical year. Many hospitals dealt with several COVID-19 surges in 2021. Similar to last year, Practice Greenhealth will analyze how the pandemic may have affected sustainability performance.

Practice Greenhealth thanks the hundreds of individuals, hospitals, facilities, and health systems that provided data for this analysis through the Environmental Excellence Awards application process, which is open to all partners of Practice Greenhealth.



Normalization factors

Practice Greenhealth analyzes each of the following normalization factors (in alphabetical order) for all of the major areas of environmental impact.

| NORMALIZER | DEFINITION | MEDIAN (50 TH PERCENTILE) |
|---|---|---|
| Adjusted patient days | Adjusted patient days (APD) take into account inpatient and outpatient activity and are generally calculated as: $APD = (\text{total patient days}) \times (\text{total patient revenue} / \text{inpatient revenue})$; where total patient revenue = inpatient + outpatient revenue. | 104,310 |
| Cleanable square feet | Cleanable square feet denotes the space routinely cleaned by environmental services. To calculate cleanable square feet when a measured value is not available, the facility can estimate that cleanable square feet = gross square feet minus walls (1.5% of gross square feet) minus sq. ft. age of non-cleanable areas (i.e. electrical closets, mechanical rooms, storage rooms). | 495,000 |
| Gross square feet/gross floor area | The gross floor area (GFA) is the total property sq. ft. age, measured between the outside surface of the exterior walls of the building(s). This includes all areas inside the building(s), including supporting areas. GFA is not the same as rentable space, but rather includes all area inside the building(s), including lobbies, tenant areas, common areas, meeting rooms, break rooms, atriums (count the base level only), restrooms, elevator shafts, stairwells, mechanical equipment areas, basements, and storage rooms. Not included in GFA: exterior spaces, balconies, patios, exterior loading docks, driveways, covered walkways, outdoor courts (tennis, basketball, etc.), parking, the interstitial plenum space between floors (which house pipes and ventilation), and crawl spaces (per ENERGY STAR Portfolio Manager glossary). | 591,223 |
| Licensed beds | The maximum number of beds a hospital is licensed to staff. | 237 |
| Operating rooms | An operating room is defined as a room in the surgical suite that meets the requirements of a restricted area and is designated and equipped for performing surgical operations or other invasive procedures that require an aseptic field. This is in contrast to a procedure room, which is defined as a room for the performance of procedures that do not require an aseptic field but may require the use of sterile instruments or supplies. | 12 |
| OR procedures | A count of total surgical cases with a primary surgical procedure(s) performed in an operating room. This count should not include the number of procedures that occur during a single surgical case, but rather the total number of surgery cases. This would be a total count of patient in OR to patient out of OR events. This count should include surgeries performed in hospital-based ORs and operationally affiliated ambulatory surgery center ORs. | 7,555 |
| Outpatient visits | A count of outpatient visits annually. An outpatient visit/use/event is any visit made during the person's reference period to a hospital outpatient department, such as a unit of a hospital (or a facility connected with a hospital) providing health and medical services to individuals who receive services from the hospital but do not require hospitalization overnight. Examples of outpatient clinics include well-baby clinics/pediatric OPD; obesity clinics; eye, ear, nose, and throat clinics; family planning clinics; cardiology clinics; internal medicine departments; alcohol and drug abuse clinics; physical therapy clinics; and radiation therapy clinics. Hospital outpatient departments may also provide general primary care. | 191,159 |
| Patient days | A unit of measure denoting lodging facilities provided and services rendered to one inpatient between the census-taking hour on two successive days (synonymous terms include inpatient day, inpatient service day, census day, bed occupancy day, occupied bed day). | 46,917 |
| Staffed beds | The number of beds available for use by patients during the reporting period. A bed means an adult bed, pediatric bed, birthing room, or newborn bed maintained in a patient care area for lodging patients in acute, long-term, or domiciliary areas of the hospital. | 207 |
| Total on-site full-time equivalents (FTEs) | Total on-site FTEs is the sum of full-time equivalent employees plus FTE physicians, FTE medical students, and FTE contracted full-time employees (such as environmental services, food services, and pharmacy services). The number of full-time equivalent workers should be computed as the total number of hours worked by all workers in a week divided by the standard hours worked by one full-time worker in a week. Workers may include employees of the property and volunteers who perform regular on-site tasks. Workers should not include visitors to the property such as clients, customers, patients, or subcontractors. | 1,630 |



| LEADERSHIP FOR ENVIRONMENTAL STEWARDSHIP | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|--|-----|-------|-------|--------|-------------------|
| Any member of the executive leadership team actively implemented or led strategies to improve environmental performance or address sustainability considerations | 63% | 61% | 64% | 96% | 100% |
| Has appointed or hired someone to lead sustainability efforts at the facility level | 73% | 71% | 75% | 96% | 100% |
| Of the facilities indicating a sustainability lead, the position is: | | | | | |
| Full-time: Facility level | 16% | 11% | 21% | 25% | 20% |
| Part-time: Facility level | 4% | 3% | 5% | 4% | 20% |
| Other duties within existing job assignment | 79% | 86% | 73% | 71% | 60% |
| Has appointed or hired someone to lead sustainability efforts at the health system level | 88% | 93% | 83% | 92% | 100% |
| Of the facilities indicating a sustainability lead on the system level, the position is: | | | | | |
| Full-time: System level | 77% | 74% | 80% | 78% | 90% |
| Part-time: System level | 10% | 14% | 6% | 22% | 10% |
| Other | 13% | 12% | 14% | 0% | 0% |
| Identified clinical champion(s) to lead efforts on clinical engagement and education | 51% | 47% | 55% | 100% | 100% |
| Activities clinical champions participate in: | | | | | |
| Participates in sustainability committee | 82% | 83% | 80% | 96% | 90% |
| Participates in health professional sustainability team | 29% | 19% | 37% | 36% | 60% |
| Participates in Health Care Without Harm's Physician Sustainability Network | 12% | 6% | 16% | 16% | 30% |
| Participates in Nurses Climate Challenge | 15% | 15% | 15% | 16% | 30% |
| Leverage clinical research/practice to support sustainability goal-setting | 37% | 27% | 44% | 52% | 70% |
| Educates staff | 81% | 79% | 82% | 100% | 100% |
| Educates patients | 33% | 29% | 36% | 52% | 60% |
| Conducts research | 24% | 15% | 31% | 40% | 70% |
| Writes articles/blogs | 23% | 12% | 32% | 40% | 80% |
| Professional presentations | 35% | 31% | 39% | 64% | 90% |
| Other | 13% | 9% | 16% | 24% | 40% |



| COVID-19 | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|---|-----|-------|-------|--------|-------------------|
| Facility partnered with the community to address community needs brought on and/or exacerbated by the COVID-19 pandemic | 53% | 49% | 57% | 92% | 90% |
| How the facility's sustainability work has been impacted by the COVID-19 pandemic: | | | | | |
| Increased focus on sustainability | 10% | 10% | 10% | 8% | 10% |
| Reduced capacity for/focus on sustainability | 55% | 56% | 55% | 80% | 80% |
| Sustainability work on hold for at least 3 months | 1% | 1% | 1% | 0% | 0% |
| Sustainability work on hold for at least 6 months | 11% | 10% | 13% | 0% | 0% |
| Sustainability work on hold until further notice | 2% | 3% | 1% | 0% | 0% |
| Sustainability program eliminated | 0% | 1% | 0% | 0% | 0% |
| Unaffected | 7% | 6% | 9% | 8% | 10% |
| Other | 5% | 5% | 5% | 4% | 0% |
| LEADERSHIP COMMITMENT | | | | | |
| LEADERSHIP COMMITMENT | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
| Established an organizational environmental commitment statement/principles/charter for integrating environmental sustainability that is approved by top leadership | 70% | 71% | 69% | 92% | 90% |
| Conducted a materiality assessment to inform sustainability priorities | 20% | 20% | 20% | 52% | 70% |
| Established a team charter for green or sustainability team | 64% | 61% | 66% | 92% | 100% |
| Developed a minimum of three SMART sustainability goals | 72% | 72% | 72% | 100% | 100% |
| Of those that developed SMART goals: | | | | | |
| Goals are publicly available | 60% | 61% | 61% | 92% | 100% |
| Created a strategic sustainability plan that aligns with other organizational priorities or embeds sustainability objectives or goals within the overall strategic plan | 56% | 54% | 58% | 100% | 100% |



| HUMAN RESOURCES | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|--|-----|-------|-------|--------|-------------------|
| Added sustainability measures into performance objectives/evaluations for leadership staff | 31% | 29% | 32% | 80% | 90% |
| Added language to job descriptions on the organization's commitment to the environment and the role that each employee plays | 23% | 22% | 26% | 72% | 80% |
| Included an overview of organizational sustainability goals in new employee orientation | 46% | 46% | 47% | 100% | 90% |
| Included questions about sustainability/environmental stewardship program in its employee engagement/satisfaction survey | 8% | 11% | 6% | 48% | 40% |
| Employed or hosted interns, students, or residents related to sustainability | 29% | 27% | 32% | 80% | 90% |

| FINANCE | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|--|-----|-------|-------|--------|-------------------|
| Formulated a sustainability program budget | 43% | 44% | 44% | 80% | 80% |
| Developed a green revolving fund | 23% | 22% | 23% | 68% | 70% |

| REPORTING | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|--|-----|-------|-------|--------|-------------------|
| Implemented annual sustainability reporting to the Board of Directors/Trustees | 59% | 57% | 61% | 92% | 90% |
| Reported sustainability initiatives within its Community Benefit Report to the IRS (for non-profit organizations) through IRS Schedule H, Form 990 | 50% | 44% | 56% | 72% | 80% |
| Issues any report that specifically includes sustainability programming | 43% | 41% | 44% | 96% | 90% |
| Of the facilities issuing reports that include sustainability, these types of reports were issued with sustainability included: | | | | | |
| Sustainability report | 69% | 77% | 62% | 46% | 44% |
| Sustainability report using GRI framework | 1% | 1% | 1% | 4% | 11% |
| Annual report | 61% | 59% | 62% | 63% | 89% |
| Community benefit report | 50% | 48% | 52% | 71% | 78% |
| Other report | 7% | 4% | 10% | 8% | 0% |



| COMMUNICATION | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|---|-----|-------|-------|--------|-------------------|
| Developed a formal communication/branding plan with the Marketing/Communications team to convey the organization's sustainability initiatives | 48% | 47% | 49% | 68% | 70% |
| Methods used to communicate sustainability efforts: | | | | | |
| Internal webpage for staff | 75% | 74% | 77% | 88% | 80% |
| Public webpage | 53% | 49% | 57% | 80% | 80% |
| E-learning modules | 19% | 19% | 19% | 44% | 40% |
| Newsletter | 57% | 55% | 59% | 88% | 100% |
| Poster campaign | 27% | 27% | 27% | 64% | 80% |
| Social media | 61% | 59% | 62% | 84% | 80% |
| Electronic bulletin | 26% | 25% | 26% | 76% | 80% |
| Townhall meeting | 31% | 28% | 35% | 44% | 50% |
| Screen savers | 10% | 9% | 10% | 12% | 20% |
| Internal recognition | 35% | 37% | 33% | 88% | 90% |
| Advertising | 8% | 7% | 9% | 16% | 20% |
| Blog | 11% | 11% | 11% | 12% | 20% |
| Other | 23% | 23% | 22% | 44% | 60% |
| Educated the community on environmental topics | 53% | 49% | 57% | 92% | 90% |
| Shared its environmental sustainability successes in a media story | 52% | 49% | 55% | 72% | 90% |
| Featured a sustainability topic connecting health and the environment in at least one grand rounds event | 17% | 11% | 22% | 56% | 70% |
| Presented publicly on the organization's sustainability efforts | 35% | 32% | 38% | 92% | 100% |
| Provided mentoring to other health care facilities either within health system or externally | 49% | 46% | 52% | 92% | 90% |
| COMMUNITY CONNECTIONS | | | | | |
| Sustainability team reviewed its organization's community health needs assessment (CHNA) to align sustainability priorities with external community needs | 47% | 48% | 47% | 80% | 70% |
| Facility educated the community on environmental topics | 53% | 49% | 57% | 92% | 90% |
| Facility partnered with the community to address community needs brought on and/or exacerbated by the COVID-19 pandemic | 76% | 73% | 79% | 96% | 90% |
| Facility needs additional support in building and sustaining meaningful community partnerships | 24% | 22% | 25% | 8% | 10% |



Diversity, equity, inclusion (DEI) and community are important priority themes for health care right now. As such, we are pulling them out to highlight the new data in this space. These themes will likely be explored in more detail in future benchmark reports.

| STRUCTURAL RACISM | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|--|------------|--------------|--------------|---------------|--------------------------|
| Undertook any intentional work on racial equity (internally or externally) | 88% | 88% | 89% | 96% | 100% |
| Racial equity activities | | | | | |
| Internal evaluation of racial equity | 60% | 59% | 62% | 96% | 90% |
| Internal committee focused on racial equity | 67% | 64% | 69% | 96% | 90% |
| Designated staff | 69% | 67% | 71% | 79% | 70% |
| Internal programs (anti-racism curriculum and trainings with administrators, clinicians and staff) | 89% | 92% | 87% | 96% | 90% |
| Issued statement internally or externally | 82% | 82% | 83% | 96% | 100% |
| Action to identify and address inequities in patients' health outcomes based on race and other socio-demographic factors | 77% | 78% | 77% | 96% | 90% |
| Intentional effort to partner with community organizations representing Black, Indigenous, and People of Color (BIPOC) | 75% | 72% | 79% | 100% | 100% |
| Advocacy efforts | 65% | 69% | 63% | 88% | 80% |
| Other | 34% | 38% | 30% | 33% | 20% |



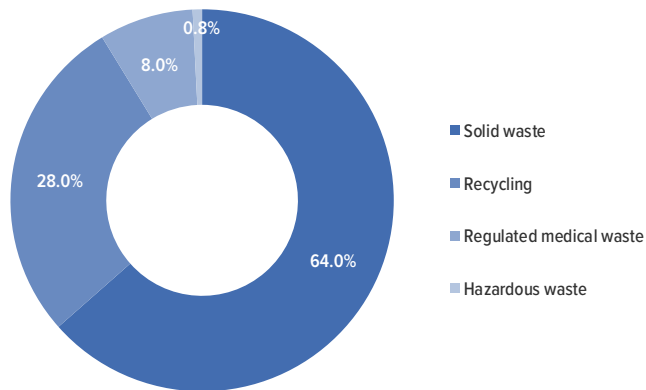
| MEDIAN WASTE VOLUME (IN TONS) BY TYPE AS A PERCENT OF TOTAL WASTE | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|------|-------|-------|--------|--------------|
| Solid waste | 66% | 64% | 68% | 65% | 55% |
| Recycling | 23% | 27% | 21% | 27% | 40% |
| Regulated medical waste | 6.5% | 5.8% | 8.0% | 6.3% | 5.0% |
| Hazardous waste | 0.5% | 0.4% | 0.6% | 0.8% | 1.5% |

| 90 TH PERCENTILE FOR PERCENT OF WASTE VOLUME BY TYPE AS A PERCENT OF TOTAL WASTE | ALL |
|---|------|
| Recycling (high is better) | 43% |
| Regulated medical waste (low is better) | 3.0% |
| Hazardous waste (low is better) | 0.1% |

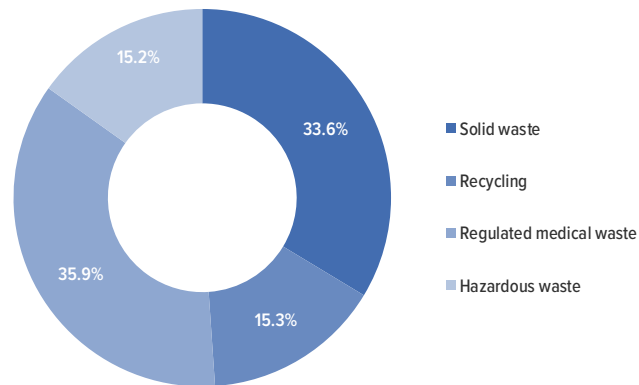
Note: 90th percentile indicates the top performers for these metrics, e.g., the organizations that achieved the best waste generation rates.

| MEDIAN COST OF WASTE DISPOSAL BY TYPE AS A PERCENT OF TOTAL WASTE | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-----|-------|-------|--------|--------------|
| Solid waste | 33% | 30% | 33% | 28% | 27% |
| Recycling | 14% | 18% | 13% | 15% | 16% |
| Regulated medical waste | 34% | 33% | 36% | 34% | 34% |
| Hazardous waste | 11% | 7% | 12% | 14% | 24% |

Average tons of waste by type as a percent of total waste



Average cost of waste generation by type as a percent of total waste

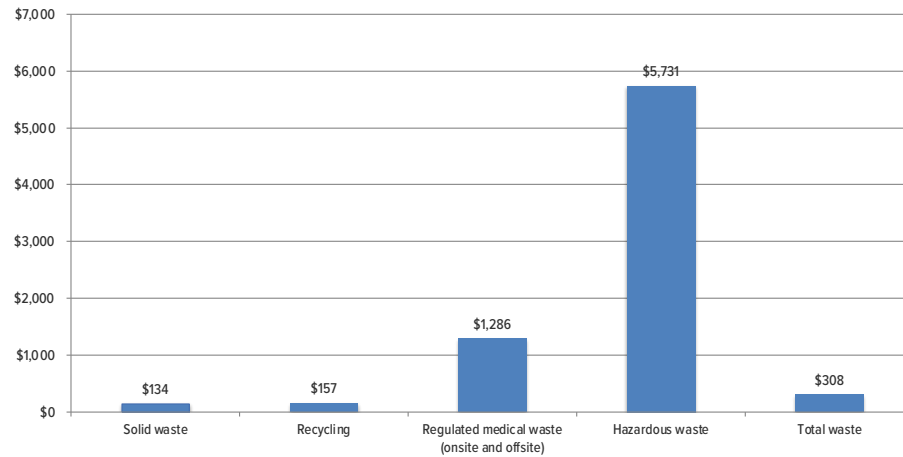




| MEDIAN COST PER TON | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|---------|---------|---------|---------|--------------|
| Solid waste | \$134 | \$146 | \$122 | \$132 | \$170 |
| Recycling | \$157 | \$165 | \$151 | \$194 | \$157 |
| Regulated medical waste (onsite and offsite) | \$1,286 | \$1,435 | \$1,135 | \$1,835 | \$2,402 |
| Hazardous waste | \$5,731 | \$7,378 | \$4,736 | \$6,243 | \$6,512 |
| Total waste | \$308 | \$322 | \$305 | \$325 | \$372 |

Note: Total waste is the sum of solid waste, recycling, regulated medical waste, and hazardous waste. Pharmaceutical and food waste are counted as subsets of those four waste streams. Cost for recycling includes only those facilities that had a net cost (not a profit) for their recycling program.

Cost per ton of different waste types



| SOLID WASTE MEDIANS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|-------|-------|-------|--------|--------------|
| Solid waste as a percent of total waste (tons) | 66% | 64% | 68% | 65% | 55% |
| Solid waste as a percent of total waste (cost) | 33% | 30% | 33% | 28% | 27% |
| Median cost of solid waste per ton | \$134 | \$146 | \$122 | \$132 | \$170 |



| DISPOSAL MECHANISM FOR SOLID WASTE (NON-PHARMACEUTICAL) | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|-----|-------|-------|--------|--------------|
| Landfill | 83% | 83% | 84% | 72% | 80% |
| Municipal waste incinerator | 2% | 3% | 1% | 20% | 0% |
| Waste-to-energy incinerator | 7% | 6% | 9% | 8% | 20% |
| SOLID WASTE REDUCTION AND PREVENTION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| Tracked a metric for total waste diversion from landfill or incineration | 41% | 41% | 41% | 84% | 100% |
| DONATION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| Developed an equipment and supplies donation program (domestic or abroad) for materials, equipment and furniture that can no longer be used internally | 77% | 74% | 80% | 92% | 100% |
| Of the 265 facilities that developed a donation program, this is the percent of facilities that routinely donate these materials: | | | | | |
| Unexpired/unopened consumable clinical supplies | 74% | 69% | 77% | 83% | 60% |
| Expired/opened consumable clinical supplies | 57% | 55% | 58% | 78% | 70% |
| Capital medical equipment | 72% | 72% | 72% | 74% | 90% |
| Electronics | 61% | 67% | 55% | 61% | 70% |
| Furniture | 75% | 72% | 78% | 57% | 90% |
| Linens | 37% | 36% | 38% | 43% | 70% |
| Other supplies | 48% | 40% | 55% | 48% | 80% |
| PAPER REDUCTION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| Implemented a paper reduction program | 66% | 62% | 69% | 100% | 100% |
| Of the 226 facilities that indicated they had a paper reduction program, these are the programmatic activities pursued: | | | | | |
| Reduced network printers | 79% | 79% | 80% | 96% | 90% |
| Made double-sided printing the default on printers/copiers | 65% | 63% | 67% | 88% | 80% |
| Reduced number of automatically printed reports | 67% | 63% | 71% | 96% | 100% |
| Implemented EMR/EHR system | 76% | 71% | 79% | 88% | 90% |
| Created digital signage | 55% | 45% | 63% | 72% | 80% |
| Increased electronic meetings | 77% | 67% | 84% | 88% | 90% |
| Engaged supply chain around paper reduction | 44% | 37% | 51% | 76% | 80% |
| Other | 22% | 21% | 22% | 52% | 90% |



| RECYCLING MEDIANS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-------|-------|-------|--------|--------------|
| Recycling as a percent of total waste (tons) | 23% | 27% | 21% | 27% | 40% |
| Recycling as a percent of total waste (cost) | 14% | 18% | 13% | 15% | 16% |
| Median cost of recycling per ton, includes universal waste (for those that have a cost) | \$157 | \$165 | \$151 | \$194 | \$157 |
| Median cost of recycling per ton, not including universal waste | \$145 | \$147 | \$144 | \$178 | \$167 |

Note: Cost data above includes only those facilities that had a net cost (not a profit) for their recycling program. Median cost per ton for non-universal recycling when facilities that made a profit are included is \$112.

| MEDIAN NORMALIZED RECYCLING METRICS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-------|-------|-------|--------|--------------|
| Recycling (tons) per OR | 18.86 | 16.12 | 21.22 | 25.15 | 34.37 |
| Recycling (tons) per licensed beds | 1.00 | 1.10 | 0.95 | 1.43 | 1.84 |
| Recycling (tons) per staffed beds | 1.28 | 1.58 | 1.08 | 1.59 | 2.04 |
| Recycling (tons) per OR procedure | 0.03 | 0.03 | 0.03 | 0.04 | 0.06 |
| Pounds recycling per staffed bed per day | 7.00 | 8.68 | 5.90 | 8.69 | 11.17 |
| Pounds recycling per patient day | 9.86 | 12.63 | 8.11 | 10.86 | 17.68 |
| Pounds recycling per adjusted patient day | 4.19 | 4.41 | 4.12 | 4.72 | 5.35 |
| Pounds recycling per total FTE | 257 | 293 | 232 | 244 | 244 |
| Pounds recycling per square feet | 0.74 | 0.71 | 0.76 | 0.76 | 0.83 |

| RECYCLING OF MEDICAL PLASTICS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-----|-------|-------|--------|--------------|
| Recycled clinical/medical plastics | 52% | 49% | 54% | 84% | 100% |
| Of the 178 facilities recycling clinical/medical plastics, the items recycled include: | | | | | |
| Irrigation bottles | 73% | 78% | 69% | 76% | 90% |
| Skin prep solution bottles | 48% | 52% | 45% | 57% | 70% |
| Trays | 60% | 59% | 61% | 57% | 70% |
| Overwraps | 20% | 21% | 19% | 24% | 10% |
| Rigid inserts | 40% | 37% | 43% | 67% | 80% |
| Blue wrap | 35% | 28% | 40% | 62% | 70% |
| Tyvek | 3% | 2% | 4% | 0% | 0% |
| Basins | 51% | 62% | 42% | 71% | 70% |
| Urinals/bedpans | 17% | 22% | 14% | 57% | 60% |
| Other | 14% | 11% | 17% | 38% | 70% |



| TOP 10 RECYCLED MATERIALS NOT PART OF MIXED RECYCLING (BY WEIGHT IN TONS) | SUM OF ALL |
|---|-------------------|
| Paper-HIPAA | 50,107 |
| Cardboard | 18,210 |
| Paper-mixed (includes newspaper) | 5,673 |
| Food waste composting | 5,602 |
| Computers & electronic waste | 3,051 |
| Metals mixed (brass/copper/steel-not C&D) | 2,107 |
| Paper-white | 1,894 |
| Oil-cooking | 873 |
| Batteries | 660 |
| Wood (does not include avoided waste through pallet reuse) | 604 |
| FOOD WASTE DISPOSAL | ALL |
| Percent of facilities composting food waste | 39% |
| Total tons of food waste composted | 5,602 |
| Median cost per ton food waste composting | \$157 |
| Median cost per ton solid waste | \$134 |
| AGGREGATE RECYCLING TOTALS | ALL |
| Total solid waste recycling tonnage for all facilities | 136,886 |
| Total universal waste recycling tonnage for all facilities | 4,454 |
| Total recycling tonnage for all facilities | 141,340 |
| Total recycling costs for all facilities (reporting a net cost for their recycling program) | \$8,953,600 |



| REGULATED MEDICAL WASTE MINIMIZATION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|-------------|---------|----------|----------|--------------|
| Disinfected/treated RMW using onsite technology | 18% | 11% | 24% | 12% | 20% |
| Eliminated the standard use of red bag waste (RMW) containers in regular patient rooms | 59% | 61% | 57% | 96% | 100% |
| Implemented a reusable sharps container program | 80% | 71% | 90% | 92% | 80% |
| Of the 108 facilities that provided data on reusable sharps container program savings: | | | | | |
| Median reusable sharps container program cost-savings per facility annually | \$19,079 | \$2,770 | \$42,843 | \$16,204 | \$16,204 |
| Median reusable sharps container program waste reduction per facility annually | 15 | 7 | 29 | 10 | 13 |
| Sum of all facilities: cost-savings through reusable sharps program | \$7,296,116 | | | | |
| Sum of all facilities: tons of waste prevented through reusable sharps program | 4,366 | | | | |
| Implemented a single-use device (SUD) reprocessing program with an FDA-approved third party reprocessor | 88% | 83% | 92% | 84% | 90% |
| REGULATED MEDICAL WASTE TREATMENT TECHNOLOGIES | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| Incinerated a portion of its regulated medical waste (RMW) | 73% | 72% | 73% | 100% | 100% |
| Of the 251 facilities that indicated they incinerate a portion of RMW, the following medical waste streams are incinerated: | | | | | |
| General RMW | 20% | 23% | 17% | 32% | 20% |
| Path/chemo | 90% | 90% | 91% | 100% | 100% |
| Sharps | 20% | 22% | 17% | 20% | 30% |
| Non-RCRA pharmaceuticals | 43% | 36% | 50% | 56% | 40% |
| Other | 4% | 2% | 5% | 4% | 20% |
| Disinfects/treats RMW using onsite technology | 18% | 11% | 24% | 12% | 20% |
| Of the 62 facilities that treat RMW onsite, these treatment technologies are employed: | | | | | |
| Autoclave | 84% | 89% | 81% | 67% | 100% |
| Rotoclave | 3% | 0% | 5% | 33% | 0% |
| Chemical disinfection | 3% | 0% | 5% | 0% | 0% |
| Incineration | 2% | 0% | 2% | 0% | 0% |
| Other | 0% | 0% | 0% | 0% | 0% |
| Note: While only 73% of all facilities reported incinerating a portion of RMW, it is Practice Greenhealth's belief that 100% of facilities are actually incinerating their anatomical/pathological/trace chemotherapeutic waste per standard treatment practice in the United States--and that this discrepancy represents a lack of understanding of the application question or incomplete knowledge of the treatment options being utilized by haulers. | | | | | |



| REGULATED MEDICAL WASTE MEDIANS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------|
| RMW as a percent of total waste (tons) | 6.5% | 5.8% | 8.0% | 6.3% | 5.0% |
| RMW as a percent of total waste (cost) | 34% | 33% | 36% | 34% | 34% |
| Median RMW cost per ton | \$1,286 | \$1,435 | \$1,135 | \$1,835 | \$2,402 |
| COMPARISON OF MEDIAN COST PER TON OF REGULATED MEDICAL WASTE (RMW) FOR FACILITIES TREATING RMW ONSITE AND OFFSITE | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| RMW cost per ton - onsite treatment | \$1,960 | \$2,438 | \$1,740 | \$3,545 | \$4,539 |
| RMW cost per ton - offsite treatment | \$1,221 | \$1,435 | \$1,082 | \$1,771 | \$1,935 |
| MEDIAN NORMALIZED REGULATED MEDICAL WASTE METRICS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| RMW (tons) per OR | 5.71 | 3.53 | 8.06 | 6.06 | 5.37 |
| RMW (tons) per licensed bed | 0.27 | 0.24 | 0.34 | 0.32 | 0.26 |
| RMW (tons) per staffed bed | 0.35 | 0.31 | 0.37 | 0.36 | 0.33 |
| Pounds RMW per staffed bed per day | 1.91 | 1.72 | 2.05 | 1.99 | 1.79 |
| Pounds RMW per patient day | 2.94 | 3.02 | 2.84 | 2.48 | 2.14 |
| Pounds RMW per adjusted patient day | 1.18 | 0.98 | 1.52 | 1.27 | 0.53 |
| Pounds RMW per OR procedure | 17.59 | 12.33 | 22.69 | 18.03 | 20.35 |
| Pounds RMW per FTE | 75.29 | 59.35 | 85.72 | 71.80 | 31.11 |
| Pounds RMW per sq. ft. | 0.20 | 0.14 | 0.30 | 0.19 | 0.12 |
| PHARMACEUTICAL WASTE AND COST AS PERCENT OF TOTAL WASTE | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
| Pharm waste as a percent of total waste (tons) | 0.57% | 0.45% | 0.69% | 0.65% | 0.59% |
| Pharm waste as a percent of total waste (cost) | 4% | 3% | 8% | 2% | 7% |
| Median pharmaceutical waste cost per ton (RCRA and non-RCRA) | \$3,849 | \$4,257 | \$3,605 | \$3,883 | \$5,178 |

Note: Pharmaceutical waste is actually a subset of both RCRA-hazardous and either RMW or solid waste and thus is not shown in the breakdown by waste type above.



| PHARMACEUTICAL WASTE DISPOSAL | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-----|-------|-------|--------|--------------|
| Segregates non-RCRA pharmaceutical waste into a separate waste stream for hauling | 50% | 49% | 51% | 64% | 30% |
| Method of handling waste pharmaceuticals that are not regulated as Hazardous Waste (such as antidepressants, statins, antibiotics, etc.) | | | | | |
| Treat all pharmaceutical waste as RCRA-hazardous to better protect human health and the environment | 27% | 26% | 28% | 48% | 70% |
| Pharmaceutical waste is being disposed of in red bags or sharps containers | 21% | 18% | 23% | 8% | 0% |
| Pharmaceutical waste is going down the drain | 2% | 1% | 2% | 0% | 0% |
| Pharmaceutical waste is going into clear trash bags (solid waste) | 2% | 2% | 2% | 0% | 0% |
| Other | 16% | 17% | 15% | 24% | 40% |
| Don't know | 1% | 1% | 2% | 0% | 0% |
| Taken any measures to reduce the generation of pharmaceutical waste | | | | | |
| Staff education | 58% | 60% | 57% | 100% | 100% |
| Inventory management | 49% | 54% | 44% | 92% | 90% |
| Implemented a samples policy | 19% | 22% | 17% | 48% | 50% |
| Monitored dating and utilized stock rotation for emergency syringes | 30% | 32% | 29% | 56% | 50% |
| Prescription review | 26% | 27% | 25% | 68% | 40% |
| Primed and flushed chemotherapy IV lines with saline solution | 22% | 25% | 19% | 36% | 40% |
| Replaced pre-packaged unit dose liquids with patient-specific oral syringes | 20% | 22% | 18% | 48% | 50% |
| Other | 6% | 5% | 8% | 4% | 10% |
| Utilizes a reverse distributor for potentially creditable (unused, surplus or expired) RCRA-hazardous prescription pharmaceuticals | 51% | 50% | 53% | 72% | 40% |
| Of those utilizing a reverse distributor for RCRA pharmaceuticals: | | | | | |
| Ensured that that potentially creditable RCRA-hazardous prescription pharmaceuticals sent for reverse distribution are included and accounted for in the hospital's pharmaceutical waste totals | 36% | 41% | 30% | 67% | 75% |
| Did not know that pharmaceuticals sent for reverse distribution should be included in the hospital's pharmaceutical waste totals | 22% | 23% | 22% | 17% | 0% |



| MECHANISMS FOR CONTROLLED SUBSTANCE DISPOSAL | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------|
| Wasting to drain | 8% | 6% | 10% | 12% | 10% |
| Render irretrievable with a commercial controlled substance mechanism or service | 44% | 43% | 45% | 56% | 20% |
| Solid waste landfill | 1% | 0% | 2% | 0% | 0% |
| Solid waste incinerator | 1% | 0% | 2% | 4% | 10% |
| Medical waste incinerator | 5% | 5% | 5% | 4% | 0% |
| Hazardous waste incinerator | 15% | 13% | 16% | 20% | 10% |
| Other | 26% | 28% | 24% | 52% | 100% |

| MEDIAN HAZARDOUS WASTE AND COST AS PERCENT OF TOTAL WASTE | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------|
| Hazardous waste as a percent of total waste (tons) | 0.5% | 0.4% | 0.6% | 0.8% | 1.5% |
| Hazardous waste as a percent of total waste (cost) | 10.8% | 6.9% | 11.7% | 13.9% | 24.1% |
| Median hazardous waste cost per ton | \$5,731 | \$7,378 | \$4,736 | \$6,243 | \$6,512 |

| UNIVERSAL/HAZARDOUS WASTE RECYCLING | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------|
| Established a contract with a certified electronics waste/recycling vendor that is certified to e-Stewards (or subcontractors that use e-Stewards-certified vendors) for legal and environmentally responsible electronics (or e-waste) management and recycling. | 67% | 61% | 73% | 84% | 70% |
| Handling of fluorescent lamps | | | | | |
| Ship to recycler | 80% | 80% | 81% | 100% | 100% |
| Crush onsite | 4% | 3% | 5% | 0% | 0% |
| Dispose in dumpster | 2% | 2% | 2% | 0% | 0% |
| Other | 5% | 4% | 5% | 0% | 0% |
| Recycled its batteries | 91% | 90% | 93% | 100% | 100% |



| BATTERY RECYCLING (BY TYPE) | | ALL | | | | |
|---|--|-----|--|--|--|--|
| Of the 314 facilities that indicated they were recycling batteries, the following types of battery recycling were indicated: | | | | | | |
| Ni-Cd | | 89% | | | | |
| Lead-acid | | 90% | | | | |
| Lithium ion | | 94% | | | | |
| Alkaline | | 82% | | | | |
| Mercuric oxide | | 36% | | | | |
| Ni-MH | | 74% | | | | |
| Other | | 10% | | | | |

| HAZARDOUS WASTE REDUCTION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|-----|-------|-------|--------|--------------|
| Has a laboratory on-site | 82% | 80% | 84% | 100% | 100% |
| Of the 282 facilities that have onsite laboratories, percent of facilities that did work to green their laboratories: | 44% | 43% | 45% | 80% | 100% |

| SOLVENT DISTILLATION | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|---|-----------|----------|-----------|-----------|--------------|
| Recycled, reprocessed or distilled solvents, alcohols, or other chemicals from the lab (such as xylene, alcohols or formalin) | 24% | 15% | 32% | 44% | 70% |
| Median total cost savings per hospital (among facilities that reprocess solvents) | \$13,442 | \$2,874 | \$15,160 | \$15,077 | \$15,453 |
| 90th percentile total cost savings per hospital (among facilities that reprocess solvents) | \$31,702 | \$18,856 | \$37,163 | \$22,701 | \$18,420 |
| Total gallons distilled annually (sum of all facilities) | 27,954 | 1,831 | 24,943 | 9,498 | 5,361 |
| Total annual savings from avoided virgin solvent purchase (sum of all facilities) | \$236,328 | \$28,191 | \$188,716 | \$124,695 | \$74,639 |
| Total annual savings from reduced disposal costs (sum of all facilities) | \$34,139 | \$3,040 | \$27,286 | \$18,820 | \$10,159 |
| Total savings from solvent reprocessing (sum of all facilities) | \$270,467 | \$31,231 | \$216,002 | \$143,515 | \$84,798 |

| TOTAL WASTE TONS AND COST | ALL |
|--|--------------|
| Median tons of total waste generated per year per facility | 1,036 |
| Median total cost of waste disposal and treatment per facility | \$385,559 |
| Total waste tons generated by all hospitals | 443,217 |
| Total waste disposal and treatment cost for all hospitals | \$82,499,468 |

Note: not all hospitals included costs for all waste streams. These facilities were omitted from the medians because they did not submit full costs. However, they are included in the sums for all facilities.



| MEDIAN NORMALIZED TOTAL WASTE METRICS | ALL | SMALL | LARGE | TOP 25 | WASTE CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------|
| Total waste (tons) per OR | 89.18 | 66.19 | 96.65 | 92.65 | 95.41 |
| Total waste (tons) per licensed bed | 4.35 | 4.44 | 4.34 | 4.64 | 4.53 |
| Total waste (tons) per staffed bed | 5.32 | 6.16 | 5.06 | 5.99 | 5.29 |
| Total waste (tons) per ORProc | 0.14 | 0.12 | 0.15 | 0.14 | 0.17 |
| Pounds total waste per staffed bed per day | 29.15 | 33.77 | 27.70 | 32.81 | 28.99 |
| Pounds total waste per patient day | 41.98 | 49.70 | 37.93 | 43.67 | 49.33 |
| Pounds total waste per adjusted patient day | 18.97 | 18.21 | 19.66 | 17.50 | 16.56 |
| Pounds total waste per OR procedure | 270.42 | 241.41 | 293.97 | 281.73 | 341.70 |
| Pounds total waste per total FTE | 1224 | 1242 | 1189 | 1261 | 751 |
| Pounds total waste per sq. ft. | 3.29 | 2.87 | 3.57 | 3.00 | 2.51 |



| CHEMICAL AUDITS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Contracted for, or performed internally, a hazardous chemical/material audit by hospital department and update at least annually | 63% | 62% | 65% | 100% | 100% |
| CHEMICALS OF CONCERN | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
| Have chemical or purchasing policies that identify and avoid specific chemicals of concern contained in products and materials that may be hazardous to human health and the environment | 74% | 75% | 73% | 100% | 100% |
| Of the 255 facilities that have chemical or purchasing policies, the policies include these chemicals of concern: | | | | | |
| Mercury | 77% | 80% | 73% | 100% | 100% |
| Polyvinyl chloride, or PVC | 81% | 80% | 81% | 80% | 91% |
| Lead | 74% | 79% | 69% | 68% | 86% |
| Flame retardants, including chlorinated, brominated, and phosphate-based flame retardants | 74% | 75% | 73% | 68% | 89% |
| Phthalates (DEHP, BBP, DnHP, DIDP, DBP, DINP, and DiBP) | 77% | 77% | 77% | 80% | 93% |
| Latex | 50% | 49% | 52% | 72% | 57% |
| Bisphenol A and its structural analogues | 73% | 75% | 70% | 68% | 89% |
| Persistent, bioaccumulative, and toxic substances (PBTs) | 69% | 72% | 65% | 72% | 86% |
| Volatile organic compounds (VOCs) | 60% | 58% | 63% | 72% | 57% |
| Formaldehyde | 55% | 58% | 53% | 68% | 89% |
| Triclosan | 55% | 56% | 55% | 72% | 93% |
| Triclocarban | 52% | 53% | 52% | 68% | 91% |
| CA Proposition 65 listed chemicals (carcinogens and reproductive toxicants) | 53% | 54% | 51% | 44% | 16% |
| Polystyrene | 24% | 28% | 20% | 52% | 39% |
| Per and poly-fluorinated compounds (PFAS) | 55% | 55% | 55% | 36% | 82% |
| Other | 20% | 24% | 16% | 28% | 75% |
| GREEN CLEANING | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
| Conducted an inventory in the last 18 months of all products used at the facility for cleaning and disinfection of surfaces | 67% | 68% | 66% | 100% | 100% |
| Actively working on the transition to third-party certified green cleaning chemicals, in alignment with Practice Greenhealth's Green Cleaning Goal | 44% | 48% | 41% | 84% | 100% |
| Utilized any Green Seal or UL ECOLOGO-certified cleaning products | 79% | 81% | 77% | 96% | 100% |



| MEDIAN GREEN SPEND ON CLEANERS BY CATEGORY (IF > ZERO) | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|------|-------|-------|--------|------------------|
| General purpose (hard surface) cleaners | 23% | 22% | 26% | 82% | 99% |
| Window/glass cleaners | 100% | 100% | 100% | 100% | 100% |
| Carpet and upholstery cleaners | 100% | 100% | 100% | 100% | 100% |
| Bathroom/restroom cleaners | 79% | 78% | 90% | 89% | 100% |
| Floor cleaners | 100% | 100% | 89% | 100% | 100% |
| Five target categories combined (general purpose, window/glass, bathroom, carpet/rug cleaner and floor cleaners) for those facilities that bought all five | 64% | 69% | 64% | 71% | 73% |
| All cleaners | 27% | 23% | 29% | 51% | 51% |

| TOTAL SPEND ON GREEN CLEANERS (SUM OF ALL FACILITIES) | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-------------|-----------|-------------|-----------|------------------|
| Five target categories combined (general purpose, window/glass, bathroom, carpet/rug cleaner and floor cleaners) | \$2,298,893 | \$406,052 | \$1,884,456 | \$369,187 | \$411,322 |
| All cleaning categories | \$3,324,886 | \$696,673 | \$2,619,828 | \$701,139 | \$721,451 |

| OTHER CLEANING METHODS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Utilized automatic scrubbing machines that use only water for floor cleaning | 54% | 47% | 61% | 80% | 59% |
| Of those facilities that utilized automatic scrubbing machines: | 188 | 79 | 108 | 20 | 26 |
| Reduced or replaced other cleaning chemical use as a result of automatic scrubbing machines | 91% | 92% | 91% | 100% | 100% |
| Utilized ultraviolet germicidal irradiation (UVGI) technology for surface disinfection in any area of the organization | 48% | 43% | 53% | 76% | 89% |
| Of those facilities that utilized ultraviolet germicidal irradiation (UGVI) technology for surface disinfection, these are the clinical areas where this technology was used: | | | | | |
| All patient rooms | 42% | 40% | 44% | 47% | 36% |
| Isolation rooms | 82% | 83% | 82% | 74% | 92% |
| OR | 78% | 89% | 69% | 79% | 90% |
| Other | 34% | 32% | 35% | 68% | 38% |
| Replaced any cleaning product types with a chemical-free method, such as ionized water or ozone | 22% | 16% | 27% | 60% | 39% |
| Of those facilities that utilized a chemical-free cleaning method, the following methods were indicated: | | | | | |
| Ionized water | 69% | 77% | 65% | 80% | 94% |
| Ozone | 13% | 8% | 17% | 27% | 12% |
| Other | 25% | 35% | 21% | 27% | 24% |



| DISINFECTANTS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|---|-----|-------|-------|--------|------------------|
| The facility expanded its use of disinfectants/one-step disinfectant cleaners for environmental cleaning as a result of the COVID-19 pandemic | 67% | 67% | 68% | 80% | 93% |
| The 232 facilities that expanded use of disinfectants did it in these areas: | | | | | |
| All patient care areas | 50% | 47% | 53% | 50% | 32% |
| Some patient care areas | 19% | 21% | 18% | 15% | 5% |
| Food services | 22% | 23% | 22% | 15% | 5% |
| Administrative areas | 21% | 21% | 21% | 25% | 10% |
| Everywhere | 53% | 60% | 48% | 80% | 93% |
| Other | 6% | 4% | 8% | 10% | 2% |
| Consideration is given to the sustainability attributes of disinfectants/one-step disinfectant cleaners during the product selection process | 49% | 43% | 55% | 84% | 43% |
| STERILIZATION AND DISINFECTION | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
| Eliminated the use of the high-level disinfectant glutaraldehyde and moved to safer alternatives while ensuring infection prevention parameters are met | 77% | 72% | 81% | 96% | 98% |
| Of the 265 facilities that have eliminated the high-level disinfectant glutaraldehyde, these alternatives are used: | | | | | |
| OPA (ASP cidex OPA, metrex metricide OPA) | 75% | 74% | 76% | 83% | 93% |
| Hydrogen peroxide | 54% | 48% | 58% | 79% | 35% |
| Peracetic acid | 20% | 17% | 24% | 21% | 9% |
| Other | 15% | 16% | 14% | 42% | 16% |
| Eliminated the use of the sterilant ethylene oxide (EtO) onsite | 74% | 74% | 74% | 92% | 100% |
| Of the 256 facilities that have eliminated the use of EtO, these alternatives are used: | | | | | |
| Steam sterilization | 84% | 84% | 84% | 74% | 82% |
| Ozone plasma | 4% | 5% | 3% | 0% | 0% |
| Low temperature hydrogen peroxide gas plasma | 44% | 37% | 50% | 65% | 32% |
| Peracetic acid | 16% | 15% | 17% | 13% | 9% |
| Other | 4% | 5% | 4% | 0% | 0% |



| INTEGRATED PEST MANAGEMENT (IPM) | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|---|-----|-------|-------|--------|------------------|
| Reduced or eliminated the use of chemical pesticides by implementing an IPM program | 67% | 64% | 71% | 100% | 100% |
| Developed a written IPM plan/policy for the facility that includes attention to both indoor and outdoor (buildings and grounds) pest habitats and issues, which focuses on prevention as the primary means of pest management | 48% | 47% | 50% | 96% | 100% |
| Required EVS or other relevant staff to be trained in IPM (In particular, are staff trained to monitor and prevent pest problems by spotting conditions that are conducive to pest infestations) | 50% | 49% | 51% | 96% | 80% |

| DEHP/PVC REDUCTION | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Actively worked to reduce the purchase of medical products containing PVC and DEHP, in alignment with Practice Greenhealth's PVC and DEHP Reduction Goal | 54% | 49% | 59% | 88% | 100% |
| Of those that worked to reduce PVC and DEHP in medical products, the facility: | | | | | |
| Encoded this commitment in policy, program, guideline, or purchasing specifications | 80% | 85% | 76% | 95% | 98% |
| Eliminated both PVC and DEHP from at least two product lines | 64% | 63% | 64% | 88% | 95% |

| DEHP/PVC REDUCTION FOR SPECIFIC PRODUCTS | COMPLETELY ELIMINATED IN 2021 | COMPLETELY ELIMINATED IN 2020 OR BEFORE | IN PROGRESS | DID NOT ADDRESS | NO RESPONSE |
|---|-------------------------------|---|-------------|-----------------|-------------|
| Of those applicants that that have eliminated PVC and DEHP from at least two product lines, the product lines include: | | | | | |
| Breast pumps and accessories | 18% | 40% | 4% | 4% | 65% |
| Enteral nutrition products | 2% | 33% | 4% | 4% | 43% |
| Enteral tubes | 0% | 33% | 6% | 3% | 43% |
| General urological | 1% | 11% | 22% | 3% | 37% |
| Gloves | 11% | 50% | 2% | 3% | 67% |
| Parenteral infusion devices and sets (includes IV tubing and bags) | 17% | 16% | 9% | 2% | 45% |
| Respiratory therapy products | 0% | 10% | 24% | 3% | 37% |
| Vascular catheters | 0% | 34% | 4% | 3% | 41% |
| Other | 0% | 2% | 0% | 2% | 4% |

| PVC- AND DEHP-FREE METRICS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|---|-----|-------|-------|--------|------------------|
| Median number of DEHP and PVC-free completed product lines out of 8 | 3 | 3 | 4 | 3 | 2 |
| Median percent of DEHP and PVC-free completed product lines | 38% | 38% | 50% | 38% | 25% |



| PVC AND DEHP IN THE NICU | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Of those applicants that indicated their facility had a NICU: | | | | | |
| Actively worked to achieve a DEHP-free NICU | 58% | 72% | 54% | 73% | 32% |
| Actively worked to achieve a PVC-free NICU | 63% | 76% | 60% | 82% | 32% |

| HEALTHY INTERIORS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Actively worked to purchase furnishings and furniture that eliminate the use of all of the following target chemicals of concern: flame retardants, formaldehyde, perfluorinated compounds, PVC (vinyl) and antimicrobials in alignment with Practice Greenhealth's Healthy Interiors Goal | 52% | 47% | 58% | 92% | 100% |

| HEALTHY INTERIORS: FURNITURE AND FURNISHINGS | USING ONLY HEALTHY INTERIORS CRITERIA | USING ONLY CONVENTIONAL CRITERIA | USING BOTH CONVENTIONAL AND HEALTHY INTERIORS CRITERIA | DID NOT INDICATE BUYING IN 2021 |
|--|---------------------------------------|----------------------------------|--|---------------------------------|
| Beds, mattresses, and pads (table pads, stretcher pads, pediatric pads) | 28% | 45% | 7% | 20% |
| Built-in and modular casework | 45% | 14% | 12% | 29% |
| Cubicle/privacy curtains | 33% | 30% | 9% | 28% |
| Panels and partitions | 48% | 12% | 11% | 29% |
| Seating (chairs, stools, sofas, benches, recliners, loungers, etc.) | 60% | 8% | 23% | 8% |
| Storage units and shelving (cabinets, filing cabinets, dressers, drawers, bookshelves, built-in shelves, etc.) | 51% | 16% | 18% | 15% |
| Systems (multi-component furniture systems) | 49% | 12% | 14% | 25% |
| Wall coverings | 47% | 10% | 3% | 40% |
| Window coverings | 45% | 12% | 4% | 38% |
| Work surfaces (tables, desks, overbed tables, etc.) | 55% | 17% | 15% | 12% |

Note: Some facilities purchased products using both healthy interiors criteria and conventional criteria, and some facilities did not purchase anything in certain categories, so percentages will not always add up to 100%.

| GREEN SPEND ON HEALTHIER INTERIORS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|---|--------------|--------------|--------------|--------------|------------------|
| Median percent total spend on furnishings and furniture that eliminate 5 target chemical categories of concern (of those that reported green spend) | 92% | 92% | 89% | 92% | 98% |
| Total dollars spent on furnishings that avoid target chemicals of concern | \$51,955,525 | \$12,273,085 | \$39,682,440 | \$21,879,659 | \$21,241,038 |



| HEALTHY INTERIORS: FLOORING | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-------------|-------------|-------------|-------------|------------------|
| Actively working to select and purchase healthier flooring in alignment with Practice Greenhealth's Healthy Flooring Goal | 43% | 42% | 44% | 84% | 98% |
| Actively working to select and purchase healthier carpet in alignment with Practice Greenhealth's Healthy Carpet Goal | 44% | 39% | 48% | 52% | 86% |
| Installed new flooring in the past year | 38% | 29% | 47% | 68% | 36% |
| Median green percent spend on flooring (flooring materials only) that meet Healthy Flooring criteria | 94.3% | 91.2% | 97.2% | 89.9% | 55.0% |
| Median green percent spend on flooring (materials and installation costs) that meet Healthy Flooring criteria | 90.0% | 78.6% | 94.3% | 90.0% | 42.6% |
| Total sum of dollars spent on flooring materials that meet Healthy Flooring criteria | \$5,148,492 | \$2,006,886 | \$3,141,606 | \$1,980,686 | \$1,262,531 |
| Total sum of dollars spent on flooring materials with installation costs that meet Healthy Flooring criteria (where materials could not be split out separately) | \$3,051,809 | \$878,903 | \$2,099,111 | \$1,209,436 | \$779,802 |



| MERCURY ELIMINATION | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|---|-----|-------|-------|--------|------------------|
| Percent of facilities that have won the Making Medicine Mercury Free Award (MMMMF) at some point | 40% | 32% | 48% | 92% | 59% |
| For those facilities that have already won the Making Medicine Mercury Free award: | | | | | |
| Periodically inventory purchasing practices to make certain that mercury-containing devices are not purchased and re-entering the facility | 68% | 74% | 65% | 100% | 73% |
| Conducted an inventory of mercury-containing products within the institution in last five years | 41% | 50% | 35% | 91% | 69% |
| For those facilities that have not yet won the Making Medicine Mercury Free award: | | | | | |
| Established a mercury-free purchasing policy (a stand-alone policy or included in a broader policy with other constituents of concern) | 73% | 77% | 68% | 100% | 100% |
| Established protocols and written procedures for safe handling of any mercury remaining onsite | 80% | 78% | 82% | 50% | 100% |
| Included proper mercury disposal language in demolition contract templates | 53% | 48% | 60% | 100% | 17% |
| Included mercury-free language in building and renovation contract templates | 54% | 54% | 53% | 100% | 17% |
| Inventoried (and labeled where possible) all mercury devices/sources within the organization and have a plan in place to substitute non-mercury devices | 57% | 57% | 57% | 100% | 100% |
| Replaced all clinical thermometers with mercury-free patient thermometers | 88% | 84% | 92% | 100% | 100% |
| Eliminated the use of mercury-containing blood pressure devices (sphygmomanometers) | 80% | 76% | 86% | 100% | 100% |
| Eliminated the use of mercury-containing clinical devices (e.g., bougies, miller-abbott tubes, cantor tubes, dilators) | 73% | 70% | 77% | 100% | 100% |
| Specified and purchased, where possible, these laboratory items free of mercury: | | | | | |
| Thermometers | 85% | 83% | 87% | 100% | 100% |
| Solutions | 71% | 68% | 73% | 100% | 100% |
| Equipment | 61% | 53% | 70% | 100% | 17% |
| Spoke with the lab manager to inventory mercury-containing laboratory chemicals | 55% | 53% | 57% | 50% | 100% |
| Eliminated the use of B5 fixative in the laboratory | 66% | 68% | 64% | 100% | 100% |
| Eliminated the use of Zenkers solution in the laboratory | 60% | 55% | 65% | 100% | 22% |
| Identified other product substitutions in the lab that eliminate mercury | 42% | 36% | 48% | 100% | 17% |



| FOOD SERVICES IN RESPONSE TO TO COVID-19 | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|------------|--------------|--------------|---------------|--------------------|
| Percentage out of all hospitals that shut down any food service areas for any period of time due to the COVID-19 pandemic. | 36% | 38% | 34% | 64% | 70% |
| The 124 facilities that shut down food service areas, they shut down for these lengths of time: | | | | | |
| 0-2 weeks | 0% | 0% | 0% | 0% | 0% |
| 2-4 weeks | 4% | 5% | 3% | 6% | 0% |
| 4-6 weeks | 10% | 11% | 8% | 13% | 14% |
| Longer than 6 weeks total | 84% | 83% | 85% | 81% | 86% |
| Changed its food and nutrition services protocols as a result of the COVID-19 pandemic. | 68% | 65% | 70% | 68% | 90% |
| Worked with the community to address increased food insecurity as a result of the pandemic. | 37% | 35% | 40% | 56% | 90% |
| SUSTAINABLE FOOD POLICY AND PRACTICES | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Had a clinical champion outside of the food service department that supports increased access to healthy, local, and sustainable foods for patients, staff, and the community | 50% | 47% | 52% | 96% | 100% |
| Developed and implemented a sustainable food service policy | 41% | 35% | 46% | 64% | 40% |
| Developed and implemented contract and/or request for proposal (RFP) language that includes local and sustainable food purchasing and other environmental stewardship goals with food vendors | 37% | 34% | 41% | 88% | 70% |
| Outsourced its food services department or management | 45% | 43% | 48% | 44% | 30% |
| LESS MEAT: MEAT REDUCTION STRATEGIES AND OUTCOMES | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Actively worked to reduce the amount of meat and poultry purchased for cafeteria/retail and patient food service, in alignment with Practice Greenhealth's Less Meat Goal | 70% | 66% | 74% | 100% | 100% |
| Of the 240 facilities actively working to reduce meat, the following strategies were implemented: | | | | | |
| Committed to the World Resource Institute (WRI) Cool Food Pledge in an effort to reduce GHG emissions from food production | 21% | 18% | 24% | 48% | 70% |
| Decreased portion size | 45% | 42% | 48% | 68% | 90% |
| Meat-free day(s) | 30% | 26% | 33% | 60% | 50% |
| Substituted with seafood | 53% | 45% | 61% | 68% | 80% |
| Substituted with whole plant-based proteins (beans, nuts, seeds, soy, etc.) | 75% | 72% | 78% | 88% | 90% |
| Meat blending strategies | 33% | 26% | 38% | 40% | 60% |
| Station layout to highlight salad bar or plant-based options | 61% | 56% | 65% | 72% | 80% |
| Increased offering of vegetarian and vegan dishes | 79% | 75% | 83% | 92% | 100% |
| A la carte menu | 44% | 39% | 48% | 44% | 40% |
| Other | 8% | 6% | 10% | 12% | 20% |



| NORMALIZED MEAT AND CO2E | 10TH PERCENTILE | MEDIAN | 90TH PERCENTILE | COUNT PROVIDING DATA |
|---|-----------------|--------|-----------------|----------------------|
| Pounds meat per food budget dollar (for those submitting meat by category for all three areas: catering, cafeteria, and patient food) | 0.069 | 0.051 | 0.039 | 123 |
| Pounds CO2e from meat per food budget dollar (for those submitting data for all three areas: catering, cafeteria, and patient food) | 5.5 | 3.67 | 2.33 | 123 |
| MTCO2e per pound of meat (for those submitting data for all three areas: catering, cafeteria, and patient food) | 0.041 | 0.033 | 0.024 | 124 |

| LESS MEAT FROM BASELINE YEAR METRICS | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|--|------------|-----------|------------|-----------|-------------|
| Of the 117 facilities reporting valid meat data for current and baseline year: | 117 | 46 | 71 | 24 | 10 |
| Total aggregate pounds of all meat bought by those facilities in current year | 12,669,154 | 1,525,207 | 11,143,947 | 2,636,716 | 1,551,628 |
| Total aggregate pounds of all meat bought by those facilities in baseline year | 15,833,387 | 2,005,385 | 13,828,001 | 3,332,241 | 1,907,032 |
| Reduction in total aggregate pounds of all meat bought by those facilities since baseline year | 3,164,233 | 480,178 | 2,684,054 | 695,525 | 355,404 |
| Percent change in total pounds of all meat bought by those facilities since baseline year | 20% | 24% | 19% | 21% | 19% |
| Percentage of facilities reporting a decrease in total pounds of meat | 88% | 91% | 86% | 88% | 80% |
| Of the 103 facilities reporting a valid decrease in meat from baseline year: | 103 | 42 | 61 | 21 | 8 |
| Median percent meat reduction from baseline year | 20% | 21% | 20% | 19% | 18% |
| Of the 14 facilities reporting a valid increase in meat from baseline year: | 14 | 4 | 10 | 3 | 2 |
| Median percent meat increase from baseline year | 9% | 8% | 13% | 7% | 12% |

Note: Practice Greenhealth eliminated the use of the per meal normalizer, because it was being tracked inconsistently from facility to facility. The organization instead was looking at absolute meat reduction, but there are still some challenges in that it does not account for increases of meat due to patient census or other new activities at the site. It is likely that for the facilities reporting an increase in meat/poultry purchases and are currently working to reduce meat/poultry, it is because they have increased their food service in some way.

| LESS MEAT FROM PREVIOUS YEAR METRICS | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|------------|-----------|------------|-----------|-------------|
| Of the 131 facilities reporting valid meat data for current and previous year: | 131 | 52 | 79 | 22 | 8 |
| Total aggregate pounds of all meat bought by those facilities in current year | 14,708,424 | 1,744,259 | 12,964,165 | 2,358,386 | 1,076,916 |
| Total aggregate pounds of all meat bought by those facilities in previous year | 14,757,203 | 1,754,099 | 13,003,103 | 2,360,443 | 1,074,632 |
| Reduction in total pounds of all meat bought by those facilities since previous year | 48,779 | 9,841 | 38,938 | 2,057 | -2,284 |
| Percent change in total pounds of all meat bought by those facilities since previous year | 0% | 1% | 0% | 0% | 0% |
| Percentage of facilities reporting a decrease in total pounds of meat | 47% | 46% | 47% | 55% | 50% |
| Of the 61 facilities reporting valid decrease in meat from previous year: | 61 | 24 | 37 | 12 | 4 |
| Median percent meat reduction from previous year | 7% | 8% | 6% | 5% | 5% |
| Of the 70 facilities reporting valid increase in meat from previous year: | 70 | 28 | 42 | 10 | 4 |
| Median percent meat increase from previous year | 7% | 7% | 6% | 5% | 5% |

Note: Many facilities had significantly altered food service operations in 2020 due to the pandemic. This may affect the proportion of facilities that were able to report a “decrease” in meat from previous year—as previous year’s meat purchasing is likely lower than typical. Additionally, Practice Greenhealth eliminated the use of the per meal normalizer, because it was being tracked inconsistently from facility to facility. The organization instead was looking at absolute meat reduction, but there are still some challenges in that it does not account for increases of meat due to patient census or other new activities at the site. It is likely that for the facilities reporting an increase in meat/poultry purchases and are currently working to reduce meat/poultry, it is because they have increased their food service in some way.



| LESS MEAT-BY-CATEGORY GREENHOUSE GAS EMISSIONS | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|-----|-------|-------|--------|-------------|
| Of the 240 facilities actively working to reduce the amount of meat and poultry purchased for cafeteria/retail and patient food service, in alignment with Practice Greenhealth's Less Meat Goal: | | | | | |
| Tracked their meat/poultry purchases by category | 85% | 84% | 87% | 80% | 80% |
| Of the 114 facilities providing valid category-level meat data for current and previous year: | | | | | |
| Percent of facilities reporting a decrease in GHG emissions from meat from previous year | 58% | 63% | 55% | 71% | 67% |
| Median percent reduction in GHG emissions from meat from previous year (for the 66 facilities achieving a reduction) | 9% | 7% | 10% | 9% | 11% |
| Median percent increase in GHG emissions from meat from previous year (for the 47 facilities that increased) | 12% | 13% | 12% | 7% | 21% |
| Of the 97 facilities providing valid category-level meat data for current and baseline year: | | | | | |
| Percent of facilities reporting a decrease in GHG emissions from meat from baseline year | 84% | 92% | 78% | 89% | 75% |
| Median percent reduction in GHG emissions from meat from baseline year (for the 81 facilities achieving a reduction) | 24% | 20% | 24% | 23% | 25% |
| Median percent increase in GHG emissions from meat from baseline year (for the 16 facilities that increased) | 9% | 7% | 12% | 9% | 20% |
| BETTER MEAT: SUSTAINABLY-PRODUCED MEAT AND POULTRY | | | | | |
| Preferentially purchase sustainably-produced (better) meat and poultry. | 60% | 56% | 64% | 96% | 100% |
| Of the 206 facilities that preferentially purchase sustainably-produced meat, the following certifications or label claims were used to verify that meat and/or poultry items purchased were raised without routine, non-therapeutic antibiotics | | | | | |
| Regenerative Organic | 0% | 0% | 1% | 4% | 10% |
| Certified Humane (Raised and Handled) | 37% | 35% | 39% | 46% | 70% |
| Certified Organic | 19% | 14% | 24% | 42% | 70% |
| Global Animal Partnership | 22% | 18% | 25% | 21% | 30% |
| American Grassfed Certified | 26% | 20% | 31% | 33% | 50% |
| Certified Grassfed by A Greener World | 1% | 0% | 2% | 0% | 0% |
| Certified Grassfed by Food Alliance | 3% | 2% | 4% | 4% | 0% |
| 100% Grassfed Certified by PCO | 3% | 2% | 4% | 4% | 10% |
| Certified Responsible Antibiotic Use (CRAU) chicken and turkey standard | 11% | 5% | 15% | 29% | 30% |
| USDA Process Verified Program (PVP) Label Claims such as Raised Without Antibiotics or No Antibiotics Ever | 74% | 70% | 77% | 67% | 80% |
| Other | 40% | 44% | 38% | 13% | 20% |



| BETTER MEAT METRIC | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|--------------|-------------|--------------|-------------|-------------|
| Of the 122 facilities that provided volume numbers for sustainably-produced meat/poultry: | 122 | 53 | 69 | 21 | 10 |
| Median percent of sustainably-produced meat/poultry (out of total pounds) | 17% | 14% | 19% | 45% | 63% |
| Total aggregate pounds of sustainably-produced meat and poultry | 3,791,054 | 256,402 | 3,534,652 | 1,508,382 | 1,087,933 |
| LOCAL FOOD PURCHASING | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Encouraged their food suppliers (including distributors and GPOs) to improve tracking and traceability of local and sustainable foods and beverages in their ordering, invoicing, and reporting systems | 68% | 65% | 70% | 100% | 100% |
| Purchased locally grown and produced foods and beverages | 70% | 66% | 73% | 100% | 100% |
| Of the 242 facilities indicating they purchased local food and beverages, these are the methods used: | | | | | |
| On contract with GPO | 52% | 50% | 53% | 52% | 80% |
| On contract with food service management company | 36% | 35% | 37% | 32% | 20% |
| Greenhealth Exchange (GX) | 1% | 0% | 2% | 4% | 10% |
| Food hub or aggregator | 4% | 1% | 6% | 8% | 20% |
| Farm-direct purchasing | 8% | 7% | 9% | 20% | 20% |
| Farmer cooperative | 7% | 5% | 9% | 24% | 30% |
| Local produce vendors | 43% | 34% | 50% | 68% | 90% |
| Other | 10% | 10% | 10% | 32% | 30% |
| LOCAL FOOD METRIC | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Of the 115 facilities providing valid data for local food purchasing: | 115 | 52 | 63 | 18 | 9 |
| Median percent spend on local food purchases | 5% | 4% | 6% | 15% | 13% |
| Total dollars spent on local food and beverage purchasing (by all facilities reporting valid, separate spend data*) | \$23,184,741 | \$2,754,079 | \$20,430,661 | \$8,041,425 | \$5,967,505 |

*Only facilities that indicated they were successfully able to separate spend numbers for local and sustainable food and beverage purchases were used in the percent and total spend analysis.



| SUSTAINABLE FOOD PURCHASING | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|--------------|-------------|--------------|--------------|-------------|
| Encouraged their food suppliers (including distributors and GPOs) to improve tracking and traceability of local and sustainable foods and beverages in their ordering, invoicing, and reporting systems | 68% | 65% | 70% | 100% | 100% |
| Purchased sustainably grown and produced foods and beverages | 70% | 67% | 73% | 100% | 100% |
| Of the 243 facilities indicating they purchased sustainably grown and produced food and beverages, these are the categories prioritized: | | | | | |
| Produce (All forms: fresh, whole or minimally-processed; frozen; canned) | 49% | 45% | 54% | 76% | 80% |
| Meat and poultry | 57% | 55% | 60% | 84% | 90% |
| Seafood | 33% | 28% | 39% | 40% | 50% |
| Dairy (including fluid milk) | 48% | 48% | 49% | 40% | 60% |
| Eggs (shelled, fluid and hard boiled) | 35% | 29% | 41% | 52% | 60% |
| Grocery/dry goods | 26% | 21% | 31% | 36% | 50% |
| Beverages | 31% | 29% | 33% | 52% | 50% |
| SUSTAINABLE FOOD METRICS | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Of the 115 facilities providing data for sustainable food purchasing: | 115 | 50 | 65 | 18 | 9 |
| Median percent spend on sustainable food purchases | 14% | 13% | 15% | 20% | 27% |
| Total dollars spent on sustainable food and beverage purchasing (by all facilities reporting valid, separate spend data*) | \$41,790,863 | \$3,721,801 | \$38,069,061 | \$12,898,375 | \$8,924,806 |
| *Only facilities that indicated they were successfully able to separate spend numbers for local and sustainable food and beverage purchases were used in the percent and total spend analysis. | | | | | |



| FOOD AND BEVERAGE ENVIRONMENTS: EDUCATION & PROMOTION | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|-----|-------|-------|--------|-------------|
| Strategies utilized to market healthy local and sustainable food options: | | | | | |
| Communication of healthy local and sustainably produced foods through menu labeling | 50% | 45% | 55% | 76% | 90% |
| Pricing incentives on healthy local and sustainable food options | 30% | 32% | 27% | 24% | 60% |
| Placement of healthy local and sustainable food options | 59% | 56% | 60% | 88% | 80% |
| Sampling of healthy local and sustainable food options | 38% | 33% | 43% | 56% | 60% |
| Other promotions | 28% | 22% | 34% | 72% | 70% |
| We do not yet promote local and sustainable foods | 15% | 17% | 13% | 4% | 0% |
| Conducted a facility-wide education campaign that improves the visibility of local and sustainable food | 61% | 59% | 62% | 92% | 100% |
| Methods used to educate on healthier/sustainable food: | | | | | |
| Cafeteria signage | 69% | 65% | 73% | 88% | 100% |
| Internal newsletters | 44% | 43% | 45% | 92% | 80% |
| Featured events | 54% | 52% | 56% | 80% | 80% |
| Catering | 12% | 11% | 13% | 24% | 30% |
| Patient trays | 21% | 21% | 22% | 60% | 60% |
| Other | 19% | 16% | 22% | 40% | 60% |



| TAP WATER ACCESS AND HEALTHY BEVERAGES | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|------------|------------|---------|--------|-------------|
| The following activities have been implemented to increase access to tap water and to promote the purchasing of healthier beverages: | | | | | |
| Provided and promoted reusable beverage containers | 39% | 38% | 40% | 76% | 80% |
| Eliminated bottled water from patient menus and cafeterias | 10% | 11% | 10% | 20% | 10% |
| Installed filtered water stations and/or installed water bottle filling stations throughout the facility or in cafeterias | 46% | 44% | 48% | 60% | 50% |
| Provided free 'spa water' at functions and meetings instead of bottled water | 18% | 16% | 20% | 36% | 30% |
| Increase the availability of healthy beverages by fountains and dispensers | #N/A | #N/A | #N/A | #N/A | #N/A |
| Changed the relative price of healthy vs. unhealthy beverages to make healthy choices more affordable and desirable | 25% | 24% | 26% | 36% | 50% |
| Prioritized the placement of healthier beverages in coolers and at fountain stations | 51% | 45% | 57% | 80% | 80% |
| Other | 14% | 12% | 16% | 40% | 50% |
| Actively worked to increase healthy beverage options in alignment with Practice Greenhealth's Healthier Beverages Goal | 63% | 64% | 63% | 96% | 90% |
| Strategies to increase access to healthy food: | | | | | |
| Hosted local farmers market | 30% | 22% | 39% | 56% | 60% |
| Hosted on-site community supported agriculture (CSA) food box program for patients, employees, and/or community residents | 15% | 10% | 19% | 28% | 40% |
| Supported on-site hospital farm and/or food-producing garden | 18% | 16% | 20% | 44% | 30% |
| Supported off-site community garden or farm | 18% | 16% | 20% | 56% | 60% |
| Developed and offered a fruit and vegetable prescription program | 11% | 8% | 13% | 36% | 50% |
| Conducted food insecurity screenings | 29% | 26% | 32% | 64% | 70% |
| Offer medically tailored meal programs | 16% | 17% | 15% | 16% | 10% |
| Other | 33% | 34% | 33% | 52% | 60% |
| STRATEGIES TO PROMOTE HEALTHY FOOD ACCESS AND SYSTEMS IN THE COMMUNITY | | | | | |
| | FOR-PROFIT | NON-PROFIT | FEDERAL | | |
| Strategies the facility uses to promote healthy food access/healthy food systems in the community: | | | | | |
| Count of facilities responding | 5 | 248 | 37 | | |
| Financial investments | 40% | 21% | 5% | | |
| Grants | 20% | 23% | 5% | | |
| Staff time | 40% | 39% | 46% | | |
| In-kind support | 0% | 26% | 14% | | |
| Engaged in any of the above activities | 60% | 53% | 51% | | |
| We do not engage in these activities | 0% | 12% | 19% | | |
| Do not know | 20% | 15% | 32% | | |



| FOOD SERVICEWARE: PURCHASING AND DISPOSAL | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|--|-----|-------|-------|--------|-------------|
| Areas where reusable food serveware was used: | | | | | |
| Cafeteria dine-in | 23% | 24% | 20% | 36% | 10% |
| Cafeteria to-go | 8% | 8% | 7% | 28% | 10% |
| Patient tray | 77% | 74% | 80% | 100% | 100% |
| Catering | 32% | 30% | 34% | 28% | 40% |
| Other retail outlets | 3% | 1% | 4% | 8% | 30% |
| Areas where plastic straws have been removed: | | | | | |
| Retail | 43% | 38% | 48% | 84% | 90% |
| Catering | 41% | 34% | 49% | 72% | 70% |
| Patient meals | 16% | 9% | 22% | 24% | 10% |
| Other | 5% | 5% | 5% | 8% | 10% |
| Virtually eliminated polystyrene (Styrofoam) purchase and usage in food service | 55% | 51% | 59% | 80% | 90% |
| Offered the option to recycle in the cafeteria as part of a commingled or other recycling program | 62% | 62% | 63% | 92% | 90% |
| Purchased certified commercially compostable single-use food serveware (such as certified by Biodegradable Products Institute (BPI)) | 62% | 57% | 65% | 76% | 90% |
| Of the 213 facilities that purchased compostable food serveware, the following are methods being used for disposal: | | | | | |
| On-site digestion | 6% | 4% | 7% | 16% | 0% |
| On-site compost | 3% | 4% | 3% | 0% | 0% |
| Off-site digestion | 3% | 2% | 3% | 5% | 0% |
| Off-site compost | 23% | 15% | 30% | 37% | 56% |
| Landfill | 71% | 75% | 67% | 68% | 44% |



| LESS FOOD TO LANDFILL | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
|---|-----------|----------|-----------|-----------|-------------|
| Working on prevention/source reduction of food waste | 72% | 69% | 76% | 100% | 100% |
| Has a plan or strategy to maximize food as a resource—including reducing wasted food | 61% | 56% | 67% | 92% | 90% |
| Working on food recovery and donation | 30% | 23% | 36% | 40% | 40% |
| Of the 104 facilities that are working on food recovery and donation: | | | | | |
| Had a food waste donation policy/plan that is implemented and tracked | 44% | 38% | 47% | 80% | 50% |
| Undertaken any other efforts to divert food waste from the landfill or incinerator | 51% | 39% | 63% | 76% | 90% |
| Of the 176 facilities that have undertaken other efforts to divert food waste from the landfill and incinerator, the following activities were utilized: | | | | | |
| Composting | 65% | 60% | 69% | 47% | 67% |
| Digestion | 14% | 8% | 17% | 32% | 0% |
| Animal feed | 10% | 12% | 8% | 11% | 11% |
| Other | 17% | 22% | 15% | 21% | 44% |
| FOOD WASTE DIVERSION METRICS | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Of the 97 facilities providing any data for food waste diversion: | | | | | |
| Median food waste diverted from landfill (tons) | 23.6 | 12.9 | 37.0 | 59.0 | 79.9 |
| Total food waste diverted from landfill (tons) | 11,714 | 538 | 11,176 | 5,818 | 5,821 |
| Of the 70 facilities providing data for composting: | | | | | |
| Median food waste diverted as compost (tons) | 24 | 19 | 35.7 | 59 | 77 |
| Of the 14 facilities providing data for digestion: | | | | | |
| Median food waste digested (tons) | 39.7 | 9.1 | 52.1 | 10.8 | 61.2 |
| Of the 38 facilities providing data for food donation (tons): | | | | | |
| Median food donated (tons) | 2.6 | 1.1 | 5 | 1.7 | 3.7 |
| Total all food donated all facilities (tons) | 5,235 | 46 | 5,188 | 5,071 | 5,068 |
| Of the 28 facilities providing tons data for food donation (\$ value): | | | | | |
| Median dollar (\$) value of food donated | \$8,826 | \$629 | \$19,500 | \$8,378 | \$22,963 |
| Total dollar (\$) value of all food donated, all facilities | \$509,482 | \$32,818 | \$476,664 | \$125,251 | \$159,400 |
| Of the 9 facilities providing data for food animal feed: | | | | | |
| Median food diverted for animal feed (tons) | 36.1 | 19.0 | 83.0 | No Data | No Data |

| COVID RESPONSE | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|-------------|-----------------------|-----------------|------------------------|------------------|
| Cancelled or postponed elective surgeries for any period of time (either by organizational decision or mandate) during 2020 due to COVID-19 | 53% | 50% | 55% | 80% | 60% |
| Of the 182 facilities that cancelled or postponed elective surgeries, this is the length of time those delays were in place: | | | | | |
| 0-2 weeks | 11% | 11% | 10% | 15% | 17% |
| 2-4 weeks | 11% | 11% | 11% | 10% | 0% |
| 4-6 weeks | 30% | 37% | 24% | 30% | 17% |
| Longer than 6 weeks total | 39% | 36% | 43% | 45% | 67% |
| Changes were made to operating room protocol as a result of the COVID-19 pandemic | 53% | 52% | 54% | 76% | 70% |
| SUSTAINABILITY CHAMPION IN THE OR | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Has a sustainability champion in the OR | 48% | 43% | 52% | 100% | 100% |
| WASTE SEGREGATION, MANAGEMENT AND RECYCLING IN THE OR | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Process in place to reduce and divert waste in the operating room: | | | | | |
| Diverted pre-incision (prior to case) waste from regulated medical waste stream into solid waste or recycling stream | 57% | 58% | 57% | 88% | 100% |
| Segregated non-infectious solid waste from the regulated medical waste stream during the procedure | 59% | 61% | 57% | 84% | 80% |
| Segregated non-infectious solid waste from the regulated medical waste stream after the procedure | 52% | 54% | 49% | 80% | 80% |
| Recycled clinical/medical plastics in the OR | 42% | 43% | 41% | 72% | 100% |
| FLUID MANAGEMENT | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Utilized a fluid management system that does not use disposable suction canisters as a means of collecting and disposing fluid medical waste (i.e., mobile cart, reusable canister systems, or direct-to-drain system) | 64% | 63% | 65% | 88% | 90% |
| Of the 221 facilities that utilized a reusable canister fluid management system: | | | | | |
| Being utilized for fluid management in more than 75% of ORs | 84% | 90% | 78% | 100% | 89% |
| AVOIDED ANNUAL WASTE AND COST SAVINGS FROM REUSABLE CANISTER FLUID MANAGEMENT SYSTEMS | SUM OF ALL | PER FACILITY (MEDIAN) | PER OR (MEDIAN) | PER FACILITY (AVERAGE) | PER OR (AVERAGE) |
| Avoided waste (tonnage) | 1,843 | 11.70 | 1.49 | 44.96 | 2.04 |
| Avoided waste disposal fees from disposable canisters | \$2,504,718 | \$20,657 | \$1,555 | \$54,450 | \$2,730 |
| Avoided purchase cost of disposable canisters | \$2,279,270 | \$32,781 | \$2,646 | \$58,443 | \$2,824 |
| Avoided purchase cost of chemical solidifiers (if applicable) | \$1,165,866 | \$32,638 | \$2,546 | \$52,994 | \$2,850 |
| Total cost savings from fluid management system | \$5,698,314 | \$66,124 | \$4,883 | \$123,876 | \$6,063 |



| CLINICAL PLASTICS RECYCLING | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|-----|-------|-------|--------|------------|
| Recycled clinical/medical plastics in the OR | 42% | 43% | 41% | 72% | 100% |
| Of the 145 facilities that recycled clinical plastics in the OR: | | | | | |
| Tracked the weight of clinical/medical plastics recycled in the OR | 15% | 13% | 18% | 50% | 40% |
| Of the facilities that recycled clinical plastics in the OR, the following types of plastics are recycled: | | | | | |
| Basins, pitchers, bowls and medicine cups | 66% | 73% | 60% | 94% | 90% |
| Blister packs/shrink wrap | 21% | 21% | 21% | 28% | 50% |
| Blue wrap | 39% | 34% | 42% | 72% | 80% |
| Corrugated respiratory tubing | 0% | 0% | 0% | 0% | 0% |
| Disposable clean suction canisters | 24% | 30% | 19% | 6% | 0% |
| Irrigation bottles (Sterile saline and water bottles) | 83% | 85% | 81% | 100% | 100% |
| IV bags, tubing and outer plastic wrap | 17% | 23% | 12% | 39% | 40% |
| Light handle covers | 31% | 34% | 29% | 11% | 40% |
| Medication vials and caps | 20% | 21% | 19% | 44% | 40% |
| Overwraps | 24% | 25% | 23% | 39% | 60% |
| Oxygen tubing | 1% | 3% | 0% | 0% | 0% |
| Peel pouches | 18% | 18% | 18% | 28% | 50% |
| Perfusion tubing | 1% | 1% | 0% | 0% | 0% |
| Respiratory face masks | 2% | 1% | 3% | 11% | 10% |
| Rigid inserts | 61% | 66% | 56% | 72% | 90% |
| Skin prep solution bottles | 35% | 31% | 40% | 61% | 70% |
| Syringe casings | 11% | 13% | 10% | 28% | 40% |
| Trays | 59% | 58% | 62% | 61% | 60% |
| Tyvek | 10% | 7% | 12% | 17% | 40% |
| Urinals/bedpans | 13% | 18% | 8% | 33% | 20% |
| Other | 17% | 15% | 18% | 44% | 50% |



| MEDICAL DEVICE REPROCESSING | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|------------|--------------|--------------|---------------|-------------------|
| Implemented a medical device reprocessing program with an FDA-approved third party reprocessor | 88% | 83% | 92% | 84% | 90% |

| MEDICAL DEVICE REPROCESSING AGGREGATE DATA | TOTAL |
|--|--------------|
| Total weight of devices collected (lbs.) | 1,610,599 |
| Total weight of devices collected (tons) | 805 |
| Total avoided waste disposal costs | \$1,210,950 |
| Total dollars spent on purchase of reprocessed devices | \$50,986,069 |
| Total dollars saved annually through medical device reprocessing purchasing program | \$42,286,509 |
| Total dollars saved through SUD reprocessing including both avoided waste disposal costs and reduced purchasing cost | \$43,497,459 |

| MEDICAL DEVICE REPROCESSING MEDIANS | ALL |
|---|------------|
| Pounds of reprocessed devices collected per OR procedure (lbs.) | 0.57 |
| Pounds of reprocessed devices collected per OR (lbs.) | 393 |

| ANNUAL COST-SAVINGS FROM MEDICAL DEVICE REPROCESSING | PER FACILITY | PER OR |
|--|---------------------|---------------|
| Median cost-savings from medical device reprocessing program | \$117,645 | \$8,599 |
| Median cost-savings from avoided waste disposal costs from devices collected for reprocessing | \$1,729 | \$109 |
| Median cost-savings on reprocessed devices from both purchasing reprocessed devices and avoided waste disposal | \$96,110 | \$7,062 |



| REPROCESSED DEVICES: RATE OF COLLECTING AND PURCHASING | COLLECT ONLY | PURCHASE ONLY | COLLECT AND PURCHASE |
|---|--------------|---------------|----------------------|
| Of the 303 facilities that have implemented a medical device reprocessing program with an FDA-approved third party reprocessor, this percentage are collecting and/or purchasing these devices: | | | |
| Pneumatic tourniquet cuffs | 20% | 1% | 57% |
| DVT sleeves/sequential compression | 19% | 1% | 55% |
| Ligasure sealers/dividers | 30% | 0% | 51% |
| Pulse oximetry probes and sensors | 27% | 1% | 44% |
| EP catheters | 6% | 1% | 39% |
| Lateral transfer device (Hovermatt) | 14% | 0% | 38% |
| EP diagnostic catheters | 8% | 0% | 33% |
| Trocars | 44% | 0% | 33% |
| EKG cables and lead wires | 14% | 1% | 31% |
| Ultrasonic scalpels | 33% | 0% | 30% |
| Bits/burs/blades | 38% | 1% | 30% |
| Arthroscopic wands and shavers | 47% | 0% | 30% |
| Laparoscopic scissors/scissor tips | 25% | 0% | 30% |
| Laparoscopic graspers | 28% | 0% | 30% |
| Catheter introducer sheaths | 16% | 0% | 29% |
| EP cables | 10% | 1% | 28% |
| Laparoscopic dissectors | 28% | 0% | 28% |
| Fall alarms | 16% | 0% | 23% |
| ECG leads and cables | 18% | 1% | 21% |
| Ultrasound catheters | 10% | 0% | 20% |
| ICE catheter | 5% | 0% | 20% |
| Laparoscopic needle drivers/suture passers | 30% | 1% | 18% |
| Reamers | 14% | 0% | 17% |
| External fixation devices | 20% | 1% | 15% |
| Multiclip appliers | 19% | 0% | 12% |
| Hot biopsy forceps | 19% | 0% | 2% |
| Chisels | 11% | 0% | 2% |
| Cold biopsy forceps | 13% | 0% | 2% |

Note: This table is sorted by the percent of facilities that both collected and purchased different devices for reprocessing.



| TYPES OF REPROCESSED DEVICES | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|------------|--------------|--------------|---------------|-------------------|
| Median number of types of devices collected only (out of 28 types) | 8.0 | 8.0 | 8.0 | 8.5 | 8.0 |
| Median number of types of devices purchased only (out of 28 types) | 1.0 | 1.0 | 1.0 | 1.0 | 0.0 |
| Median number of types of devices collected and purchased (out of 28 types) | 7.5 | 6.0 | 8.0 | 6.0 | 6.0 |

| OR KIT REFORMULATION | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|------------|--------------|--------------|---------------|-------------------|
| Reformulated custom procedure packs--removing supplies not typically used--to reduce purchase and disposal fees for excess supplies, and decrease the environmental impact of manufacture and disposal of those supplies | 75% | 77% | 74% | 96% | 100% |
| Had a process in place to regularly compare, review and update surgeon preference cards for the same type of procedure | 77% | 80% | 74% | 96% | 90% |
| Of the 260 facilities that indicated they reformulated OR kits and provided data: | | | | | |
| Median percent of kits reformulated* | 100 | 100 | 100 | 100 | 100 |

*A median of 100% for OR kit reformulation is an indication that hospitals that chose to reformulate kits tended to reformulate all of them.

| ANNUAL COST-SAVINGS FROM OR KIT REFORMULATION | PER FACILITY | PER OR |
|--|---------------------|---------------|
| Median avoided purchase costs | \$24,560 | \$1,055 |
| Median avoided waste disposal costs | \$800 | \$70 |
| Aggregate annual cost-savings from OR kit reformulation (for 50 facilities providing data) | \$2,432,182 | |



| REUSABLE ITEMS | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|-----|-------|-------|--------|------------|
| Purchased and used reusable surgical items where environmentally and clinically preferable | 75% | 75% | 74% | 96% | 100% |
| Of the 259 facilities that use reusable surgical items, the following items are indicated as being used more that 75% of the time: | | | | | |
| Anesthesia circuits | 2% | 2% | 2% | 8% | 20% |
| Back table covers | 3% | 3% | 4% | 8% | 10% |
| Blood pressure cuffs | 32% | 31% | 32% | 58% | 60% |
| Cautery handles and cords | 14% | 13% | 14% | 25% | 40% |
| Corner protectors | 20% | 20% | 19% | 33% | 30% |
| Cubicle curtains | 27% | 25% | 27% | 25% | 30% |
| Isolation gowns | 21% | 18% | 24% | 21% | 10% |
| EKG/ECG leads and cables | 34% | 38% | 28% | 21% | 20% |
| Endotracheal tubes (ETT) | 0% | 1% | 0% | 4% | 0% |
| Grounding pads | 14% | 13% | 15% | 13% | 0% |
| Laryngeal mask airways (LMA) | 10% | 11% | 9% | 21% | 10% |
| Laryngoscope blades/handles | 42% | 40% | 44% | 54% | 60% |
| Light handles | 27% | 32% | 24% | 29% | 50% |
| Mayo stand covers | 2% | 2% | 2% | 4% | 10% |
| Patient belonging bags | 3% | 3% | 4% | 4% | 0% |
| Patient linens (gowns, sheets, bath blankets, pillow cases) | 74% | 76% | 71% | 88% | 90% |
| Patient positioning devices | 71% | 72% | 69% | 88% | 90% |
| Patient transfer devices | 47% | 48% | 44% | 63% | 80% |
| Patient warming devices | 14% | 12% | 15% | 21% | 20% |
| Pneumatic compression tourniquets | 26% | 29% | 24% | 21% | 30% |
| Pulse oximetry sensors | 34% | 40% | 30% | 38% | 40% |
| Sterilization wrap | 5% | 7% | 4% | 17% | 30% |
| Surgical staplers | 4% | 3% | 5% | 4% | 10% |
| Suction canisters | 8% | 10% | 6% | 8% | 20% |
| Surgical attire (including scrubs, jackets, hats/caps, shoes) | 50% | 51% | 48% | 54% | 60% |
| Surgical drapes | 6% | 6% | 7% | 13% | 10% |
| Surgical gowns | 12% | 13% | 12% | 21% | 20% |



| REUSABLE ITEMS | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|-----|-------|-------|--------|------------|
| Surgical towels | 24% | 24% | 24% | 50% | 50% |
| Safety belts | 49% | 52% | 44% | 71% | 90% |
| Surgical basins, pitchers and medicine cups | 31% | 33% | 27% | 71% | 80% |
| Trocars | 18% | 22% | 14% | 42% | 50% |
| Velcro straps | 24% | 29% | 19% | 42% | 50% |
| Visitor jump suits | 4% | 6% | 2% | 0% | 0% |
| Other | 8% | 6% | 10% | 29% | 30% |

| REUSABLE ITEM COUNT | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|-----|-------|-------|--------|------------|
| Median number of reusable product categories (out of 34) | 7.0 | 7.0 | 7.0 | 10.5 | 12.0 |

| REUSABLE LINENS | AGGREGATE SUM | MEDIAN PER FACILITY | MEDIAN PER OR PROCEDURE |
|-----------------------------------|---------------|---------------------|-------------------------|
| Tons of reusable linens | 5,947 | 46 | 0.0061 |
| Cost savings from reusable linens | \$1,200,654 | \$26,089 | \$4.05 |

| RIGID STERILIZATION CONTAINERS | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|-----|-------|-------|--------|------------|
| Utilized reusable sterilization containers for surgical instrumentation and reduction of disposable sterile wrap | 77% | 77% | 77% | 100% | 100% |
| Of the facilities using reusable rigid sterilization containers who provided data: | | | | | |
| Median percent of kits utilizing reusable sterilization containers | 65% | 65% | 66% | 67% | 67% |
| Total avoided waste disposal pounds from using rigid sterilization containers per OR procedure | 1.6 | 1.4 | 4.0 | 3.8 | 1.5 |

| ANNUAL COST INFORMATION FROM RIGID STERILIZATION CONTAINERS | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|----------|---------|----------|----------|------------|
| Of the facilities using reusable rigid sterilization containers who provided data: | | | | | |
| Median spent on blue wrap per facility | \$19,771 | \$8,067 | \$37,794 | \$35,500 | \$22,144 |
| Median spent on blue wrap per OR | \$1,622 | \$1,476 | \$1,805 | \$1,884 | \$1,384 |
| Median spent on blue wrap per OR procedure | \$2.73 | \$2.82 | \$2.69 | \$2.67 | \$1.97 |
| Percent of facilities that decreased total blue wrap spend per OR procedure | 62% | 67% | 57% | 71% | 78% |
| Of those 53 facilities that decreased total blue wrap spend per OR procedure, this is the median decrease | 14% | 14% | 15% | 8% | 16% |
| Percent of facilities that increased total blue wrap spend per OR procedure | 38% | 33% | 43% | 29% | 22% |
| Of those 33 facilities that increased total blue wrap spend per OR procedure, this is the median increase | 16% | 22% | 14% | 25% | 19% |



| | MEDIAN PER FACILITY | MEDIAN PER OR | MEDIAN PER OR PROCEDURE | | |
|---|---------------------|---------------|-------------------------|---------------|-------------------|
| Median cost-savings for avoided disposable bluewrap purchase | \$15,000 | \$1,250 | \$3.01 | | |
| Median cost-savings for avoided waste disposal fees | \$1,768 | \$71 | \$0.15 | | |
| Median cost-savings from rigid sterilization containers | \$15,000 | \$1,329 | \$3.22 | | |
| Aggregate cost-savings from rigid sterilization containers (sum for all facilities reporting savings) | \$1,883,145 | | | | |
| ENERGY MANAGEMENT IN THE OR | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Programmed the HVAC system to reduce air changes per hour (HVAC setback) when the ORs are unoccupied to reduce energy consumption | 39% | 38% | 39% | 68% | 80% |
| Of the 135 facilities that utilized HVAC setback, these mechanisms were used: | | | | | |
| Building automation system | 77% | 73% | 83% | 94% | 100% |
| Occupancy sensors | 45% | 41% | 49% | 71% | 75% |
| Scheduling system | 34% | 27% | 41% | 71% | 75% |
| Mushroom button | 7% | 8% | 6% | 12% | 0% |
| Other | 10% | 9% | 10% | 35% | 38% |
| Utilized LED surgical lighting | 70% | 68% | 73% | 100% | 100% |
| Set back or turned down ambient lighting to reduce energy consumption when the OR is unoccupied and not in use | 66% | 68% | 64% | 96% | 100% |
| Of the 227 facilities setting back ambient lighting: | | | | | |
| Staff behavior | 85% | 92% | 78% | 96% | 100% |
| Occupancy sensors | 49% | 46% | 54% | 67% | 70% |
| Scheduling system | 15% | 14% | 17% | 25% | 30% |
| Building automation system | 18% | 12% | 24% | 29% | 40% |
| Other | 7% | 10% | 5% | 0% | 0% |



| ENERGY METRICS IN THE OR | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|------------|--------------|--------------|---------------|-------------------|
| Median percent of ORs using HVAC setback (for those facilities that have HVAC setback) | 100 | 100 | 90 | 100 | 100 |
| Percentage of all ORs in the dataset that use HVAC setback | 18% | 9% | 30% | 24% | 23% |
| Median rate of air exchanges per hour (ACH) during normal hours/when the OR is occupied | 21 | 21 | 20 | 20 | 20 |
| Median rate of air exchanges per hour (ACH) during unoccupied/setback mode | 10.5 | 11 | 10 | 10 | 10.5 |
| Median percent reduction in air exchange rate (occupied to unoccupied) | 52 | 50 | 53.7 | 61.5 | 55 |
| Median percent of ORs with LED surgical lighting (for those facilities that utilize LED surgical lighting) | 100 | 100 | 100 | 100 | 100 |
| Percentage of all ORs in the dataset that utilize LED surgical lighting | 18% | 8% | 28% | 17% | 19% |

Note: A median of 100% for HVAC setback and LED surgical lighting means that if facilities utilized these technologies they tended to use them for 100% of their ORs. That said, Practice Greenhealth suspects the HVAC setback numbers may be over reported--as many hospitals tend to keep 1-2 emergency ORs online and ventilated at full air changes for emergency cases at night.

| ANNUAL COST-SAVINGS FOR ENERGY REDUCTION IN OR | ALL |
|--|------------|
| Median energy cost-savings from HVAC setback per facility | \$30,000 |
| Median energy cost-savings from HVAC setback per OR | \$1,150 |
| Median energy cost-savings from LED surgical lighting per facility | \$3,089 |
| Median energy cost-savings from LED surgical lighting per OR | \$185 |
| Aggregate cost-savings for energy reduction in OR (HVAC+LED) (for all facilities reporting cost-savings) | \$922,106 |

| ANNUAL ENERGY SAVINGS FOR ENERGY REDUCTION IN OR | ALL |
|--|------------|
| Median kWh savings from HVAC setback per facility | 352,932 |
| Median kWh cost-savings from HVAC setback per OR | 22,356 |
| Median kWh savings from LED surgical lighting per facility | 28,284 |
| Median kWh cost-savings from LED surgical lighting per OR | 1,476 |

| CHEMICALS OF CONCERN | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|--|------------|--------------|--------------|---------------|-------------------|
| Facility has implemented a surgical smoke evacuation system | 54% | 56% | 51% | 76% | 80% |
| Facility has implemented strategies to reduce exposure to chemicals of concern in the OR | 24% | 25% | 24% | 28% | 60% |



| PHARMACEUTICAL WASTE REDUCTION | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
|---|-----|-------|-------|--------|------------|
| Purchased or had in-house pharmacy prepare pre-filled syringes (not including boxed bristojets) to minimize waste of unneeded pharmaceuticals | 73% | 70% | 75% | 100% | 100% |
| Of the 251 facilities that that utilize pre-filled syringes, the following types are purchased: | | | | | |
| Atropine | 61% | 61% | 61% | 64% | 30% |
| Calcium chloride | 60% | 61% | 60% | 52% | 30% |
| Ephedrine | 58% | 56% | 61% | 84% | 90% |
| Epinephrine | 69% | 66% | 71% | 60% | 30% |
| Ketamine | 43% | 41% | 45% | 64% | 60% |
| Lidocaine | 62% | 60% | 64% | 76% | 60% |
| Phenylephrine | 58% | 50% | 66% | 92% | 80% |
| Succinylcholine | 47% | 44% | 50% | 72% | 90% |
| Propofol | 9% | 8% | 11% | 20% | 20% |
| Other | 58% | 58% | 58% | 60% | 60% |
| Purchased the smallest pharmaceutical vials possible to minimize pharmaceutical wastage | 67% | 65% | 68% | 96% | 100% |
| REDUCTION STRATEGIES FOR ANESTHETIC GASES | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Provided or held anesthesia staff education on environmental impacts of inhaled anesthetics and reduction strategies for clinicians | 55% | 52% | 58% | 88% | 100% |
| Removed desflurane from its formulary/general use | 33% | 34% | 32% | 36% | 20% |
| Of the 170 facilities that did not remove desflurane from the formulary: | | | | | |
| Removed desflurane vaporizers from the operating room to minimize use | 32% | 24% | 40% | 38% | 75% |



| VOLUME AND GREENHOUSE GAS EMISSIONS (GHGS) FROM INHALED ANESTHETICS | AGGREGATE SUM ALL FACILITIES | MEDIAN PER OR PROCEDURE | MEDIAN PER GENERAL ANESTHESIA CASE | MEDIAN PER GENERAL ANESTHESIA HOUR |
|--|------------------------------|-------------------------|------------------------------------|------------------------------------|
| Volume of inhaled anesthetic agents purchased | | | | |
| Sevoflurane (mL) | 40,169,233 | 20.1 | 17.5 | 9.5 |
| Isoflurane (mL) | 4,414,050 | 0.14 | 0.09 | 0.22 |
| Desflurane (mL) | 4,294,560 | 0.57 | 0.46 | 0.21 |
| Nitrous oxide (pounds) | 586,332 | 0.17 | 0.19 | 0.12 |
| Total GHG emissions from inhaled anesthetics in metric tons of carbon dioxide equivalent (MTCO2e) | | | | |
| MTCO2e from sevoflurane | 7,948 | 0.0040 | 0.0035 | 0.0019 |
| MTCO2e from isoflurane | 3,368 | 0.0001 | 0.0001 | 0.0002 |
| MTCO2e from desflurane | 15,981 | 0.0021 | 0.0017 | 0.0008 |
| MTCO2e from nitrous oxide | 55,748 | 0.0228 | 0.0303 | 0.0143 |
| Total MTCO2e emissions from all inhaled anesthetics | 116,066 | 0.0440 | 0.0444 | 0.0254 |

| GREENHOUSE GAS EMISSION REDUCTIONS FROM INHALED ANESTHETICS | ALL |
|---|-----|
| Of the 65 facilities that had a reduction from previous year, the median reduction was:* | |
| Median % reduction (in MTCO2e) from previous year | 24% |
| Of the 80 facilities that had a reduction from baseline year, the median reduction was:* | |
| Median % reduction (in MTCO2e) from baseline year | 47% |
| *It is important to note that because of the unusual reduction in surgeries due to COVID-19 in 2020, some hospitals had an increase in GHGs from inhaled anesthetics that was likely not due to sustainability programming, but rather to increased patient load in 2021. | |
| Of the 12 facilities that increased normalized GHGs from inhaled anesthetics from baseline: | |
| Median % increase (in MTCO2e) per anesthesia case from inhaled anesthetics from baseline year | 56% |
| Of the 39 facilities that achieved a reduction in normalized GHGs from inhaled anesthetics from baseline: | |
| Median % reduction (in MTCO2e) per anesthesia case from inhaled anesthetics from baseline year | 61% |

*Emissions prevented was determined by calculating the difference in emissions per case each year for each facility. It is then assumed that this is the amount per case that would be added to current emissions if the facility had not changed their practices. This amount is multiplied by the number of current-year cases to determine the emissions avoided.

| REDUCED EMISSIONS FROM INHALED ANESTHETICS FROM BASELINE | MTCO2E EMISSIONS |
|---|------------------|
| Of the 50 facilities that tracked volume of anesthetics in both baseline and current year, 39 reduced emissions. For the 78% (39) that reduced emissions per case from anesthetics: | |
| Count in this category | 39 |
| Median % reduction in emissions per case | 61% |
| Median amount of MTCO2e emissions prevented per case | 0.085 |
| Median MTCO2e emissions prevented per facility | 589 |
| Sum MTCO2e emissions prevented for these facilities tracking spends | 20,430 |
| Emissions prevented was determined by calculating the difference in emissions per case each year for each facility. It is then assumed that this is the amount per case that would be added to current emissions if the facility had not changed their practices. This amount is multiplied by the number of current-year cases to determine the emissions avoided. | |

| REDUCED SPEND FROM INHALED ANESTHETICS FROM BASELINE | DOLLARS SPENT | MTCO2E EMISSIONS (IF ALSO TRACKING COST) |
|--|---------------|--|
| Of the 14 facilities that tracked cost (and volume) of anesthetics in both baseline and current year, 12 reduced GHG emissions. For those that reduced GHG emissions per case from anesthetics: | | |
| Count in this category | 12 | 12 |
| Median % reduction per case | 52% | 71% |
| Median amount prevented per case | \$7.71 | 0.0899 |
| Median prevented per facility | \$48,013 | 622 |
| Total aggregate prevented for those facilities tracking spend | \$1,146,650 | 12,838 |
| Emissions and spend prevented was determined by calculating the difference in spend per case each year for each facility. It is then assumed that this is the amount per case that would be added to current spend if the facility had not changed their practices. This amount is multiplied by the number of current-year cases to determine the spend avoided. Spend per case for each year was calculated separately for each year. Some facilities experienced price changes that may affect amount money saved that is not accounted for here. | | |

| MEDIAN COST-SAVINGS FOR KEY GREENING THE OR PROGRAMS | PER OR | PER FACILITY |
|---|---------|--------------|
| Collection and purchase of reprocessed medical devices (SUDs) | \$7,062 | \$96,110 |
| Reusable canister fluid management systems | \$4,883 | \$66,124 |
| OR kit reformulation | \$1,249 | \$26,458 |
| Reusable sterilization containers | \$1,329 | \$15,000 |
| HVAC setback | \$1,150 | \$30,000 |
| Reusable linens | \$2,352 | \$26,089 |
| LED surgical lighting | \$185 | \$3,089 |
| All greening the OR cost-savings programs | \$9,998 | \$112,003 |



| TOTAL ANNUAL COST-SAVINGS FROM GREENING THE OR INITIATIVES (FOR ALL FACILITIES REPORTING COST-SAVINGS) | TOTAL |
|---|--------------|
| Collection and purchase of reprocessed medical devices (SUDs) | \$43,497,459 |
| Reusable canister fluid management systems | \$5,698,314 |
| OR kit reformulation | \$2,432,182 |
| Reusable sterilization containers | \$1,883,145 |
| HVAC setback | \$908,844 |
| Reusable linens | \$1,200,654 |
| LED surgical lighting | \$13,262 |
| All greening the OR cost-savings programs | \$55,633,860 |



| SUPPLY CHAIN IMPACTS OF COVID-19 | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------------|
| The facility created procedures to re-use or extend the use of PPE in response to COVID-19 | 74% | 77% | 72% | 92% | 100% |
| Percent of facilities that re-used or extended the use of PPE with these products: | | | | | |
| Reusable/laundryable isolation gowns | 60% | 61% | 59% | 61% | 55% |
| PAPRs or elastomeric | 59% | 57% | 62% | 78% | 95% |
| N95 masks | 91% | 94% | 89% | 96% | 100% |
| Other | 34% | 33% | 35% | 17% | 61% |
| The facility leveraged its supply chain relationships to address the critical shortage of supplies and PPE over the past year | 88% | 87% | 89% | 96% | 100% |
| The facility partnered with the local community to address supply gaps brought on by the COVID-19 pandemic | 70% | 68% | 72% | 80% | 45% |
| The facility (or parent health system) made (or is planning to make) any changes to its long-term buying/supply chain strategy based on the COVID-19 pandemic | 85% | 84% | 86% | 96% | 100% |
| LEADERSHIP AND INFRASTRUCTURE | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
| The facility engaged with supply chain leadership on sustainable procurement activities in the past year | 82% | 81% | 83% | 100% | 100% |
| Facilities engaged supply chain leadership at these levels: | | | | | |
| Health system-level | 92% | 93% | 90% | 88% | 98% |
| Facility-level | 78% | 80% | 77% | 92% | 100% |
| Group purchasing organization (GPO) | 82% | 83% | 81% | 96% | 100% |
| The facility assessed its organizational progress in meeting the ten best practice program elements in the Sustainable Procurement in Health Care Guide | 43% | 44% | 43% | 68% | 84% |
| The facility made the evaluation of purchases based on environmental criteria a responsibility or deliverable within an existing job role | 65% | 65% | 64% | 92% | 100% |
| The facility set sustainable procurement goals in the past year | 53% | 54% | 52% | 88% | 100% |
| The facility has a sustainable procurement policy that is considered when making purchasing decisions | 69% | 72% | 65% | 80% | 100% |
| There is a sustainability champion represented on contracts/procurement/value analysis review teams | 74% | 73% | 74% | 76% | 84% |



| SUSTAINABLE PROCUREMENT GOAL PROGRESS | GOAL STATUS |
|--|-------------|
| Set sustainable procurement goals | 53% |
| Of the 184 facilities that reported number and status of goals: | |
| Reported only one goal | 34% |
| Reported two goals | 7% |
| Reported three goals | 60% |
| Percent of goals identified that were: | |
| Incomplete | 1% |
| In progress | 60% |
| Complete | 40% |

| PROCESS | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|--|-----|-------|-------|--------|--------------------|
| The facility reviewed a calendar (a list of upcoming contracts) for sustainable procurement opportunities in the past year | 60% | 62% | 58% | 68% | 75% |
| Of the 207 facilities that reviewed a calendar, these calendars were reviewed: | | | | | |
| GPO | 37% | 38% | 36% | 59% | 9% |
| Organization | 22% | 23% | 21% | 59% | 12% |
| Both GPO and organization | 80% | 83% | 77% | 76% | 97% |
| The facility has a process or Standard Operating Procedures (SOP) that identifies how and when to consider sustainability in the various procurement processes | 40% | 42% | 38% | 72% | 20% |
| Sustainability criteria is included in the evaluation, scoring and weighting when the facility makes purchasing decisions | 50% | 46% | 53% | 92% | 43% |
| The facility assesses the total cost of ownership or used life-cycle costing when the facility makes purchasing decisions | 34% | 37% | 31% | 68% | 23% |
| Of the 117 facilities assessing total cost of ownership: | | | | | |
| Percent using the Greenhealth Cost of Ownership (GCO) Calculator | 3% | 2% | 5% | 0% | 0% |
| The facility prioritized high-impact procurement opportunities (HIPO) for specific goods and services for sustainable procurement in 2020 | 53% | 54% | 52% | 64% | 82% |



| HIGH-IMPACT PROCUREMENT OPPORTUNITIES (HIPO) | ALL |
|--|------------|
| Prioritized high-impact procurement opportunities (HIPO) | 53% |
| Of the 173 facilities that reported number and status of goals: | |
| Reported only one goal | 7% |
| Reported two goals | 5% |
| Reported three goals | 35% |
| Reported four goals | 53% |
| Of the opportunities identified: | |
| Not started | 3% |
| In progress | 23% |
| Procured | 74% |

| TRAINING | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------------|
| The facility trained supply chain staff on sustainable procurement in the past year | 45% | 49% | 41% | 92% | 100% |
| Procurement leadership and staff were introduced to the following resources: | | | | | |
| Practice Greenhealth Sustainable Procurement in Health Care Guide | 49% | 46% | 51% | 80% | 98% |
| Sustainable Procurement in Health Care Guide's list of ecolabels | 36% | 35% | 37% | 44% | 82% |
| Practice Greenhealth's Standardized Environmental Criteria v2.0 | 38% | 37% | 39% | 64% | 93% |

| ENGAGING SUPPLIERS & GROUP PURCHASING ORGANIZATIONS | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------------|
| The facility engaged suppliers on sustainable procurement | 81% | 80% | 82% | 84% | 98% |
| The facility asked the supplier about its commitment to corporate responsibility as part of RFP or business reviews | 60% | 60% | 59% | 88% | 100% |
| Of the 207 facilities that asked suppliers about their corporate responsibility: | | | | | |
| The supplier's commitment to corporate responsibility impacted decision-making | 95% | 95% | 95% | 100% | 98% |
| The facility requires suppliers to meet standards for fair and decent labor practices set by the International Labor Organization (ILO), Fair Labor Association or an organization-specific supplier code of conduct | 44% | 50% | 39% | 56% | 11% |
| The facility has a representative on a GPO Advisory Board or Committee that makes contracting decisions (with an external GPO or your own GPO) | 74% | 69% | 77% | 88% | 98% |
| The facility engaged with its GPO on sustainable procurement in the past year | 76% | 72% | 79% | 96% | 100% |



| ACTION | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|---|-----|-------|-------|--------|--------------------|
| The facility purchased any environmentally preferable products or services in the past year | 80% | 80% | 81% | 96% | 100% |
| Of the 277 facilities that purchased sustainable products and services, this percentage purchased in these categories: | | | | | |
| Count of facilities providing data | 256 | 16 | 240 | 23 | 44 |
| Computers, telecom, IT equipment | 38% | 56% | 36% | 48% | 75% |
| Food | 33% | 6% | 35% | 52% | 91% |
| Medical supplies | 32% | 6% | 34% | 48% | 23% |
| Cleaners | 28% | 13% | 29% | 43% | 34% |
| Office supplies and equipment | 28% | 25% | 28% | 30% | 70% |
| Building furnishings | 26% | 25% | 26% | 30% | 82% |
| Surgical/operating room | 21% | 6% | 22% | 13% | 5% |
| Food service equipment and supplies | 16% | 13% | 17% | 17% | 55% |
| Building, facilities, maintenance | 15% | 44% | 13% | 26% | 25% |
| Other | 14% | 6% | 14% | 30% | 14% |
| Personal care | 9% | 6% | 9% | 4% | 2% |
| Pharmaceuticals | 5% | 13% | 5% | 4% | 2% |
| Sterile processing, sterilization, high-level disinfection | 3% | 6% | 3% | 9% | 2% |
| Landscape | 3% | 6% | 3% | 22% | 0% |
| Fleet | 3% | 25% | 1% | 0% | 0% |
| Laboratory | 2% | 0% | 2% | 9% | 2% |
| Dental | 0% | 0% | 0% | 0% | 0% |
| The facility is purchasing goods or services that support a circular economy | 50% | 52% | 47% | 92% | 100% |
| The facility avoided the purchase of any goods due to sustainability considerations in the last year | 51% | 49% | 52% | 72% | 93% |
| The facility wrote internal or external articles or documentation describing sustainable procurement successes (such as sustainable procurement case studies) | 12% | 11% | 13% | 48% | 20% |
| Some RFX (RFP,RFI,RFQ) were sent out in the last year that include sustainable procurement criteria | 53% | 52% | 53% | 84% | 91% |



| STATUS OF RFX WITH SUSTAINABLE PROCUREMENT CRITERIA | ANY RFX |
|---|---------|
| Sent out any RFX (RFP,RFI,RFQ) sent out that include sustainable procurement criteria | 53% |
| Of the 182 facilities that reported number and status of RFX: | |
| Sent out only 1 RFX | 17% |
| Sent out 2 RFX | 21% |
| Sent out 3 RFX | 50% |
| Sent out 4 RFX | 12% |
| Percent of RFX that were: | |
| Awarded to sustainable product (100% of contract) | 61% |
| Partially awarded | 21% |
| In progress | 15% |
| Not awarded to sustainable product | 2% |
| Canceled | 0% |

| METRICS | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|---|-----|-------|-------|--------|--------------------|
| The facility tracks and reports metrics regarding green spend (what is spent on sustainable products) | 74% | 76% | 72% | 88% | 100% |

| MEDIAN PERCENT GREEN SPEND ON SUSTAINABLE PRODUCTS BY CATEGORY | CURRENT PERCENT SPEND | INCREASE IN PERCENT SPEND SINCE PREVIOUS YEAR (2020) (FOR THOSE WITH INCREASE) |
|---|-----------------------|--|
| 5 target cleaning products | 64% | 36% |
| Copy paper | 58% | 20% |
| EPEAT electronics | 98% | 44% |
| Healthy interiors | 92% | 17% |
| Local food and beverage purchases | 5% | 70% |
| Sustainable food and beverage purchases | 14% | 35% |
| Average % sustainable spend combining all categories above | 17% | 58% |



| PAPER SPEND | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|--|-------------|-------------|-------------|-------------|--------------------|
| The organization purchases copy paper made with post-consumer recycled content | 81% | 84% | 79% | 96% | 100% |
| The facility limited options within its purchasing system/catalog to ensure that all white copy paper purchased contains at least 30% post-consumer recycled content | 30% | 34% | 27% | 50% | 82% |
| Of those purchasing recycled paper and providing spend numbers: | | | | | |
| Count of those providing paper data | 218 | 106 | 111 | 23 | 44 |
| Median percent green spend on copy paper >=30% recycled* | 58% | 68% | 30% | 62% | 74% |
| Median green spend (dollars) on copy paper | \$13,736 | \$7,958 | \$22,442 | \$16,638 | \$19,711 |
| Total sum of green spend (dollars) on copy paper for all facilities | \$8,439,764 | \$1,987,056 | \$6,433,688 | \$1,235,899 | \$1,759,666 |

*Paper with less than 30% post-consumer recycled content is not considered a sustainable product.

| EPEAT SPEND | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|---|-----|-------|-------|--------|--------------------|
| The facility purchased EPEAT-registered products in the past year in alignment with Practice Greenhealth's Greener Electronics Goal | 79% | 78% | 79% | 100% | 100% |
| EPEAT-registered computers, monitors, and laptops | 94% | 95% | 94% | 100% | 100% |
| EPEAT-registered imaging equipment (copiers, printers, fax, MFD, scanners, digital duplicators, mailing machines) | 80% | 77% | 84% | 100% | 100% |
| EPEAT-registered televisions | 60% | 62% | 58% | 64% | 70% |
| EPEAT-registered mobile phones | 32% | 28% | 34% | 56% | 68% |
| EPEAT-registered servers | 15% | 14% | 16% | 48% | 30% |

| EPEAT SPEND METRICS | ALL |
|---|------|
| Median percent green spend on EPEAT-registered computers, monitors and laptops | 99% |
| Median percent green spend on EPEAT-registered imaging equipment (copiers, printers, fax, MFD, scanners, digital duplicators, mailing machines) | 100% |
| Median percent green spend on EPEAT-registered televisions | 100% |
| Median percent green spend on EPEAT-registered mobile phones | 100% |
| Median percent green spend on EPEAT-registered servers | 100% |
| Median percent green spend on all EPEAT-registered product categories | 98% |

Note: A median of 100% indicates that if the facility is purchasing EPEAT-registered electronics; they tend to be purchasing all EPEAT-registered products in a particular category.



| TOTAL DOLLARS SPENT ON EPEAT-REGISTERED ELECTRONICS (SUM OF ALL FACILITIES) | ALL |
|--|---------------|
| Dollars spent on EPEAT-registered computers, monitors and laptops | \$176,368,002 |
| Dollars spent on EPEAT-registered imaging equipment | \$16,721,147 |
| Dollars spent on EPEAT-registered televisions | \$599,533 |
| Dollars spent on EPEAT-registered cell phones | \$1,539,144 |
| Dollars spent on EPEAT-registered servers | \$7,178,188 |
| Total EPEAT spend by all facilities | \$202,406,014 |



| SUSTAINABLE PROCUREMENT ACTIVITIES IN OTHER AREAS | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|--|-----|-------|-------|--------|--------------------|
| The facility implemented a reusable sharps container program | 80% | 71% | 90% | 92% | 80% |
| The facility established a contract with a certified electronics recycling vendor that is certified to e-Stewards (or subcontractors that use e-Stewards certified vendors) for legal and environmentally responsible electronics (or e-waste) management and recycling | 67% | 61% | 73% | 84% | 70% |
| The facility has 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 | 74% | 75% | 73% | 100% | 100% |
| The facility utilizes any Green Seal or UL Ecologo certified cleaning products | 79% | 81% | 77% | 96% | 100% |
| The facility completely eliminated both PVC and DEHP from at least two product lines | 64% | 63% | 64% | 88% | 95% |
| The facility is actively working to purchase furnishings and furniture that eliminate the use of all of the following target chemicals: flame retardants, formaldehyde, per and poly-fluorinated compounds (PFAS), PVC (vinyl) and antimicrobials, in alignment with Practice Greenhealth's Healthy Interiors Goal | 52% | 47% | 58% | 92% | 100% |
| The facility implemented a medical device reprocessing program with an FDA-approved third party reprocessor | 88% | 83% | 92% | 84% | 90% |
| The facility purchased and used reusable surgical items where environmentally and clinically preferable | 75% | 75% | 74% | 96% | 100% |
| The facility preferentially purchased sustainably-produced (better) meat and poultry | 60% | 56% | 64% | 96% | 100% |
| The facility purchased locally grown and produced foods Local is defined as grown/raised and processed less than 250 miles from the facility. | 70% | 66% | 73% | 100% | 100% |
| The facility purchased sustainably grown and produced foods Sustainable is defined as a product that has an allowed sustainability certification or label claim. | 70% | 67% | 73% | 100% | 100% |
| The facility is purchasing certified commercially compostable single-use food service ware (such as certified by Biodegradable Products Institute (BPI)) | 62% | 57% | 65% | 76% | 90% |
| The facility generated or purchased renewable energy | 32% | 25% | 39% | 64% | 80% |
| The facility purchased energy-efficient equipment that is ENERGY STAR-labeled | 39% | 34% | 44% | 84% | 70% |
| The facility has a policy that includes environmental criteria for vehicle purchases | 17% | 16% | 19% | 32% | 86% |
| The organization has integrated green/sustainable aspects into master specifications for all new buildings/renovations | 60% | 64% | 56% | 96% | 100% |
| Does the organization require its designers, builders and contractors to have experience with LEED or other green building rating systems | 47% | 50% | 44% | 84% | 80% |
| The organization has added language to contract specifications that building contractors will follow LEED or GGHC requirements and provide documentation | 50% | 50% | 49% | 76% | 100% |
| The facility consciously selects flooring, wall coverings, paints, materials, finishes, furniture or exterior materials that avoid chemicals of concern | 53% | 54% | 52% | 92% | 90% |



| ENERGY DEMOGRAPHICS | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|---|-----|-------|-------|--------|---------------|
| Generated or purchased renewable energy | 32% | 25% | 39% | 64% | 80% |
| Put a combined heat and power/cogeneration project into place in the last five years | 4% | 1% | 7% | 16% | 10% |
| Had an onsite laundry | 12% | 14% | 10% | 16% | 30% |
| Had an onsite data center that requires a constant power load of 75 kW or more | 32% | 23% | 41% | 52% | 50% |
| COVID RESPONSE | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
| Made changes to its air handling protocols to adapt to the COVID-19 pandemic | 61% | 53% | 67% | 76% | 70% |
| Of the 209 facilities that made changes to their air handling: | | | | | |
| Increase in outside air | 59% | 60% | 58% | 74% | 100% |
| Increased number of air changes | 57% | 58% | 57% | 74% | 57% |
| Discontinued use of HVAC setback | 18% | 16% | 19% | 32% | 29% |
| Negative pressure rooms | 78% | 78% | 77% | 74% | 71% |
| Negative pressure isolation rooms | 69% | 72% | 67% | 74% | 86% |
| Other | 13% | 11% | 14% | 32% | 29% |
| Of the 124 facilities that increased outside air, the air was utilized here: | | | | | |
| 100% outside air for entire facility | 19% | 23% | 17% | 0% | 0% |
| By department or unit | 74% | 74% | 74% | 93% | 100% |
| Other | 3% | 2% | 4% | 7% | 0% |
| ENERGY EFFICIENCY AND PLANNING STRATEGY | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
| Actively worked to reduce energy use, in alignment with Practice Greenhealth's Leaner Energy Goal | 52% | 49% | 53% | 96% | 90% |
| Had a dedicated energy manager role | 65% | 60% | 69% | 92% | 100% |
| Had a written plan to reduce energy use over time with timelines and goals | 50% | 51% | 48% | 88% | 100% |
| Developed a strategic energy master plan | 26% | 28% | 24% | 60% | 60% |
| Conducted a baseline energy audit for the institution in the past five years | 53% | 50% | 56% | 92% | 90% |
| Engaged a retrocommissioning firm to optimize building performance | 42% | 41% | 43% | 76% | 80% |
| Conducted continuous commissioning | 41% | 41% | 41% | 68% | 70% |
| Purchased energy-efficient equipment that is ENERGY STAR-labeled | 39% | 34% | 44% | 84% | 70% |
| Utilized submeters to better monitor energy efficiency opportunities | 32% | 23% | 41% | 80% | 90% |
| When an ENERGY STAR label is not available for a given technology, considered energy performance as a part of cost of operation for the product | 62% | 59% | 64% | 92% | 80% |



| ENERGY STAR-LABELED PRODUCT PURCHASES | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|---------------|--------------|---------------|---------------|----------------------|
| Total spend on top 3 categories of ENERGY STAR-labeled products | \$138,184,556 | \$5,467,150 | \$132,717,405 | \$14,568,129 | \$10,677,369 |
| Median spend on top 3 categories of ENERGY STAR-labeled products | \$46,535 | \$31,899 | \$52,532 | \$9,900 | \$102,230 |

| ENERGY TRACKING AND MONITORING | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|------------|--------------|--------------|----------------------------------|----------------------------------|
| Used ENERGY STAR Portfolio Manager | 81% | 77% | 84% | 100% | 100% |
| Of the 278 facilities that indicated they use ENERGY STAR Portfolio Manager: | | | | | |
| Benchmarked using ENERGY STAR's Portfolio Manager | 86% | 90% | 83% | 100% | 100% |
| Of the 59 facilities that indicated they did NOT use ENERGY STAR Portfolio Manager: | | | | | |
| Used other software to benchmark the facility's energy performance | 64% | 63% | 67% | No applicants saw this question. | No applicants saw this question. |

| MEDIAN ENERGY METRICS | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|------------|--------------|--------------|---------------|----------------------|
| Energy use intensity (EUI) in kBtus per sq foot | 241 | 219 | 255 | 236 | 212 |
| ENERGY STAR Portfolio Manager EUI | 248 | 247 | 251 | 235 | 234 |
| Weather-normalized EUI (from ENERGY STAR Portfolio Manager) | 246 | 242 | 249 | 247 | 239 |
| ENERGY STAR score | 65 | 69 | 61 | 54 | 82 |
| Percent reduction in energy use intensity from baseline year (of those that reduced) | 8% | 9% | 8% | 14% | 11% |
| Percent reduction in energy use intensity from previous year (of those that reduced) | 6% | 4% | 6% | 6% | 7% |

| PRACTICE GREENHEALTH COMPARED TO 2012 CBECs CLIMATE ZONES DATA | VERY COLD/COLD/ SUBARCTIC | MIXED-HUMID | HOT-DRY/MIXED- DRY/HOT-HUMID | MARINE |
|---|--------------------------------------|--------------------|---|---------------|
| CBECs number of hospitals reporting | 118 | 110 | 100 | 15 |
| Practice Greenhealth number of hospitals reporting | 82 | 29 | 45 | 30 |
| CBECs median energy use intensity (in kBtus/sq. ft.) | 240 | 236 | 215 | 209 |
| Practice Greenhealth median energy use intensity (in kBtus/sq. ft.) | 216 | 235 | 279 | 266 |

Note: It is important to note that Practice Greenhealth is comparing 2021 data to 2012 data in this table. It is meant to highlight how committed Practice Greenhealth partners fared relative to the sector at large.



| NORMALIZED ENERGY USE | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|------------|--------------|--------------|---------------|----------------------|
| Total kBtus per sq. ft. (EUI) | 241 | 219 | 255 | 236 | 212 |
| Total kBtus per adjusted patient day (APD) | 1,280 | 1,260 | 1,290 | 1,320 | 1,290 |
| Total kBtus per onsite FTE* | 83,200 | 91,300 | 73,700 | 86,600 | 82,300 |
| Total kBtus per operating room (OR) | 13,600,000 | 12,200,000 | 14,700,000 | 15,900,000 | 15,800,000 |
| Total kBtus per patient day | 3,280 | 4,850 | 2,720 | 3,600 | 2,630 |
| Total kBtus per licensed bed | 726,000 | 885,000 | 692,000 | 973,000 | 691,000 |
| Total kBtus per OR procedure | 21,100 | 21,400 | 21,100 | 22,600 | 23,400 |
| Total kBtus per staffed bed | 830,000 | 1,033,000 | 766,000 | 1,019,000 | 776,000 |

*Total on-site full-time equivalents (FTEs) is the sum of FTEs, FTE physicians, FTE medical students, and contracted FTEs.

| ENERGY REDUCTION PROJECTS | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|----------------|--------------|--------------|---------------|----------------------|
| Percent of facilities reporting any energy efficiency projects | 37% | 34% | 39% | 84% | 100% |
| Median energy savings per facility (in kBtus) | 555,808 | | | | |
| Median energy cost savings per facility (in \$) | \$48,830 | | | | |
| Total energy efficiency savings in kbtus | 19,234,204,832 | | | | |
| Total energy savings in dollars | \$8,944,905 | | | | |

| SAVINGS FROM COGEN (COMBINED HEAT AND POWER/COGENERATION PROJECT) | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|--------------|--------------|--------------|---------------|----------------------|
| Put a combined heat and power/cogeneration project into place in the last five years | 4% | 1% | 7% | 16% | 10% |
| Total dollars saved last year from cogen projects | \$20,057,633 | | | | |

| ENERGY PROJECT CATEGORY | MEDIAN ENERGY SAVINGS PER PROJECT IN KBTUS | MEDIAN COST-SAVINGS PER PROJECT | NUMBER OF PROJECTS REPORTED WITH \$ SAVINGS |
|--------------------------------|---|--|--|
| Heating | 2,265,391 | \$13,188 | 43 |
| Cooling | 949,393 | \$27,916 | 40 |
| Water heating | 618,465 | \$33,105 | 2 |
| Lighting | 309,525 | \$7,914 | 57 |
| Information technology | 482,262 | \$149,487 | 1 |
| Medical technology | None in this category | None in this category | 0 |
| Other | 165,081 | \$20,838 | 15 |



| RENEWABLE ENERGY | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|---|---------------|-------|-------|--------|---------------|
| Percent of facilities reporting any generation or purchase of renewable energy | 32% | 25% | 39% | 64% | 80% |
| Median percent of energy portfolio from renewable sources (facilities with sufficient data) | 18.6% | 16.1% | 24.8% | 9.0% | 12.1% |
| Median percent of onsite renewable energy (facilities with sufficient data) | 0.6% | 2.3% | 0.2% | 0.1% | 0.5% |
| Median percent of offsite renewable energy (facilities with sufficient data) | 27.2% | 27.2% | 27.6% | 10.3% | 15.2% |
| Total avoided greenhouse gas emissions from use of renewable energy sources (in MTCO2e) | 338,542 | | | | |
| Total spend on renewable energy | \$1,968,204 | | | | |
| Total KBTUs of renewable energy | 4,242,058,957 | | | | |

| TYPE OF RENEWABLE ENERGY | NUMBER OF REPORTING FACILITIES WITH ONSITE RENEWABLE ENERGY | NUMBER OF REPORTING FACILITIES WITH OFFSITE RENEWABLE ENERGY OR RECS |
|---------------------------------|---|--|
| Solar or photo-voltaic | 27 | 7 |
| Geothermal heating and electric | 2 | 2 |
| Biomass | 0 | 0 |
| Wind | 0 | 22 |
| Bio-gas | 1 | 2 |

| MEDIAN ENERGY-RELATED GREENHOUSE GAS EMISSIONS BY FUEL TYPE (IN METRIC TONS OF CARBON DIOXIDE EQUIVALENT--MTCO2E) | BASELINE YEAR GHG EMISSIONS BY ENERGY TYPE | PREVIOUS YEAR GHG EMISSIONS BY ENERGY TYPE | CURRENT YEAR GHG EMISSIONS BY ENERGY TYPE |
|---|--|--|---|
| Electricity (location-based) | 6,015 | 8,217 | 5,956 |
| Natural gas | 3,360 | 3,239 | 3,453 |
| Fuel oil (#2) | 51 | 49 | 48 |
| District steam | 9,109 | 11,173 | 7,601 |
| District hot water | 2,579 | 1,758 | 3,208 |
| District chilled water-electric driven chiller | 7,480 | 7,007 | 6,948 |
| District chilled water-absorption chiller using natural gas | None in this category | None in this category | 1,601 |
| District chilled water-engine-driven chiller natural gas | None in this category | None in this category | 7,149 |
| Diesel | 39 | 27 | 40 |
| Propane | 52 | 15 | 28 |
| Scope 1 (direct) energy-related GHG emissions total | 3,352 | 3,164 | 3,386 |
| Scope 2 (indirect) energy-related GHG emissions total | 6,201 | 10,165 | 6,205 |



| TOTAL ENERGY-RELATED GREENHOUSE GAS EMISSIONS FROM FUEL TYPE (AGGREGATE FOR ALL FACILITIES REPORTING IN MTCO2E) | BASELINE YEAR GHG EMISSIONS BY ENERGY TYPE | | PREVIOUS YEAR GHG EMISSIONS BY ENERGY TYPE | | CURRENT YEAR GHG EMISSIONS BY ENERGY TYPE |
|---|--|--|--|--|---|
| Electricity (location-based) | 2,177,173 | | 1,817,589 | | 2,094,697 |
| Natural gas | 1,217,029 | | 944,002 | | 1,145,276 |
| Fuel oil (#2) | 14,525 | | 5,626 | | 13,530 |
| District steam | 500,415 | | 448,891 | | 407,915 |
| District hot water | 19,209 | | 13,198 | | 16,850 |
| District chilled water-electric driven chiller | 177,215 | | 191,749 | | 195,309 |
| District chilled water-absorption chiller using natural gas | None in this category | | None in this category | | 1,601 |
| District chilled water-engine-driven chiller natural gas | None in this category | | None in this category | | 7,149 |
| Diesel | 4,917 | | 4,563 | | 6,064 |
| Propane | 2,914 | | 1,818 | | 2,568 |
| Scope 1 (direct) energy-related GHG emissions total | 1,239,384 | | 956,008 | | 1,167,437 |
| Scope 2 (indirect) energy-related GHG emissions total | 2,874,012 | | 2,471,427 | | 2,723,520 |

| LAUNDRY | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
|--|-----|-------|-------|--------|---------------|
| Of the 27 that have onsite laundry: | | | | | |
| Have laundry machines that are ENERGY STAR-certified | 33% | 47% | 10% | 40% | 25% |
| Median pounds per patient day of laundry processed on site | 41 | 41 | 36 | 43 | 28 |



| WATER PLANNING AND REDUCTION STRATEGY | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------|
| Actively worked to reduce water use, in alignment with Practice Greenhealth's Less Water Goal | 40% | 40% | 41% | 96% | 100% |
| Submetered any departments and/or individual pieces of equipment | 35% | 32% | 37% | 84% | 100% |
| Set measurable goals for the reduction of water use | 27% | 26% | 28% | 64% | 100% |
| Had a written plan to reduce water use over time | 30% | 30% | 30% | 76% | 100% |
| Conducted a water audit | 29% | 26% | 32% | 76% | 60% |
| Benchmarked water usage | 61% | 60% | 63% | 92% | 100% |
| Implemented any of the following strategies or technologies for the reuse of non-potable water | | | | | |
| Boiler blow-down collection for reuse | 11% | 9% | 13% | 32% | 40% |
| Condensate collection for reuse | 34% | 32% | 37% | 80% | 60% |
| Gray water reuse system | 3% | 1% | 5% | 8% | 10% |
| Rainwater harvesting system | 4% | 4% | 5% | 20% | 30% |
| Use of non-potable water for laundry | 2% | 1% | 2% | 4% | 20% |
| Other | 6% | 2% | 10% | 0% | 10% |
| Purchased any of the following US EPA WaterSense-labeled devices and equipment | | | | | |
| Bathroom sink faucets/accessories | 45% | 43% | 47% | 76% | 80% |
| Flushing urinals | 23% | 20% | 27% | 60% | 70% |
| Flushometer valve toilets | 24% | 23% | 24% | 60% | 70% |
| Irrigation controllers | 9% | 4% | 13% | 20% | 10% |
| Pre-rinse spray valves | 5% | 4% | 6% | 32% | 20% |
| Showerheads | 25% | 22% | 28% | 56% | 80% |
| Spray sprinkler bodies | 4% | 2% | 6% | 20% | 10% |
| Toilets | 32% | 32% | 34% | 60% | 80% |
| MEDIAN WATER USE AND SAVINGS | | | | | |
| Median water use intensity (gallons per sq. ft.) | 42.0 | 41.8 | 42.4 | 37.6 | 32.8 |
| Cost of water per 1,000 gallons (kgal) | \$7.03 | \$6.50 | \$7.96 | \$8.09 | \$7.92 |



| NORMALIZED WATER CONSUMPTION | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
|---|---------|---------|---------|---------|--------------|
| Gallons per cleanable sq. ft. | 52.0 | 52.0 | 52.1 | 49.4 | 43.5 |
| Gallons per gross sq. ft. | 42.0 | 41.8 | 42.4 | 37.6 | 32.8 |
| Gallons per total onsite FTEs | 15,917 | 18,100 | 14,738 | 12,093 | 11,117 |
| Million gallons per operating room (OR) | 2.3 | 2.0 | 2.4 | 2.8 | 3.5 |
| Gallons per adjusted patient day (APD) | 238 | 244 | 233 | 233 | 152 |
| Gallons per patient day | 563 | 755 | 459 | 527 | 591 |
| Gallons per staffed bed | 135,520 | 168,185 | 118,956 | 139,533 | 194,314 |
| Gallons per OR procedure | 3,572 | 3,543 | 3,586 | 3,609 | 7,108 |

| INDOOR WATER CONSUMPTION | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
|---|--------|--------|--------|--------|--------------|
| Median indoor gallons per sq. ft. | 37.9 | 33.3 | 38.7 | 35.7 | 36.1 |
| Median indoor gallons per cleanable sq. ft. | 49.4 | 48.2 | 50.1 | 49.9 | 48.8 |
| Median indoor gallons per FTE | 13,417 | 13,992 | 12,091 | 12,119 | 10,375 |

Note: Indoor water use could only be calculated accurately for those who either had no irrigation or for those who facilities that irrigated and also provided irrigation data (actual or estimated).

| IRRIGATED LANDSCAPES | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
|--|-----|-------|-------|--------|--------------|
| Irrigated some landscaped areas | 63% | 58% | 67% | 92% | 70% |
| Used any alternative landscaping methods that reduce the need for irrigation | 40% | 35% | 45% | 76% | 90% |

Of the 23 facilities that provided data on water savings from alternative landscaping methods:

| | | | | | |
|---|------------|------------|-----------|-----------|-----------|
| Median water savings (gallons) from alternative irrigation | 143,444 | 25,000 | 312,500 | 237,500 | 55,000 |
| Total gallons of water saved through alternative landscaping (all facilities) | 17,835,044 | 10,919,599 | 6,915,445 | 5,531,705 | 2,062,650 |

| WATER USE COMPARED TO OTHER INDUSTRY COHORTS | ALL |
|--|------------------|
| Median water use intensity (gal/sq. ft.) for Practice Greenhealth hospitals (2021) | 42.0 |
| Median water use intensity (gal/sq. ft.) for CBECS inpatient health care facilities (2012) | 46.3 gal/sq. ft. |
| Average water use intensity (gal/sq. ft.) for Grumman/Butkus health care facilities (2020) | 36.1 gal/sq. ft. |

Note: CBECS is the Commercial Building Energy Consumption Survey which is administered by the federal government in 2012. A more recent survey was conducted in 2018 but the full data set was not yet available when this report went to press. Grumman/Butkus Associates is an engineering consultancy that has administered an annual [energy benchmarking survey](#) in the Midwest since 1995. Water costs and usage were added in 2006.



| WATER REDUCTION METRICS | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------|
| Percent reduction in water use intensity from baseline year: | 23% | 24% | 21% | 30% | 44% |
| Percent reduction in water use intensity from previous year: | 12% | 16% | 11% | 12% | 10% |
| Note: Percent reduction calculated using current year gallons per gross sq. ft. compared to baseline or previous year gallons per gross sq. ft. This includes only facilities that reduced their water use intensity. | | | | | |
| WATER REDUCTION PROJECTS | ALL | SMALL | LARGE | TOP 25 | WATER CIRCLE |
| Percent of facilities reporting any water reduction projects with gallons saved | 6% | 5% | 7% | 32% | 80% |
| Median water cost-savings per facility from water reduction projects | \$2,215 | \$1,556 | \$2,719 | \$2,719 | \$1,428 |
| Median gallons of water saved per facility through water reduction projects | 250,755 | 238,710 | 560,550 | 331,775 | 170,855 |
| Total gallons saved through water reduction projects (22 facilities) | 15,000,845 | 6,075,605 | 8,925,240 | 4,844,395 | 2,926,105 |
| Total cost-savings through water reduction projects (20 facilities) | \$124,941 | 62,474 | 62,467 | 51,196 | 49,936 |



| COVID-19 | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
|--|-----|-------|-------|--------|---------------------|
| Did the facility have pre-determined flexible space it could utilize for surge capacity for the COVID-19 pandemic? | 47% | 40% | 53% | 72% | 80% |
| Did the facility adapt other usable space to accommodate surge capacity for COVID patients during the pandemic? | 50% | 47% | 52% | 72% | 90% |

| GREEN DESIGN AND CONSTRUCTION | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
|--|-----|-------|-------|--------|---------------------|
| Designed and built any projects (>1000 sq. ft.) in the last five (5) years | 52% | 44% | 60% | 96% | 90% |
| Integrated any green/sustainable aspects into master specifications for all new buildings/renovations | 60% | 64% | 56% | 96% | 100% |
| Implemented a facility policy or commitment to design and construct all new buildings and/or major renovations to LEED (or another green building) design standard | 60% | 62% | 57% | 84% | 100% |
| Required to build to a certain minimum LEED standard (certifiable) due to municipal, state, region or federal legislative requirements | 13% | 15% | 11% | 24% | 20% |
| Required its designers, builders and contractors to have experience with LEED or other green building rating systems | 47% | 50% | 44% | 84% | 80% |
| Used an integrated design process for all new building and major renovation projects | 54% | 55% | 54% | 76% | 100% |
| Added language to contract specifications that building contractors will follow LEED or GGHC requirements and provide documentation | 50% | 50% | 49% | 76% | 100% |
| Tracked loss days/productivity within green buildings | 5% | 5% | 5% | 36% | 20% |

| NUMBER OF LEADERSHIP IN ENERGY AND ENVIRONMENTAL DESIGN (LEED)-CERTIFIED PROJECTS COMPLETED | 2021 | COMPLETED IN PAST 5 YEARS |
|---|-----------|---------------------------|
| LEED Platinum | 7 | 0 |
| LEED Gold | 17 | 4 |
| LEED Silver | 26 | 8 |
| LEED Certified | 8 | 1 |
| Total LEED projects | 58 | 13 |
| Total square footage (of LEED projects providing square footage) | 2,836,541 | 9,864,595 |

| COUNT OF GREEN BUILDING PROJECTS USING OTHER RATING SYSTEMS | 2021 | COMPLETED IN PAST 5 YEARS |
|--|---------|---------------------------|
| Designed to LEED but not certified | 28 | 94 |
| Followed GGHC | 3 | 8 |
| Green Globes | 0 | 1 |
| WELL Certified | 0 | 0 |
| Followed other rating system | 13 | 38 |
| Total square footage of green building projects not using LEED certification | 989,979 | 4,672,684 |



| INNOVATIVE GREEN BUILDING ELEMENTS | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
|---|-------------------------------------|--------------|--------------------------|---------------|----------------------------|
| Educated occupants on the benefits of its green building elements | 33% | 28% | 39% | 96% | 100% |
| Installed any garden and green spaces for patients, visitors and staff | 59% | 52% | 65% | 88% | 100% |
| Of the facilities that indicated yes, these areas were created: | | | | | |
| Green or living roof | 28% | 20% | 35% | 59% | 60% |
| Green or living wall | 9% | 5% | 13% | 23% | 20% |
| Healing garden | 82% | 75% | 87% | 95% | 60% |
| Food-producing garden | 26% | 30% | 24% | 55% | 40% |
| Other | 34% | 34% | 34% | 59% | 80% |
| AVOIDING CHEMICALS OF CONCERN | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
| Consciously selected flooring, wall coverings, paints, materials, finishes, furniture, or exterior materials that avoid target chemicals of concern | 53% | 54% | 52% | 92% | 90% |
| Of the 183 facilities that indicated which product categories were addressed to avoid chemicals of concern: | AVOIDED CHEMICALS OF CONCERN | | INCLUDED IN SPECS | | |
| Wall coverings | 45% | | 42% | | |
| Paints | 58% | | 52% | | |
| Materials | 51% | | 49% | | |
| Finishes | 53% | | 49% | | |
| Furniture | 56% | | 49% | | |
| Exterior materials | 25% | | 25% | | |



| ENERGY AND WATER-SAVING ELEMENTS | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
|---|--------|-------|-------|--------|---------------------|
| Implemented a building and renovation strategy that maximizes daylighting for patients, employees, visitors | 56% | 53% | 59% | 100% | 100% |
| Installed water saving measures that will substantially reduce potable water use or reuse non-potable water | 48% | 43% | 52% | 80% | 100% |
| Integrated design elements that will reduce or reuse process water | 31% | 27% | 35% | 68% | 80% |
| Instituted other innovative green design and construction elements | 29% | 23% | 35% | 88% | 100% |
| Installed energy systems that exceed ANSI/ASHRAE/IESNA Standard 90.1-2013 | 30% | 24% | 35% | 48% | 80% |
| Of the 102 facilities indicating yes to installing systems that exceed ANSI/ASHRAE/IESNA standard 90.1-2013: | | | | | |
| <10% | 17% | 20% | 15% | 17% | 0% |
| 10-25% | 37% | 38% | 37% | 50% | 25% |
| >25% | 22% | 18% | 24% | 33% | 75% |
| CONSTRUCTION & DEMOLITION DEBRIS | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
| Recycled construction & demolition debris (C&D) | 49% | 40% | 59% | 100% | 90% |
| Of the 69 facilities that provided valid recycling numbers: | | | | | |
| Median percent recycling rate for construction and demolition debris | 70% | 60% | 65% | 65% | 85% |
| Achieved a minimum 80% construction and demolition debris recycling rate | 42% | 10% | 67% | 22% | 26% |
| Total tons of construction and demolition debris recycled, sum of all facilities | 50,403 | | | | |



| DEMONSTRATING CLIMATE LEADERSHIP | ALL | SMALL | LARGE | TOP 25 | CLIMATE CIRCLE |
|---|-----|-------|-------|--------|----------------|
| Facilities tracking GHG emissions as a key metric and reporting progress at regular intervals | 56% | 53% | 58% | 100% | 100% |
| Made a formal external commitment to climate change or a signed a commitment | 50% | 48% | 51% | 96% | 100% |
| Of the 172 facilities indicating formal external commitment(s) to climate change, the commitments were: | | | | | |
| Cool Food Pledge | 22% | 18% | 27% | 46% | 30% |
| Divestment from or frozen future investments in fossil fuels | 31% | 29% | 32% | 8% | 30% |
| Health Care Climate Challenge | 61% | 63% | 60% | 54% | 60% |
| Health Care Climate Council | 64% | 63% | 66% | 58% | 80% |
| Federal/state/regional/local commitment | 25% | 20% | 30% | 54% | 40% |
| University Presidents' Climate Leadership Commitment (higher education institutions only) | 4% | 0% | 8% | 4% | 20% |
| We Are Still In | 42% | 36% | 48% | 50% | 80% |
| Other | 49% | 51% | 47% | 54% | 70% |
| Advocated for or promoted policies or regulations that protect public health from the causes of climate change (e.g. testifying or submitting comments at public hearings, Op Eds, sign-on letters/statements, meeting with public officials to educate or lobby) (Out of non-federal facilities) | 33% | 34% | 32% | 85% | 89% |
| Of the 105 facilities that have promoted policies or regulations that protect public health from the causes of climate change, the following levels of policies were indicated: | | | | | |
| At the local level | 61% | 57% | 63% | 100% | 89% |
| At the state level | 85% | 94% | 77% | 95% | 100% |
| At the federal level | 84% | 87% | 81% | 100% | 89% |
| Provided education on the connection between climate and health to its staff, patients, clinicians and/or the community | 48% | 45% | 51% | 92% | 100% |
| Of the 165 facilities that provide education on the connection between climate and health to its staff,patients, clinicians and.or the community, the following groups were engaged: | | | | | |
| Staff | 94% | 96% | 92% | 100% | 100% |
| Patients | 52% | 53% | 50% | 65% | 40% |
| Community | 61% | 53% | 67% | 78% | 60% |
| Physicians | 85% | 85% | 86% | 91% | 100% |
| Nurses | 82% | 81% | 83% | 87% | 100% |
| Other health professionals | 76% | 77% | 74% | 78% | 90% |
| Facilities reported providing the following green employee benefits to support climate change solutions for their employees at home: | | | | | |



| DEMONSTRATING CLIMATE LEADERSHIP | ALL | SMALL | LARGE | TOP 25 | CLIMATE CIRCLE |
|--|-----|-------|-------|--------|----------------|
| Employee home solar discounts | 12% | 13% | 11% | 4% | 10% |
| Electric bicycle discounts | 11% | 13% | 9% | 8% | 20% |
| CSAs | 14% | 11% | 17% | 52% | 60% |
| Fossil fuel-free retirement options | 14% | 15% | 14% | 8% | 50% |
| Alternative transportation discounts/stipends | 43% | 37% | 48% | 68% | 80% |
| Other | 21% | 20% | 22% | 52% | 50% |
| Incorporated climate change language or a connection to climate change in activities of the Community Health Needs Assessment (CHNA) process for community benefit | 23% | 22% | 24% | 64% | 40% |
| Monitors air quality and notifies vulnerable patient populations | 10% | 9% | 11% | 8% | 0% |
| CEO or Board of Directors identified climate change as a business risk by requiring regular reporting on climate change mitigation and preparedness | 25% | 23% | 26% | 44% | 60% |

| CLIMATE MITIGATION | ALL | SMALL | LARGE | TOP 25 | CLIMATE CIRCLE |
|---|-----|-------|-------|--------|----------------|
| Generated or purchased renewable energy | 32% | 25% | 39% | 64% | 80% |
| Median percent of energy from renewable sources | 19% | 16% | 25% | 9% | 12% |
| Set either a GHG reduction or renewable energy goal | 50% | 47% | 52% | 64% | 100% |
| Purchased carbon offsets | 13% | 10% | 16% | 4% | 30% |
| Tracking market-based Scope 2 emissions | 33% | 31% | 34% | 48% | 80% |

| CLIMATE GOALS | ALL |
|--|-----|
| Of the 74 facilities reporting any climate or renewable energy goal type, the following have set a goal of this type: | |
| Carbon net positive | 15% |
| Carbon neutral | 15% |
| Greenhouse gas reduction | 28% |
| Renewable energy | 51% |
| Aggressive energy reduction | 15% |
| Other | 1% |



| CURRENT YEAR EMISSION REDUCTION PROJECTS | SUM OF ALL FACILITIES | MEDIAN PER FACILITY | MEDIAN PER THOUSAND SQUARE FEET | COUNT OF FACILITIES CONTRIBUTING | |
|--|-----------------------|---------------------|---------------------------------|----------------------------------|-----------------|
| Of the facilities reporting any emissions reduction project: | | | | | |
| MTCO2e savings from GHG emission reduction projects for all hospitals | 330,821 | 358 | 0.95 | 72 | |
| Cost-savings from GHG emission reduction projects for all hospitals (for projects with cost-savings) | \$9,421,184 | \$40,970 | \$102 | 40 | |
| Expenditures for GHG emission reduction projects for all hospitals (for projects costing money) | \$207,515 | \$33,886 | \$29 | 6 | |
| SCOPES 1 & 2 ENERGY-RELATED EMISSIONS PER FACILITY | | | | | |
| Median MTCO2e from Scope 1 & 2 energy-related emissions per facility | 10,642 | | | | |
| Of the 159 facilities that decreased total energy-related MTCO2e | | | | | |
| Median percent decrease from baseline in MTCO2e from baseline for Scope 1 & 2 energy-related emissions per facility | 7.3% | | | | |
| Of the 126 facilities that increased total energy-related MTCO2e | | | | | |
| Median percent increase from baseline in MTCO2e from baseline for Scope 1 & 2 energy-related emissions per facility | 5.9% | | | | |
| SCOPES 1 & 2 ENERGY-RELATED EMISSIONS PER SQ. FT. | | | | | |
| Median MTCO2e per thousand square feet from Scope 1 & 2 energy-related emissions | 18 | | | | |
| Of the 190 facilities that decreased energy-related MTCO2e per square feet: | | | | | |
| Median percent decrease in MTCO2e per thousand square feet from Scope 1 & 2 energy-related emissions | 9.0% | | | | |
| Of the 96 facilities that increased energy-related MTCO2e per square feet: | | | | | |
| Median percent increase in MTCO2e per thousand square feet from Scope 1 & 2 energy-related emissions | 4.7% | | | | |
| DISTRIBUTION OF SCOPES 1 & 2 ENERGY-RELATED EMISSIONS PER SQUARE FEET | | | | | |
| | 10TH PERCENTILE | 25TH PERCENTILE | MEDIAN | 75TH PERCENTILE | 90TH PERCENTILE |
| Due to the difference in greenhouse gas emissions per KBTU based on energy source, MTCO2e per sq. ft. for energy-related emissions has a wide range. | | | | | |
| MTCO2e (energy-related) per thousand square feet | 12 | 14 | 18 | 22 | 27 |
| CHANGE IN TOTAL MTCO2E PER FACILITY | | | | | |
| Of the 194 facilities that decreased total MTCO2e | | | | | |
| Median percent decrease from baseline in MTCO2e from baseline per facility | 8.6 | | | | |
| Of the 104 facilities that increased total MTCO2e | | | | | |
| Median percent increase from baseline in MTCO2e from baseline per facility | 5.2 | | | | |
| Note: Practice Greenhealth is not providing total MTCO2e per facility because most facilities did not provide all categories, and the number and type of categories of MTCO2e emissions provided varied too widely for a total, per facility, or per sq. ft. number to be valid. | | | | | |



| | |
|---|------------|
| CHANGE IN TOTAL MTCO2E PER SQUARE FEET | ALL |
| Of the 88 facilities that decreased total MTCO2e per square feet: | |
| Median percent decrease in MTCO2e per thousand square feet from total GHG emissions | 14% |
| Of the 18 facilities that increased total MTCO2e per square feet: | |
| Median percent increase in MTCO2e per thousand square feet from total GHG emissions | 4% |
| PERCENT REDUCTION IN EMISSIONS FROM ANESTHETIC GASES FROM BASELINE YEAR | ALL |
| Percent change in MTCO2e per anesthesia case from baseline year | 52% |

| CLIMATE RESILIENCE ACTIVITIES FOR ALL APPLICANTS | YES | STARTED BUT NOT COMPLETED | PERCENT OF FACILITIES REPORTING ANY PROGRESS |
|--|------------|----------------------------------|---|
| Analyzed local disaster risks due to climate change and its role in addressing them. | 38% | 25% | 63% |
| Reviewed the evidence of health risks from climate change (from local public health epidemiology/vulnerability assessments: e.g. migration of vector borne diseases, extreme heat, etc.) that may impact its community. | 50% | 15% | 65% |
| Participated in city, regional, or state climate resilience planning efforts. | 27% | 24% | 51% |
| Acted on one or more of top vulnerabilities to improve the resilience of building infrastructure, energy, water, and food systems. | 28% | 30% | 58% |
| Engaged in long term activities that restore and improve functioning ecosystem services | 16% | 31% | 47% |
| Engaged in long term activities that restore and improve functioning ecosystem services in order to foster more resilient communities (e.g. working to preserve or restore ecosystem services - forests, coastal zones, wetlands, river basins, fisheries). | 16% | 31% | 47% |
| Developed a plan and included climate risks in both facility and regional emergency preparedness planning and implementation for addressing key health care service delivery needs during or following extreme weather events such as cold or heat waves, hurricanes, droughts, wildfires. | 45% | 19% | 64% |
| Completed an assessment tool (such as the Building Health Care Sector Resilience Toolkit), and developed an action plan to address climate change-related building and infrastructure vulnerabilities. | 10% | 41% | 51% |

| EXTREME WEATHER | ALL | SMALL | LARGE | TOP 25 | CLIMATE CIRCLE |
|--|------------|--------------|--------------|---------------|-----------------------|
| Facility was impacted in the past year by an extreme weather event | 25% | 22% | 28% | 40% | 70% |
| Of those facilities impacted by an extreme weather event: | | | | | |
| Response to the extreme weather event was complicated by the COVID-19 pandemic | 45% | 36% | 52% | 40% | 29% |



| TRANSPORTATION LEADERSHIP | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------|
| Is the facility actively working to reduce the impact of transportation on the environment and the local community in alignment with Practice Greenhealth's Transportation Goals? | 52% | 49% | 57% | 92% | 100% |
| Has the facility designated someone to manage Transportation functions for the facility (including parking management, fleet management, commuter programs and incentives, etc.)? | 33% | 37% | 30% | 28% | 43% |
| Does the facility participate in regional transportation planning? | 25% | 16% | 34% | 60% | 86% |
| FLEET VEHICLE STRATEGIES | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
| Does the facility have a policy that includes environmental criteria for vehicle purchases? | 17% | 16% | 19% | 32% | 86% |
| Additional fleet vehicle strategies used to reduce mobile fuel emissions and toxins | | | | | |
| Route/vehicle informatics and optimization | 21% | 18% | 24% | 64% | 71% |
| Nitrogen to inflate tires to increase fuel efficiency | 1% | 1% | 2% | 0% | 0% |
| Lead-free wheel weights | 2% | 2% | 2% | 4% | 14% |
| Re-refined motor oil | 4% | 3% | 5% | 12% | 14% |
| Other | 8% | 5% | 10% | 20% | 14% |



| FLEET VEHICLES FUEL | ALL | FEDERAL FACILITIES | NON-FEDERAL FACILITIES | TOP 25 | TRAN. CIRCLE |
|---|-----|--------------------|------------------------|--------|--------------|
| Percent of facilities indicating a particular fuel type is used for fleet vehicles (out of facilities indicating fuel for any vehicles): | | | | | |
| Count of facilities contributing data | 242 | 34 | 208 | 23 | 7 |
| Gasoline | 98% | 91% | 99% | 91% | 71% |
| Diesel | 50% | 79% | 45% | 61% | 43% |
| E85 ethanol | 31% | 71% | 24% | 22% | 71% |
| Gasoline-electric hybrid | 18% | 71% | 10% | 35% | 43% |
| Electricity | 10% | 15% | 10% | 13% | 29% |
| Biodiesel (B20) | 2% | 9% | 1% | 9% | 29% |
| Propane | 2% | 0% | 2% | 0% | 0% |
| Biodiesel (B100) | 1% | 3% | 1% | 9% | 43% |
| CNG-electric hybrid | 1% | 3% | 1% | 0% | 0% |
| Diesel-electric hybrid | 1% | 0% | 1% | 9% | 14% |
| Fuel cell electric-hydrogen | 0% | 0% | 0% | 0% | 0% |
| Natural gas (CNG) | 0% | 0% | 0% | 0% | 0% |
| Other | 0% | 0% | 0% | 0% | 0% |
| Median percent of vehicles using alternative fuel (for facilities reporting count and fuel type for all vehicles) (if more than zero) | 21% | 46% | 13% | 12% | 85% |
| Median percent of new vehicles using alternative fuel (purchased/leased in 2021) (if more than zero) | 66% | 60% | 73% | 80% | 80% |

| REDUCTION IN GHG EMISSIONS FROM FLEET VEHICLES FUEL | ALL | COUNT CONTRIBUTING |
|---|-----|--------------------|
| Median reduction from baseline of GHG emissions (in MTCO ₂ e) from purchased fleet vehicles (Scope 1) (for those that reduced) | 45% | 3 |
| Median reduction from baseline of GHG emissions (in MTCO ₂ e) from leased fleet vehicles (Scope 3) (for those that reduced) | 45% | 5 |
| Median reduction from baseline of GHG emissions (inMTCO ₂ e) from all fleet vehicles (for those that reduced) | 37% | 9 |



| ELECTRIC VEHICLE INFRASTRUCTURE | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|---|------------|--------------|--------------|---------------|---------------------|
| Has the facility installed EV charging stations? | 35% | 19% | 50% | 52% | 43% |
| Of the facilities that installed EV charging stations and provided types, this percentage installed these types of stations: | | | | | |
| Count providing charging station data | 107 | 31 | 76 | 13 | 3 |
| Type 1 EV chargers (120-volt) | 29% | 23% | 32% | 46% | 33% |
| Type 2 EV chargers (240-volt) | 75% | 71% | 76% | 77% | 100% |
| Direct current (DC) “fast” chargers (480-volt) | 7% | 13% | 4% | 8% | 0% |
| Median number of charging stations per facility | 6 | 3 | 6 | 10 | 20 |
| Median number of charging stations per 1000 FTE | 2.0 | 4.1 | 1.6 | 2.1 | 1.7 |
| Total number of charging stations all facilities | 1,555 | 634 | 921 | 179 | 114 |
| Access for EV charging stations: | | | | | |
| Available to employees, free of charge | 20% | 8% | 31% | 44% | 43% |
| Available to employees, self-pay | 10% | 7% | 14% | 0% | 14% |
| Available to public, free of charge | 11% | 2% | 20% | 32% | 43% |
| Available to public, self-pay | 15% | 10% | 19% | 4% | 14% |
| Available for fleet vehicles | 8% | 6% | 10% | 16% | 29% |
| IDLE REDUCTION | | | | | |
| Does the facility have a policy, guidance or protocols that address idle reduction? | 29% | 29% | 29% | 68% | 86% |
| Has the facility worked to reduce idling from ambulances? | 24% | 23% | 25% | 56% | 57% |



| TELEHEALTH | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|---|-------|-------|-------|--------|--------------|
| Does the facility provide telehealth services? | 70% | 64% | 75% | 100% | 100% |
| Of the 241 facilities that provide telehealth services: | | | | | |
| Facility (or outside authority) require eligible outpatient visits be delivered via telehealth for any period of time in the past year due to the COVID-19 pandemic | 35% | 29% | 41% | 52% | 57% |
| Of the 85 that required telehealth visits, they were required for the following lengths of time: | | | | | |
| 0-2 weeks | 7% | 6% | 7% | 0% | 0% |
| 2-4 weeks | 2% | 0% | 4% | 0% | 0% |
| 4-6 weeks | 6% | 3% | 7% | 0% | 0% |
| Longer than 6 weeks total | 53% | 65% | 46% | 85% | 50% |
| Other | 5% | 3% | 6% | 15% | 50% |
| Of the 241 facilities that provide telehealth services: | | | | | |
| The following types of outpatient visits have been transitioned to telehealth: | | | | | |
| Home health care | 24% | 32% | 19% | 23% | 75% |
| Mental health | 68% | 84% | 59% | 100% | 100% |
| Occupational therapy | 39% | 48% | 33% | 54% | 75% |
| Physical therapy | 52% | 58% | 48% | 92% | 100% |
| Primary care | 67% | 77% | 61% | 100% | 100% |
| Pre-surgery testing | 12% | 3% | 17% | 0% | 25% |
| Rehabilitation | 46% | 55% | 41% | 92% | 100% |
| Specialty care | 65% | 77% | 57% | 100% | 100% |
| Urgent care (screening, triage) | 35% | 42% | 31% | 85% | 75% |
| Wellness | 55% | 61% | 52% | 92% | 75% |
| Other | 4% | 6% | 2% | 0% | 0% |
| Of the 241 facilities that provide telehealth services: | | | | | |
| Calculated the environmental benefits, particulate matter or greenhouse gas emissions reduction associated with its telehealth visits | 13% | 13% | 13% | 32% | 57% |
| Median percent of telehealth visits out of total outpatient visits in 2019 (baseline) | 2% | 2% | 1% | 3% | 2% |
| Median percent of telehealth visits out of total outpatient visits in 2021 | 13% | 10% | 15% | 32% | 11% |
| Median percent increase in percent telehealth visits: 2019 to 2021 (of those that increased) | 1359% | 827% | 7521% | 1276% | 2034% |



| TELEWORK | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|--|------|-------|-------|--------|--------------|
| Directed or allowed any non-clinical, administrative or ancillary staff to telework for any period of time in the past year due to the pandemic | 71% | 69% | 73% | 96% | 86% |
| Facilities that directed certain employees to telework did so for the following lengths of time: | | | | | |
| 0-2 weeks | 1% | 3% | 0% | 0% | 0% |
| 2-4 weeks | 0% | 0% | 0% | 0% | 0% |
| 4-6 weeks | 2% | 7% | 0% | 0% | 0% |
| Longer than 6 weeks total | 83% | 90% | 80% | 93% | 100% |
| Other | 4% | 0% | 7% | 0% | 0% |
| Median percent of FTEs who teleworked in baseline year (2019) | 2.2% | 2.1% | 2.7% | 12.2% | 3.6% |
| Median percent of FTEs who teleworked in current year (2021) | 7.6% | 7.5% | 7.6% | 15.0% | 11.3% |
| Median percent increase in percent telework: 2019 to 2021 (of those that increased) | 287% | 249% | 433% | 96% | 300% |
| Does the facility calculate the environmental benefits, particulate matter or greenhouse gas emissions reduction associated with employees who telework? | 14% | 13% | 14% | 44% | 43% |
| SUPPLY CHAIN AND TRANSPORTATION | | | | | |
| Does the facility include EPA SmartWay Partnership in its vendor selection criteria for distributors/suppliers/carriers? | 24% | 25% | 23% | 40% | 57% |
| Of the 84 facilities that included Smartway partnership in vendor selection criteria: | | | | | |
| Median percent of top 10 distributors/suppliers/carriers that are EPA SmartWay partners | 20% | 20% | 20% | 100% | 25% |
| Has the facility reduced days/frequency of delivery for any suppliers? | 20% | 17% | 22% | 36% | 29% |



| EMPLOYEE COMMUTE SURVEY | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|---|-----|---------|-------|--------|--------------|
| Does the facility conduct an annual survey to collect mode of transportation by employees commuting to work? | 20% | 14% | 25% | 20% | 43% |
| Of the 27 facilities that conducted a survey and provided data: | | | | | |
| Median percent single-occupant vehicle (SOV) rate (number of single occupancy (drive alone) commute trips divided by total number of commute trips) baseline year | 87% | 91% | 81% | 79% | 95% |
| Median percent single-occupant vehicle (SOV) rate (number of single occupancy (drive alone) commute trips divided by total number of commute trips) current year | 76% | No data | 76% | 85% | 79% |
| Median percent reduction in SOV commute trips from baseline year (for those that reduced) | 8% | No data | 8% | 5% | 32% |
| Percentage of facilities that have implemented the following strategies to support alternative commuters: | | | | | |
| Cash bonus for employees who do not drive alone to work | 4% | 4% | 4% | 4% | 14% |
| Provide emergency ride home for alternative commuters | 17% | 10% | 24% | 16% | 71% |
| Participate in employee alternative commute recognition and award programs | 11% | 7% | 16% | 8% | 29% |
| Percentage of facilities that have implemented the following strategies to support employees who walk and bike to work: | | | | | |
| Bikeshare stations and/or loaner bicycles | 10% | 6% | 14% | 24% | 71% |
| Free or discounted bicycles or bicycle service | 6% | 5% | 7% | 8% | 0% |
| Participate in Bike to Work Day, Ecochallenge, National Bike Challenge | 27% | 22% | 32% | 32% | 57% |
| Provide bike racks, bike paths, walkways, and shower facilities for alternative commuters | 53% | 48% | 59% | 92% | 100% |
| Free or discounted membership with bikeshare services | 11% | 9% | 13% | 32% | 43% |
| Other | 11% | 11% | 12% | 8% | 14% |



| PUBLIC TRANSIT AND ALTERNATIVE TRANSPORTATION | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|--|------------|--------------|--------------|---------------|---------------------|
| Percentage of facilities that have implemented the following strategies to support employees who use public transit and carpool/vanpool/shuttle rideshare services: | | | | | |
| Free or subsidized public transit pass | 26% | 17% | 35% | 32% | 71% |
| Incentives for vanpool drivers | 12% | 11% | 14% | 12% | 71% |
| Shuttle services | 23% | 9% | 36% | 56% | 71% |
| Free or discounted membership with rideshare services | 13% | 10% | 15% | 20% | 57% |
| Carpool matching services | 21% | 18% | 24% | 24% | 71% |
| Other | 7% | 3% | 11% | 28% | 43% |
| Percentage of facilities that have implemented the following strategies to encourage visitors and staff to use alternative transportation modes: | | | | | |
| Charge visitors for parking | 20% | 5% | 35% | 36% | 57% |
| Charge employees for parking | 16% | 3% | 28% | 28% | 57% |
| Provide preferred parking for carpool vehicles | 22% | 17% | 27% | 48% | 71% |
| Provide preferred parking for electric vehicles | 25% | 16% | 35% | 44% | 57% |
| Other | 6% | 4% | 9% | 16% | 0% |



Changes to operational protocols continued in 2021 due to the pandemic. The following tables highlight key aspects of operations that were impacted by the pandemic.

| CHANGE IN EMERGENCY ROOM VISITS | ALL | SMALL | LARGE | TOP 25 | FEDERAL FACILITIES |
|--|------------|--------------|--------------|---------------|---------------------------|
| Percent seeing an increase in total ER visits from previous year (of those reporting) | 83% | 83% | 83% | 95% | 62% |
| Median percent increase in total ER visits from previous year (for those with an increase) | 17% | 16% | 17% | 17% | 19% |
| Median percent decrease in total ER visits from previous year (for those with a decrease) | 8% | 8% | 10% | 7% | 30% |

| COVID EMERGENCY ROOM VISITS | ALL | SMALL | LARGE | TOP 25 | FEDERAL FACILITIES |
|--|------------|--------------|--------------|---------------|---------------------------|
| Median percent of emergency room visits related to COVID (not including zero) in 2021 | 5% | 5% | 5% | 5% | 7% |
| Median percent of emergency room visits related to COVID (not including zero) in 2020 | 3% | 5% | 3% | 2% | 6% |
| Percent seeing an increase in total COVID-related ER visits from previous year (of those reporting) | 84% | 88% | 80% | 93% | 74% |
| Median percent increase in total COVID-related ER visits from previous year (for those with an increase) | 153% | 82% | 103% | 214% | 60% |

Note: Only 10% of hospitals reported 22% or more of their ED visits were related to COVID

| COVID PATIENT DAYS | ALL | SMALL | LARGE | TOP 25 | FEDERAL FACILITIES |
|---|------------|--------------|--------------|---------------|---------------------------|
| Median percent of patient days due to patients hospitalized in an adult or pediatric inpatient bed who had laboratory-confirmed or suspected COVID-19 | 11% | 5% | 10% | 12% | 6% |

| SUSTAINABILITY AND COMMUNITY | ALL | SMALL | LARGE | TOP 25 | LEADERSHIP CIRCLE |
|---|------------|--------------|--------------|---------------|--------------------------|
| Has your facility partnered with the community to address community needs brought on and/or exacerbated by the COVID-19 pandemic? | 76% | 73% | 79% | 96% | 90% |

| How the facility's sustainability work been impacted by the COVID-19 pandemic: | | | | | |
|---|-----|-----|-----|-----|-----|
| Increased focus on sustainability | 10% | 10% | 10% | 8% | 10% |
| Reduced capacity for/focus on sustainability | 55% | 56% | 55% | 80% | 80% |
| Sustainability work on hold for at least 3 months | 1% | 1% | 1% | 0% | 0% |
| Sustainability work on hold for at least 6 months | 11% | 10% | 13% | 0% | 0% |
| Sustainability work on hold until further notice | 2% | 3% | 1% | 0% | 0% |
| Sustainability program eliminated | 0% | 1% | 0% | 0% | 0% |
| Other | 5% | 5% | 5% | 4% | 0% |



| DISINFECTANTS | ALL | SMALL | LARGE | TOP 25 | CHEMICALS CIRCLE |
|--|-----|-------|-------|--------|------------------|
| Has the facility expanded its use of disinfectants/one-step disinfectant cleaners for environmental cleaning as a result of the COVID-19 pandemic? | 67% | 67% | 68% | 80% | 93% |
| The 232 facilities that expanded use of disinfectants did it in these areas: | | | | | |
| All patient care areas | 50% | 47% | 53% | 50% | 32% |
| Some patient care areas | 19% | 21% | 18% | 15% | 5% |
| Food services | 22% | 23% | 22% | 15% | 5% |
| Administrative areas | 21% | 21% | 21% | 25% | 10% |
| Everywhere | 53% | 60% | 48% | 80% | 93% |
| Other | 6% | 4% | 8% | 10% | 2% |
| OPERATING ROOMS | ALL | SMALL | LARGE | TOP 25 | GOR CIRCLE |
| Did the facility cancel or postpone elective surgeries for any period of time (either by organizational decision or mandate) during the past year due to COVID-19? | 53% | 50% | 55% | 80% | 60% |
| The 182 facilities that cancelled or postponed elective surgeries did it for these lengths of time: | | | | | |
| 0-2 weeks | 11% | 11% | 10% | 15% | 17% |
| 2-4 weeks | 11% | 11% | 11% | 10% | 0% |
| 4-6 weeks | 30% | 37% | 24% | 30% | 17% |
| Longer than 6 weeks total | 39% | 36% | 43% | 45% | 67% |
| Were there any changes made to operating room protocol as a result of the COVID-19 pandemic? | 53% | 52% | 54% | 76% | 70% |
| FOOD SERVICES | ALL | SMALL | LARGE | TOP 25 | FOOD CIRCLE |
| Percentage out of all hospitals that shut down any food service areas for any period of time due to the COVID-19 pandemic. | 36% | 38% | 34% | 64% | 70% |
| The 124 facilities that shut down food service areas did it for these lengths of time: | | | | | |
| 0-2 weeks | 0% | 0% | 0% | 0% | 0% |
| 2-4 weeks | 4% | 5% | 3% | 6% | 0% |
| 4-6 weeks | 10% | 11% | 8% | 13% | 14% |
| Longer than 6 weeks total | 84% | 83% | 85% | 81% | 86% |
| Did the facility change any of its food and nutrition services protocols as a result of the COVID-19 pandemic? | 68% | 65% | 70% | 68% | 90% |
| Did your facility work with the community to address increased food insecurity as a result of the pandemic? | 37% | 35% | 40% | 56% | 90% |



| SUPPLY CHAIN | ALL | SMALL | LARGE | TOP 25 | PROCUREMENT CIRCLE |
|--|-----|-------|-------|--------|--------------------|
| Has the facility created procedures to re-use or extend the use of PPE in response to COVID-19? | 74% | 77% | 72% | 92% | 100% |
| The 124 facilities that re-used or extended the use of PPE did it with these products: | | | | | |
| Reusable/laundryable isolation gowns | 60% | 61% | 59% | 61% | 55% |
| PAPRs or elastomeric | 59% | 57% | 62% | 78% | 95% |
| N95 masks | 91% | 94% | 89% | 96% | 100% |
| Other | 34% | 33% | 35% | 17% | 61% |
| Did the facility leverage its supply chain relationships to address the critical shortage of supplies and PPE over the past year? | 88% | 87% | 89% | 96% | 100% |
| Has your facility partnered with the local community to address supply gaps brought on by the COVID-19 pandemic? | 70% | 68% | 72% | 80% | 45% |
| Has the facility (or parent health system) made (or is planning to make) any changes to its long-term buying/supply chain strategy based on the COVID-19 pandemic? | 85% | 84% | 86% | 96% | 100% |
| ENERGY | ALL | SMALL | LARGE | TOP 25 | ENERGY CIRCLE |
| Did the facility make changes to its air handling protocols to adapt to the COVID-19 pandemic? | 61% | 53% | 67% | 76% | 70% |
| The 124 facilities that made changes to their air handling protocols to adapt to the COVID-19 pandemic, used the following measures: | | | | | |
| Increase in outside air | 59% | 60% | 58% | 74% | 100% |
| Increased number of air changes | 57% | 58% | 57% | 74% | 57% |
| Discontinued use of HVAC setback | 18% | 16% | 19% | 32% | 29% |
| Negative pressure rooms | 78% | 78% | 77% | 74% | 71% |
| Negative pressure isolation rooms | 69% | 72% | 67% | 74% | 86% |
| Other | 13% | 11% | 14% | 32% | 29% |
| The 124 facilities that increased outside air utilized it in the following areas: | | | | | |
| 100% outside air for entire facility | 19% | 23% | 17% | 0% | 0% |
| By department or unit | 74% | 74% | 74% | 93% | 100% |
| Other | 3% | 2% | 4% | 7% | 0% |



| CLIMATE, TELEHEALTH, AND TELEWORK | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|--|-----|-------|-------|--------|--------------|
| Was the response to the extreme weather event complicated by the COVID-19 pandemic? | 45% | 36% | 52% | 40% | |
| Does the facility provide telehealth services? | 70% | 64% | 75% | 100% | 100% |
| Did the facility (or outside authority) require eligible outpatient visits be delivered via telehealth for any period of time in the past year due to the COVID-19 pandemic? | 35% | 29% | 41% | 52% | 57% |
| Facilities or outside authorities required eligible outpatient visits be delivered via telehealth for the following lengths of time: | | | | | |
| 0-2 weeks | 7% | 6% | 7% | 0% | 0% |
| 2-4 weeks | 2% | 0% | 4% | 0% | 0% |
| 4-6 weeks | 6% | 3% | 7% | 0% | 0% |
| Longer than 6 weeks total | 53% | 65% | 46% | 85% | 50% |
| Other | 5% | 3% | 6% | 15% | 50% |
| The following types of outpatient visits have been transitioned to telehealth: | | | | | |
| Primary care | 67% | 77% | 61% | 100% | 100% |
| Mental health | 68% | 84% | 59% | 100% | 100% |
| Specialty care | 65% | 77% | 57% | 100% | 100% |
| Wellness | 55% | 61% | 52% | 92% | 75% |
| Physical therapy | 52% | 58% | 48% | 92% | 100% |
| Occupational therapy | 39% | 48% | 33% | 54% | 75% |
| Rehabilitation | 46% | 55% | 41% | 92% | 100% |
| Urgent care (screening, triage) | 35% | 42% | 31% | 85% | 75% |
| Pre-surgery testing | 12% | 3% | 17% | 0% | 25% |
| Home health care | 24% | 32% | 19% | 23% | 75% |
| Other | 4% | 6% | 2% | 0% | 0% |
| Does the facility calculate the environmental benefits, particulate matter or greenhouse gas emissions reduction associated with its telehealth visits? | 13% | 13% | 13% | 32% | 57% |
| Did the facility direct any non-clinical, administrative or ancillary staff to telework for any period of time during the COVID-19 pandemic? | 71% | 69% | 73% | 96% | 86% |
| Facilities that directed staff to telework did so for the following lengths of time: | | | | | |








| CLIMATE, TELEHEALTH, AND TELEWORK | ALL | SMALL | LARGE | TOP 25 | TRAN. CIRCLE |
|--|--------|--------|--------|--------|--------------|
| 0-2 weeks | 1% | 3% | 0% | 0% | 0% |
| 2-4 weeks | 0% | 0% | 0% | 0% | 0% |
| 4-6 weeks | 2% | 7% | 0% | 0% | 0% |
| Longer than 6 weeks total | 83% | 90% | 80% | 93% | 100% |
| Other | 4% | 0% | 7% | 0% | 0% |
| Median percent of FTEs who teleworked in baseline year (2019) | 2.2% | 2.1% | 2.7% | 12.2% | 3.6% |
| Median percent of FTEs who teleworked in current year (2021) | 7.6% | 7.5% | 7.6% | 15.0% | 11.3% |
| Median percent increase in telework: 2019 to 2021 | 286.9% | 248.6% | 432.6% | 96.0% | 300.0% |
| Does the facility calculate the environmental benefits, particulate matter or greenhouse gas emissions reduction associated with employees who telework? | 14% | 13% | 14% | 44% | 43% |






| BUILDING CAPACITY | ALL | SMALL | LARGE | TOP 25 | GREEN BUILD. CIRCLE |
|---|-----|-------|-------|--------|---------------------|
| Did the facility have pre-determined flexible space it could utilize for surge capacity for the COVID-19 pandemic? | 47% | 40% | 53% | 72% | 80% |
| Did the facility adapt other usable space to accommodate surge capacity for COVID patients during the pandemic? | 50% | 47% | 52% | 72% | 90% |
| Of those facilities answering both questions (did they have pre-determined flexible space, and did they adapt other usable space): | | | | | |
| Used predetermined and had to adapt other space | 47% | 35% | 58% | 52% | 70% |
| Adapted other space, did not have pre-determined space | 25% | 30% | 21% | 20% | 20% |
| Used predetermined, did not need to adapt other space | 19% | 19% | 18% | 20% | 10% |
| Did not need either | 9% | 15% | 3% | 8% | 0% |



An academic medical center is defined by Practice Greenhealth as a hospital attached to a university medical school and/or a teaching hospital affiliated with a medical school. These hospitals are training grounds for residents, medical and nursing students, Ph.D. candidates, and post-doctoral researchers. Some academic medical centers (126 of the 193) include on-site research facilities, which host laboratories and other research amenities that can contribute to their environmental footprint.

| METRIC | COMMUNITY HOSPITALS (NON-ACADEMIC) MEDIAN | ACADEMIC MEDICAL CENTERS WITH NO ON-SITE RESEARCH MEDIAN | ACADEMIC MEDICAL CENTERS WITH ON-SITE RESEARCH MEDIAN | ALL HOSPITAL APPLICANTS |
|---|---|--|---|-------------------------|
|  | Recycling as a % of total waste | 24.5% | 23.0% | 23.0% |
| | RMW as a % of total waste | 6.0% | 12.9% | 6.5% |
| | Total waste in lbs per patient day | 40.9 lbs. | 37.4 lbs. | 42.0 lbs. |
|  | % Green spend on 5 cleaning chemicals | 24% | 40% | 64% |
| | % Spend on healthy interiors | 93% | 88% | 92% |
|  | % OR kit types reviewed | 100.0% | 100.0% | 100.0% |
| | Lbs SUDs collected per OR procedure | 0.63 lbs. | 0.38 lbs. | 0.57 lbs. |
| | # Reusable prod types (out of 34) | 8 | 8 | 7 |
| | % of ORs with HVAC setback | 100.0% | 87.9% | 100% |
| | MTCO ₂ e from inhaled anesthetics per OR procedure | 0.04 | 0.05 | 0.04 |
|  | Lbs meat per food/bev dollar spend | 0.054 lbs. | 0.055 lbs. | 0.069 lbs. |
| | % Spend on local food/bev | 4.0% | 5.6% | 5.0% |
| | % Spend on sustainable food/bev | 11.1% | 8.7% | 14.0% |
| | % Change in MTCO ₂ e from meat | 21.3% | 16.4% | 24.0% |
| % Sustainable meat (by weight) | 19.4% | 24.7% | 17.0% | |
|  | % Green spend on EPEAT devices | 94.8% | 95.7% | 99.2% |
| | % Spend on sustainable procurement | 15.8% | 14.3% | 16.7% |
| | % Green spend on copy paper | 100% | 49.8% | 100% |



| METRIC | COMMUNITY HOSPITALS (NON-ACADEMIC) MEDIAN | ACADEMIC MEDICAL CENTERS WITH NO ON-SITE RESEARCH MEDIAN | ACADEMIC MEDICAL CENTERS WITH ON-SITE RESEARCH MEDIAN | ALL HOSPITAL APPLICANTS | |
|---|--|--|---|-------------------------|------------------|
|  | Energy use intensity (EUI) | 230 | 274 | 244 | 241 |
| | % Change in EUI from baseline | 10.6% | 7.5% | 10.0% | 8.0% |
| | ENERGY STAR score | 63 | 66 | 55 | 65 |
|  | Total gallons per sq. ft. | 40.7 gals | 50.1 gals | 39.1 gals | 42.0 gals |
| | % Change in water use from baseline | 18.3% | 14.1% | 13.2% | 23.0% |
| | Indoor gallons per sq. ft. | 38.49 | 36.91 | 36.63 | 37.14 |
|  | Gallons per FTE | 18,938 | 15,733 | 11,792 | 14,708 |
| | % Renewable energy | 11.7% | 30.7% | 8.6% | 18.6% |
|  | % Change in energy Scope 1 & 2 MTCO2e | 7.6% | 5.2% | 10.7% | 7.3% |
| | % Alt fuel fleet vehicles | 50.0% | 10.1% | 15.7% | 21.4% |
|  | % C&D waste recycled | 60.0% | 85.4% | 72.7% | 70.0% |



For more information please visit:

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