EXHALE
Health Foundation

Environmental Management Policy and Procedures

Policy reference EHF EN 06 | Version 1.0 | Policy owner: Executive Lead | Prepared 1 June 2026

Purpose and commitment

Exhale Health Foundation will reduce avoidable environmental harm from its office work, research, procurement, travel, training and events. We will consider climate and environmental risks alongside public-health needs, safety, accessibility and value for money. Environmental savings will not justify unsafe travel, excluding participants, or inadequate infection prevention.

This policy will apply to trustees, staff, project workers, consultants, volunteers and advisers when acting for EHF. Suppliers and partners will receive relevant expectations through selection and contract arrangements. We will comply with applicable environmental rules in the places where we work and will not claim certification, carbon neutrality or membership of an environmental initiative without evidence.

Responsibilities

The Executive Lead will oversee implementation and assign a focal point for proportionate monitoring. Project leads will include environmental considerations in activity plans and budgets. Procurement and event leads will assess practical alternatives before committing funds. Everyone will avoid waste, use equipment responsibly and report hazards or preventable pollution.

Trustees will review significant risks, progress and any material claims made to clients or the public. EHF will assess its actual activities rather than claim to control environmental impacts over which it has no information or influence.

Planning activities and travel

Before approving an activity, the project lead will ask whether the same objective can be achieved through a remote meeting, hybrid participation, a local collaborator, or fewer combined visits. The decision will consider participant access, quality of engagement, safeguarding, security, connectivity and the need for face-to-face work.

Where travel is necessary, staff will combine compatible activities, avoid duplicate journeys and use reasonable lower-impact options where safe and practical. The team will consider public transport, rail, shared transport, and local procurement. Economy travel will be the default for flights unless accessibility, health, safety or a documented contractual reason justifies another arrangement.

Travel approval will record the purpose, expected benefit, alternatives considered and relevant safety or accessibility needs. Environmental preferences will not override an individual's reasonable adjustment or require unsafe overnight travel. Staff will not present an estimate of avoided emissions as a measured saving without stating its assumptions and method.

Procurement and resource use

Purchases will be based on demonstrated need, durability, repairability, efficiency and total cost over the item's useful life. Staff will consider sharing, repair, refurbishment or hire before buying new equipment. Staff will check suppliers' environmental claims proportionate to the value and risk of the purchase; vague green claims will not replace evidence.

EHF will prefer reusable or refillable supplies where hygienic and practical, avoid unnecessary packaging and printing, and use electronic documents and signatures where acceptable. When printing is necessary, documents will be readable, printed in reasonable quantities and use double-sided printing where possible. Reuse will never involve exposing confidential information.

Staff will switch off unused equipment when safe, use appropriate power-saving settings, avoid unnecessary cooling and lighting, and report water leaks or equipment faults. Energy efficiency will not compromise ventilation, safe temperatures, emergency communications or protection of data and equipment.

Waste and equipment disposal

Staff will separate reusable materials, ordinary waste and hazardous items where suitable collection arrangements exist. Staff will not place batteries, electronics, chemicals, or other hazardous waste in ordinary waste streams, burn them openly, or dispose of them through an unverified informal route. EHF will use appropriately authorised collection or recycling services where required and retain disposal evidence.

Before donating, reusing, selling, or recycling equipment, the data lead will confirm secure removal of personal and confidential information. The asset register will record the item, authorisation, sanitisation method and disposal or transfer route. Broken equipment will be repaired where sensible; unrepairable equipment will be handled through an appropriate e-waste route.

If a project involves clinical, laboratory or field materials requiring specialised waste management, the project lead will obtain the host institution's approved arrangements before work begins. This general office policy will not replace clinical-waste, biosafety or laboratory procedures.

Events and field activities

Event leads will consider accessible existing venues, hybrid attendance, reasonable public-transport access, reusable meeting materials, drinking-water arrangements and appropriately planned catering. Attendance estimates will limit food and material waste. Single-use items will be avoided where a safe alternative exists; infection-prevention requirements will take precedence where needed.

Field plans will consider local water stress, pollution, waste collection, habitats and community concerns. Activities will not discharge waste into watercourses or damage sensitive sites. Staff will follow permission requirements for sampling or access and will obtain specialist review where an activity could cause significant environmental effects.

Digital work will also be proportionate. Teams will avoid unnecessary duplication of large files, retain information according to the Data Protection Policy and use AI or intensive computing where it serves a defined need. EHF will not assume that digital delivery has no environmental cost.

Incident and concern procedure

Anyone identifying a spill, unsafe disposal, fire risk or other environmental harm will stop the affected activity where safe and alert the project lead. Staff will not attempt specialist containment without training or expose themselves to hazardous materials. Immediate danger will be referred to appropriate local emergency services or the responsible site manager.

The project lead will record the nature, location, time, likely impact and action taken, arrange competent advice and notify the Executive Lead. EHF will assess any duty to notify an authority, property owner or client and will preserve relevant evidence. Contractual notifications, including relevant Client's incident reporting, will be made promptly without delaying emergency action or a statutory report.

Concerns may be raised through exhalehealthfoundation@gmail.com, +234 815 546 5671 or an unconflicted trustee. Honest reporting will be protected from retaliation. The Executive Lead will agree on corrective action, responsibility, and a review date, and will check that the action addresses the cause rather than only the immediate symptom.

Measurement and improvement

Within 90 days of adoption, the focal point will establish a proportionate baseline using records EHF can obtain reliably. This will include necessary travel, flights and major transport modes, office printing, significant equipment purchases, and disposal of electronics or hazardous items. Energy and water use will be included where EHF controls the premises and reliable records are available; missing data will be stated openly.

Within six months of adoption, EHF will set a small number of practical annual objectives based on the baseline, responsibilities and available resources. Examples may include reducing avoidable journeys, increasing reuse of materials and documenting all e-waste transfers. Targets will not be presented as achieved until evidence supports them.

If greenhouse-gas estimates are produced, the boundary, calculation method, activity data, conversion factors and limitations will be recorded. Offsets will not substitute for avoiding or reducing emissions, and any offset-related claim will require independent evidence. Staff will not publish unsupported green or carbon-neutral claims.

The focal point will review progress at least annually, identify constraints and propose achievable improvements. Trustees will consider the results alongside delivery quality and inclusion. Environmental practices will be covered at induction and in relevant travel, procurement and event briefings.

Practical records to maintain

- Activity and travel decision: objective; remote or local alternatives; selected option and justification; safety and accessibility considerations; approver.

- Environmental action register: baseline and data gaps; objective; indicator and method; responsible person; resources; deadline; progress and evidence.
- Disposal and incident log: item or incident; environmental and data risks; authorised provider or referral; action; evidence of disposal or remediation; closure and review.

Standards informing this policy

Climate and Environment Charter for Humanitarian Organizations

NESREA environmental laws and regulations

Approval and implementation

This policy will take effect on the approval date recorded below. The Board of Trustees, or a trustee with documented delegated authority, will approve the policy and record the operational appointments. An implicated person will not approve or oversee a case concerning themselves.

Approved by: Dr Kelly Elimian **Position**: President/Executive Director

Signature:  **Approval and effective date**: 1st July 2026

Operational focal point: Dr Florence Amiewalan **Direct contact:** +2348035090922

Independent trustee or alternate: Prof. Nosa Eghafona **Direct contact:** +2348034468560

Next review due: 1st June 2027 **Adoption record reference**: Board resolution dated 1st July 2026

Before implementation, the Executive Lead will confirm named contacts and access permissions, brief the people covered by this policy, establish the required records and communicate relevant reporting routes. No activity requiring prior safeguards or approval will begin until those controls are in place. Staff will acknowledge the policy at induction and after material revisions.