



## 2020 Melvin Creeley and John Chapman Award Application

### Melvin Creeley Leadership and John Chapman Awards Background

**OHA's Environmental Leadership Council invites hospitals and health systems to submit a nomination for the 2020 Melvin Creeley Award. The deadline for submissions is March 18th.**

**The Melvin Creeley Award recognizes hospitals and health systems that promote sound environmental practices through the implementation of energy efficiency programs, waste reduction strategies, recycling initiatives and other activities to preserve the health of the planet for future generations.**

**The award is named after former hospital CEO Melvin Creeley, who served on the OHA governing Board, including as Board Chair, and who was the first Chairperson of OHA's Environmental Leadership Council, a committee of OHA's governing Board, created more than 17 years ago. He also served on the Board of other OHA affiliates including its Research and Educational Foundation.**

**Melvin Creeley Awards will be based on the merits of a hospital's responses to this application. Melvin Creeley recipients will be announced by OHA in April and will be recognized at an OHA Energy and Sustainability awards luncheon during the OHA Annual Meeting (in Columbus June 8-10).**

**Recipients of the Melvin Creeley Award will be considered for OHA's highest environmental leadership award, the John Chapman Award for Environmental Leadership. To be eligible for the John Chapman Award, applicants must provide supporting data and a written program narrative as requested in question 22.**

**If you have questions regarding the application process, please contact Nolan Rutschilling at [Nolan.Rutschilling@ohiohospitals.org](mailto:Nolan.Rutschilling@ohiohospitals.org).**

\* 1. Which of the following best describes your organization?

- Health system
- More than 250 beds
- Less than 250 beds

\* 2. Please select yes or no to indicate whether or not your hospital sustainability initiative has the following statements in place.

	Yes	No
An upper management support statement	<input type="radio"/>	<input type="radio"/>
An environmental policy statement for the facility	<input type="radio"/>	<input type="radio"/>

List the top three goals or priorities of your green initiative program.

\* 3. Has your organization received the Melvin Creeley Award in a previous year?

- Yes
- No
- Unsure

Please Explain

\* 4. Has your organization made an internal or external commitment around climate change?

- Yes
- No

If yes, Please Explain

\* 5. Has your organization appointed or hired someone to lead sustainability efforts?

- Yes
- No

If needed, Please Explain

\* 6. Does your organization track greenhouse gas emissions?

- Yes
- No

\* 7. Does your organization have a publicly available sustainability plan or list of goals?

- Yes
- No
- If yes, please provide link



2020 Melvin Creeley and John Chapman Award Application

Energy Management

\* 8. Do you benchmark your hospital in ENERGY STAR Portfolio Manager?

- Yes
- No
- In progress

\* 9. Do you Benchmark non-hospital buildings in ENERGY STAR Portfolio Manager?

- Yes
- No
- In Progress

\* 10. OHA's Energy and Sustainability Program benchmarks hospitals without charge and issues awards to high performing hospitals. Does your hospital participate in OHA's Energy Cup, in which Ohio hospitals compare their ENERGY STAR score anonymously with other Ohio hospitals?

- Yes
- No
- In Progress

\* 11. Does any percentage of your hospital or hospital-affiliated building's electricity supply come from renewable resources (viz. renewable, wind, solar, hydroelectric)?

- Yes
- No
- Considering

If Yes, What Percentage

\* 12. Do you practice energy efficiency when monitoring and scheduling operating rooms?

- Yes
- No

If yes, please provide examples.

\* 13. Please indicate whether or not the organization has completed each of the following projects.

	Yes	No	In progress
All incandescent bulbs removed or replaced	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All T-12's removed or replaced	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CFL lights in place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LED light bulbs in place	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Building envelope (windows sealed, tucked pointing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Construction to LEED specification	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



2020 Melvin Creeley and John Chapman Award Application

Solid Waste Reduction and Recycling

\* 14. Where is your hospital in the completion of these tasks? The health care facility currently:

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Waste reduction policies and procedures (arrangements with vendors to eliminate/reduce packaging)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cardboard/Boxboard recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Records shredding/recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Plastic recycling numbers #1 - #7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aluminum and glass recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pallets and wood	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ink jet, toner, and printing cartridges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Construction waste recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Re-usable linens are re-used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mixed metal recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Furniture and medical equipment donation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Packaging material is re-used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ice packs and coolers are re-used or donated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Double sided copies are used and recommended by leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 15. Where is your hospital in the completion of the following tasks in the dietary department?

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Food donation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
#10 cans and #2 plastics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grease and oils	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Composting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reducing or eliminating use of disposable containers and pallets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



2020 Melvin Creeley and John Chapman Award Application

Regulated Medical Waste

\* 16. Is your EPA generator status up to date?

- Yes
- No



\* 17. Where is your hospital in the completion of the following tasks for red bag waste?

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Container placement and management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In-service education of staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Waste segregation signage is utilized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Audits are performed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall volume of red bag waste is maintained at less than 10 percent waste generated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Implemented reusable sharps containers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



2020 Melvin Creeley and John Chapman Award Application

Universal Waste and Recycled Hazardous Waste

\* 18. Where is your hospital in the completion of these tasks? The health care facility currently:

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Electronic recycling/re-use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Battery recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fluorescent lighting recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alcohol recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Xylene recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Formalin recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paint recycling or donation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
X-ray film/silver recycling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lead apron recycling or re-use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmaceutical reverse distribution is utilized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



2020 Melvin Creeley and John Chapman Award Application

Hazardous Waste Management

\* 19. Is the organization's EPA identification and generator status up to date and maintained?

- Yes
- No

\* 20. Where is your hospital in the completion of these tasks? The health care facility currently:

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Mercury elimination policies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmaceutical waste and RCRA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chemotherapy waste management system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Chemical waste management system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



2020 Melvin Creeley and John Chapman Award Application

Facilities Waste Management and Preferable Purchasing

\* 21. Where is your hospital in the completion of these tasks? The health care facility currently:

	Has started an audit/assessment for the facility	Is in the planning stages	Has a policy for the waste stream	Has partially implemented a reduction program toward the facility's goals	Has eliminated a waste stream or met the facility's implementation goals	No actions and/or have not yet considered
Suction canister evacuation system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrated pest management utilized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Green cleaning chemicals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Microfiber mopping and re-usable cleaning cloths	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elimination of glutaraldehyde	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elimination of EtO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elimination of PVC and/or Products containing DEHP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Utilizing digital imaging	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
IT Taking advantage of take-back/upgradability programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elimination of products that contain mercury	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Purchase ENERGY STAR rated products	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Utilizing energy efficiency projects/upgrades when replacement considered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Changed to more efficient lighting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



\* 22. Has the organization completed or started the following tasks?

	Yes	No	Planning stages
Green roof installation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use native plants in landscaping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fleet vehicles—changed to electric cars, hybrid or natural gas vehicles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Charging stations—available for employees or visitors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Car pooling/ride to work program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Green walls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Storm water bioswales and/or rain gardens	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No idling policy in garage or ambulance drop-off	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use of locally grown food sources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please list other green initiatives undertaken by the organization.

\* 23. Is your hospital a member of Practice GreenHealth?

- Yes
- No
- Considering

\* 24. Part 1 - If your organization received the Melvin Creeley Award in past years, what new programs or initiatives did your organization implement?

\* 25. Part 2 - If your organization received the Melvin Creeley Award in past years, and has not implemented any new programs or initiatives yet, What are your plans to implement in 2020?

\* 26. What new initiative (environmental, energy, or sustainability related) would your organization like to undertake if you were able to receive more funding?

\* 27. What new initiative (environmental, energy, or sustainability related) would your organization like to undertake if you were able to receive more technical assistance?



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Description of Program

28. Describe how your hospital/health care facility has shown excellence in initiating or supporting hospital sustainability such as reduction of waste-stream volume, elimination of mercury, energy reduction, carbon footprint reduction, or other innovative ideas. Please provide baseline data to validate the program results. Supporting documents, including charts, photographs, news clippings, press releases, publication or other material should included if it will provide greater understanding of the activity being nominated. Materials can go back up to five years, but should include the past year. This must be completed to be eligible for the John Chapman Award. Documentation can be emailed to Nolan Rutschilling at [Nolan.Rutschilling@ohiohospitals.org](mailto:Nolan.Rutschilling@ohiohospitals.org).



2020 Melvin Creeley and John Chapman Award Application

Contact Information



\* 29. Please provide your contact information.

Name:

Organization:

Title:

Address:

City:

State:

Zip Code:

Email address:

Phone number: