



Environmental Management Plan

ISOL8_EMP Ver 002

ISOL8 Healthcare Limited

08/07/2026

ISOL8 Healthcare Limited | Unit 4 Joyce House, Barrack Square, Ballincollig, Co. Cork, P31 HW35, Ireland

CONTROLLED DOCUMENT IN THE ISOL8 QMS PRINTED COPIES ARE UNCONTROLLED

THE CURRENT VERSION IS AVAILABLE ON REQUEST

Document Control Revision history

Revision	Date	Author	Reason for change
0.1	20/08/2021	Fergal Whitehead	Completed Final Version
0.2	08/07/2026	Christoph Lukkien	Full review: new addresses, targets and procedures.

Contents

1.	Introduction and Environmental Policy	4
1.1.	Purpose	4
1.2.	Environmental Policy Statement	4
1.3.	Aims	4
1.4.	Objectives and Targets	5
1.5.	Scope	6
1.6.	Interested Parties	6
2.	Context, Risks and Opportunities	8
3.	Environmental Aspects and Impacts	9
4.	Compliance Obligations	10
5.	Operational Controls	12
5.1.	Energy Management	12
5.2.	Waste Management	12
5.3.	Sustainable Materials, Packaging and Product Design	13
5.4.	Transport and Logistics	14
5.5.	Water Use	14
5.6.	Supply Chain Environmental Controls	14
5.7.	Communication	15
5.8.	Planned Changes, Product Design and Contractors	15
6.	Environmental Emergency Preparedness and Response	16
6.1.	Potential Environmental Emergencies	16
6.2.	Response Procedure	16
6.3.	Preparedness and Testing	16
6.4.	Business Continuity	17
7.	Environmental Incidents, Complaints and Records	18
8.	Training and Awareness	19
9.	Monitoring, Measurement, Audit and Review	20
9.1.	Key Performance Indicators	20
9.2.	Monitoring and Data	20
9.3.	Internal Audit	20
9.4.	Management Review	20
9.5.	Reporting	21
10.	Non-Conformities and Corrective Action	22
11.	Roles and Responsibilities	23
12.	ISO 14001 Certification Roadmap	24
13.	Policy Development and Review	24
14.	Signature	25
	Appendix A: ISO 14001:2015 Cross-Reference	26

1. Introduction and Environmental Policy

1.1. Purpose

This Environmental Management Plan (EMP) sets out how ISOL8 Healthcare Ltd (ISOL8) manages the environmental impact of its activities, products and supply chain. It is our documented environmental management system.

The EMP is structured to align with ISO 14001:2015 and runs alongside our EN ISO 13485 certified quality management system (QMS), which provides document control, internal audit, corrective and preventive action (CAPA) and management review. We are working towards ISO 14001 certification, with a target date of October 2029 (section 12). Appendix A shows where each ISO 14001:2015 requirement is addressed.

1.2. Environmental Policy Statement

ISOL8 designs and supplies single-use medical devices and theatre wear to the NHS and other healthcare providers. We recognise that our products, packaging, operations and supply chain affect the environment. We are committed to:

- complying with all environmental legislation and other requirements that apply to us;
- protecting the environment and preventing pollution, including emissions to air, releases to land and water, noise and waste;
- reaching Net Zero emissions across Scope 1, 2 and 3 by 2040, with the interim targets in section 1.4 and in our Carbon Reduction Plan;
- using energy, materials and water efficiently, and choosing renewable energy and recycled or bio-based materials wherever clinical safety allows;
- applying the waste hierarchy: reduce, reuse, recycle and recover, with disposal as the last resort;
- working with our suppliers and logistics partners to reduce environmental impacts across the supply chain;
- giving our staff the training and information they need to work in an environmentally responsible way;
- continually improving our environmental performance and this management system.

The Board of Directors, as ISOL8's top management, is accountable for the effectiveness of the environmental management system. This policy is approved by the Board and signed on its behalf by the Director of Operations. It is reviewed at least once a year (section 13), communicated to all staff at induction and in annual refresher training, and available to customers, suppliers and the public on request.

1.3. Aims

- To reduce the environmental impact of ISOL8's operations, products and supply chain.
- To affirm ISOL8's commitment to reducing this impact, at every level of the business.
- To set out the arrangements, responsibilities and targets through which we achieve this.

1.4. Objectives and Targets

Our objectives follow from our significant environmental aspects (section 3), our compliance obligations (section 4) and the expectations of our customers, in particular the NHS.

Emission figures are taken from our Carbon Reduction Plan (2022 baseline: 88.1 tCO₂e; 2025: 77.3 tCO₂e).

Objective and target	Main actions	Owner	By
Net Zero across Scope 1, 2 and 3	All actions below; offsetting of remaining emissions through the Carbon Neutrality Programme	Board of Directors	2040
Scope 1 and 2: 4.5 tCO ₂ e (50% below the 2022 baseline)	Renewable electricity; electric fleet; work-from-home scheme	Director of Operations	2027
Scope 3: 57 tCO ₂ e (28% below the 2022 baseline)	Recycled materials; direct shipping and carton loading; UPN deliveries; virtual meetings	Product Manager	2027
Total emissions: 47.3 tCO ₂ e (46% below the 2022 baseline)	Recycled and bio-sourced materials across the range; renewable energy at manufacturing sites; UK rail	Director of Operations	2030
Renewable electricity: 100% at the UK distribution centre	Check the tariff at every contract renewal	Director of Operations	Ongoing
UK company fleet: 100% electric	Electric vehicles only when replacing or adding vehicles	Director of Operations	Ongoing
Operational waste: at least 90% recycled or recovered at the UK distribution centre	Separation at source; monthly waste data; review of waste contractor services	Distribution centre manager	2027
Product carbon footprint: cradle-to-customer footprint of the blood collection range	Extend the Carbon Study to the blood collection range	Product Manager	2027
Recycled materials: recycled polypropylene and recycled paper for theatre wear; recycled or bio-sourced plastics in non-critical blood collection components where validated	Feasibility study for our blood collection sets (2027); supplier development; product validation under our QMS	Product Manager	2030
Blood collection packaging: lighter paper and film, recyclable mono-material film, right-sized cartons, recycled content and more units per case; all cartons fully recyclable	Packaging review in product design; supplier development	Product Manager	2030
Training: 100% of staff complete the induction and annual refresher	Training programme in section 8; training records	Director of Operations	Every year
Supply chain: 100% of new tier 1 suppliers assessed at onboarding; key suppliers reassessed every year	Sustainable Procurement Plan procedure; annual site visits	Director of Overseas Operations	Every year

Objective and target	Main actions	Owner	By
Certification: ISO 14001:2015 by a UKAS-accredited body	Roadmap in section 12	Director of Operations	Oct 2029

The resources needed for each objective are agreed at the annual management review and included in the company budget. Progress is measured through the key performance indicators in section 9.1, reviewed at the annual management review and reported every year in our Carbon Reduction Plan.

1.5. Scope

This plan covers all activities that ISOL8 controls or can influence:

- **Head office:** Unit 4 Joyce House, Barrack Square, Ballincollig, Co. Cork, P31 HW35, Ireland (office activities).
- **UK distribution centre:** 1 Prospect Road, Foundry Park, Crook, County Durham, DL15 8JL, United Kingdom (receipt, storage and dispatch of goods, and our UK company vehicles).
- **Product design, sourcing and packaging** of our single-use medical devices and theatre wear.
- **Supply chain:** the overseas manufacturing sites in the Far East that produce our products, raw material and packaging suppliers, international freight and UK logistics partners.
- **Products at end of life:** information for customers on disposal and recycling.

It covers Scope 1, 2 and 3 greenhouse gas emissions as defined by the GHG Protocol. Scope 1 is direct emissions from sources we own or control. Scope 2 is indirect emissions from the electricity we buy, including electricity for our electric vehicles. Scope 3 is all other indirect emissions in our value chain, such as purchased goods, transport and distribution, business travel, employee commuting, waste, and the end-of-life treatment of the products we sell.

1.6. Interested Parties

Interested party	Relevant needs and expectations
NHS and other healthcare customers (including NHS Scotland, NHS Supply Chain and the HSE)	Carbon Reduction Plan and progress to Net Zero; NHS Net Zero Supplier Roadmap; climate change plans in tenders; low-carbon, low-waste products and packaging; disposal information
Employees	A safe, clean workplace; clear procedures and training; a responsible employer
Suppliers and logistics partners	Clear environmental requirements, support to improve, fair treatment
Regulators (Environment Agency, local authorities, EPA Ireland)	Compliance with waste, packaging and pollution-prevention law; prompt reporting of incidents

Interested party	Relevant needs and expectations
Local communities and the public	No pollution, litter or nuisance from our sites and partners

Of these needs and expectations, we have adopted the following as compliance obligations (section 4): the environmental laws that apply to us, the Carbon Reduction Plan reporting standard, the NHS Net Zero Supplier Roadmap, and the environmental terms of our NHS contracts and frameworks.

2. Context, Risks and Opportunities

We have identified the external and internal issues that affect our ability to achieve the intended outcomes of this environmental management system:

- **External issues:** climate change and extreme weather; the NHS Net Zero targets and supplier requirements; tightening packaging, waste and climate legislation; global freight and energy markets; the availability of recycled and bio-sourced materials; hospitals' limited recycling of clinical products.
- **Internal issues:** a small team with limited resources; reliance on overseas manufacturing sites and long supply routes; a single UK distribution centre; an established EN ISO 13485 QMS on which this system builds.

From these issues, our environmental aspects (section 3) and our compliance obligations (section 4), we determine the risks and opportunities below and the actions to address them. They are reviewed at the annual management review and whenever there is a significant change (section 5.8). The effectiveness of the actions is checked through the KPIs in section 9.1.

Area	Risks	Opportunities and actions	Owner
Transport emissions	Dependence on fossil-fuelled sea and road freight; emissions to air	Direct shipping routes; mega-containers on ultra-large container vessels; carton loading; UPN carbon-neutral pallet network; electric UK fleet; rail for UK container moves	Director of Operations
Raw materials	Virgin polypropylene and plastics carry a high carbon footprint	Recycled polypropylene and paper; bio-sourced or recycled polymers for non-critical components, starting with a feasibility study for our blood collection sets; spunlace fabric made mainly from wood pulp	Product Manager
Packaging and product waste	Single-use products and packaging going to landfill or incineration at hospitals	Fully recyclable cartons; packaging review of the blood collection range; more units per case; disposal and recycling information for customers	Product Manager
Energy use	Energy use grows with the business	Renewable electricity; skylights and efficient lighting; solar power at manufacturing sites	Director of Operations
Regulatory change	New climate, packaging and waste rules add cost and complexity	Legal register kept up to date (section 4); early compliance is a market advantage	Director of Operations
Physical climate risks	Flooding, extreme weather and port disruption affect the supply chain	Business continuity plan; alternative routes and suppliers; local sourcing	Director of Operations
Supplier practices	Releases to water and land, noise or poor waste control at supplier sites	Onboarding assessment, code of conduct, annual visits and corrective action (section 5.6)	Director of Overseas Operations

Area	Risks	Opportunities and actions	Owner
Customer expectations	Losing tenders without credible environmental evidence	Carbon Study, Carbon Reduction Plan, per-product footprints, carbon offset programme and ISO 14001 certification	Product Manager

3. Environmental Aspects and Impacts

An environmental aspect is any part of our activities, products or services that interacts with the environment; the change it causes is the impact. We identify aspects across the whole life cycle, from raw materials to the end of a product's life, under normal (N), abnormal (A) and emergency (E) conditions, and when new or changed activities, products or services are planned (section 5.8).

Significance criteria. Each aspect is scored for severity (1 = minor and local, 2 = moderate, 3 = major or widespread) and likelihood (1 = unlikely, 2 = possible, 3 = certain or continuous). An aspect is **Significant** if severity × likelihood is 6 or more, or if there is a real risk of breaching a compliance obligation; **Manageable** if the score is 3 to 5; and **Low** if it is 1 or 2. Significant aspects have objectives (section 1.4) or operational controls (section 5). The register is reviewed every year and whenever activities change.

Aspect	Source (condition)	Impact	Score	Rating	Control
Emissions to air (greenhouse gases)	International freight, UK distribution, manufacturing energy, business travel, commuting (N)	Climate change, air quality	3 × 3 = 9	Significant	Sections 1.4, 5.1, 5.4
Use of raw materials	Polypropylene fabric, plastics, paper packaging (N)	Resource depletion, embodied carbon	3 × 3 = 9	Significant	Section 5.3; Sustainable Procurement Plan
Product end of life	Single-use products and packaging disposed of by hospitals (N)	Landfill and incineration emissions	3 × 3 = 9	Significant	Section 5.3
Sterilisation of sterile products	Sterilisation at manufacturing or contract sterilisation sites (N)	Energy use; air emissions of sterilant gas where gas sterilisation is used	3 × 2 = 6	Significant	Section 5.6
Waste from our sites	Packaging received at the distribution centre, office waste, damaged or returned stock (N)	Landfill, loss of resources	1 × 3 = 3	Manageable	Section 5.2
Energy use	Lighting, IT, warehouse equipment, vehicle charging (N)	Indirect emissions	1 × 3 = 3	Manageable	Section 5.1

Aspect	Source (condition)	Impact	Score	Rating	Control
Releases to water	Manufacturing processes at overseas sites (N, A)	Water pollution	3 × 1 = 3	Manageable	Section 5.6
Noise and vibration	Overseas manufacturing; UK logistics (N)	Nuisance to workers and neighbours	2 × 2 = 4	Manageable	Section 5.6
Fire	Fire at the distribution centre or office (E)	Toxic smoke; contaminated fire-fighting water	3 × 1 = 3	Manageable	Section 6
Releases to land	Spills, damaged stock, waste escape (A, E)	Soil and water contamination	2 × 1 = 2	Low	Sections 5.2, 6
Refrigerant gases	Leaks from air conditioning and fridges at our offices (A)	Climate change (fluorinated gases)	2 × 1 = 2	Low	Section 5.1
Water use	Welfare facilities; manufacturing sites (N)	Resource depletion	1 × 2 = 2	Low	Section 5.5

4. Compliance Obligations

We keep a legal register in our QMS that lists the environmental laws and other requirements that apply to us, how they apply to our activities, and how we comply with them. The Director of Operations owns the register and reviews it at least once a year and whenever the law changes. Updates come from GOV.UK, the Environment Agency, NetRegs, the EPA in Ireland, trade bodies and our customers' requirements. The main requirements are:

Requirement	Applies to	How we comply
Environmental Protection Act 1990 (waste duty of care) and Waste (England and Wales) Regulations 2011	Waste from the UK distribution centre	Licensed waste carriers only; waste transfer notes kept for at least two years; waste hierarchy applied
Hazardous Waste (England and Wales) Regulations 2005; Waste Electrical and Electronic Equipment (WEEE) Regulations 2013	Batteries, electrical equipment, spill clean-up material	Stored separately and collected by licensed contractors; consignment notes kept for at least three years
Workplace recycling requirements in England (Environment Act 2021, 'Simpler Recycling')	UK distribution centre	Recyclable waste kept separate from general waste (section 5.2)
Packaging producer responsibility (UK packaging extended producer responsibility regulations; EU (Packaging) Regulations 2014 in Ireland)	Packaging placed on the UK and Irish markets	Each year we check whether we are an obligated producer (in the UK: over £1 million turnover and over 25 tonnes of packaging placed on the market). Where we are, packaging data is recorded and reported and the required fees are paid. Recyclable packaging design

Requirement	Applies to	How we comply
Fluorinated greenhouse gas (F-gas) regulations	Air conditioning and fridges	Equipment serviced and leak-checked by certified engineers as required
Waste Management Act 1996 (Ireland)	Head office	Licensed waste collectors; recycling
Carbon Reduction Plan reporting standard (PPN 06/21 and successor guidance), GHG Protocol and UK Government conversion factors	Company-wide	Carbon Reduction Plan updated every year, signed off by the Board and published on our website
Customer requirements: NHS Net Zero Supplier Roadmap, NHS Scotland and Scottish Government climate change plan requirements, framework and contract conditions	NHS contracts	Carbon Reduction Plan, climate change plans, this EMP and the Sustainable Procurement Plan

Compliance with every requirement in the register is evaluated each year as part of the internal audit (section 9.3). A breach of a legal requirement is treated as a critical non-conformity (section 10).

5. Operational Controls

The arrangements below put this policy into practice. Staff are told about them at induction and in the annual refresher (section 8), and they are kept with this plan on the shared drive and on the notice board at the UK distribution centre.

5.1. Energy Management

- Electricity at the UK distribution centre is 100% generated by renewables; this is checked at every contract renewal.
- Extensive roof skylights at the distribution centre maximise daylight and have cut electricity for lighting by 80%.
- Lights and equipment are switched off when not in use; energy-efficient lighting, timers or sensors are used where fitted; unused areas are not heated and outer doors are kept closed in winter.
- Our UK company vehicle fleet is 100% electric. When charged at the distribution centre the vehicles use our renewable electricity supply.
- Electricity use (kWh) is recorded every month from meter readings or bills and reported as a KPI (section 9.1). Unusual increases are investigated.
- Energy efficiency is part of every equipment purchase (whole life costing in the Sustainable Procurement Plan), and inefficient equipment is replaced at the end of its life.
- Air conditioning and fridges are used only when needed, and are serviced and leak-checked by certified engineers. Any refrigerant leak is repaired promptly and recorded as an incident (section 7).
- At the overseas manufacturing site, solar panels meet more than 50% of the energy needs of FLUIDSAFE surgical mask production. We work with our manufacturing sites on insulation, LED lighting and solar power.
- Over 90% of our device production is fully automated, with automated warehousing (robotic forklifts and automated storage), which optimises energy and resource use. By 2030 we will work with our manufacturing plant on energy efficiency and renewable energy, such as solar power, for the automated blood collection production lines.

5.2. Waste Management

We apply the waste hierarchy: first reduce, then reuse, recycle and recover, with disposal only as a last resort.

- Waste is separated at source at the distribution centre into cardboard, plastic film and shrink wrap, pallets, other dry recyclables and general waste, using clearly labelled bins and cages.
- Pallets are reused or returned to logistics partners. Cardboard and film are collected for recycling.

- Only registered waste carriers and permitted sites are used. Registrations are checked before first use and every year, and waste transfer notes are kept for at least two years.
- Hazardous waste and WEEE (batteries, electrical equipment, used spill absorbents) are stored separately and collected by licensed contractors. Redundant electronic equipment is reused or remarketed where possible.
- Damaged, returned or expired stock is quarantined under our QMS and disposed of through a licensed route with destruction records, recycling materials where possible.
- Waste quantities are recorded every month from carrier reports and the recycling rate is reported as a KPI (section 9.1).
- Lidded containers, secure cages and regular housekeeping checks prevent waste escaping.
- In the office we work paperless where possible, recycle and avoid single-use items.

5.3. Sustainable Materials, Packaging and Product Design

- All outer distribution boxes and inner product cartons are made from fully recyclable cardboard.
- Safety blood collection sets are packed in medical-grade paper, which is fully recyclable, and a polymer film that can be recycled where hospitals have soft-plastic recycling.
- We have increased the number of units per case across most product lines, which reduces cardboard per procedure and the number of transport movements.
- Our comfort range of theatre headwear uses a 100% biodegradable and 100% renewable material, cutting CO2e by 45% over the product's life cycle.
- We plan to move theatre wear to recycled polypropylene and recycled paper, which cut the carbon impact of these materials by 80% and 38% respectively.
- Our product development teams are researching bio-sourced or recycled polymers to replace virgin plastics in non-critical components, without compromising safety or clinical performance.
- For our blood collection range, we will complete a feasibility study into recycled or bio-sourced plastics for non-critical components (for example the tube holder) and packaging by 2027, and a packaging review by 2030: lighter paper and film, recyclable mono-material film, right-sized cartons, recycled content in cardboard and more units per case.
- We are developing products made from spunlace fabric, which is made mainly from wood pulp and is largely biodegradable.
- Customers receive information on the recyclability of our packaging and the disposal of our products at end of life.
- Our Carbon Study calculates cradle-to-customer emissions per product, and we are extending it to our blood collection range by 2027. Through our Carbon Neutrality Programme, a share of the profit on each product is invested in reforestation, carbon avoidance projects and carbon credits.
- All purchasing follows our Sustainable Procurement Plan & Procedure (ISOL8_SPP).

5.4. Transport and Logistics

- International freight uses direct shipping routes only, and mega-containers on ultra-large container vessels, which have much lower emissions per unit than smaller vessels.
- Containers are loaded by the carton rather than per pallet, fitting 25% more products in each container.
- Raw materials and fabric are sourced within 150 miles of the manufacturing sites.
- Palletised deliveries to NHS customers go exclusively through the United Pallet Network (UPN), a certified carbon-neutral delivery platform with optimised routes.
- Our UK company vehicle fleet is 100% electric, with zero tailpipe emissions for local deliveries.
- We are investigating rail for container movements within the UK.
- Virtual meetings and virtual training platforms replace travel wherever possible; this has cut emissions from air travel by 24% since June 2022.
- Car sharing is encouraged, and a work-from-home scheme is planned to cut commuting miles by 40%.

5.5. Water Use

- At our own sites water is used only for welfare facilities. Leaks are reported and fixed promptly, and fittings are replaced with water-efficient ones when they wear out.
- Water use and wastewater control at manufacturing sites are covered in supplier assessments (section 5.6).

5.6. Supply Chain Environmental Controls

Suppliers are selected and managed under our Sustainable Procurement Plan & Procedure (ISOL8_SPP). In summary:

- All tier 1 suppliers go through onboarding, which includes an evaluation of their environmental performance and risks. They receive our supplier environmental code of conduct, and help to improve where they fall short.
- Performance is monitored through supplier audits within our QMS, annual visits to overseas manufacturing sites by the Director of Overseas Operations, and visits to UK partners by the Director of Operations.
- Our logistics framework prioritises partners who can show active carbon reduction, energy-efficient routing and transparent environmental reporting.
- For sterile products, supplier assessments confirm the sterilisation method used and that its energy use and any emissions are controlled in line with local permits and regulations.
- Our environmental requirements are included in invitations to suppliers, and a copy of the Sustainable Procurement Plan goes to all key suppliers.
- Environmental breaches by suppliers are handled through the non-conformity procedure (section 10), which can lead to suspension or the end of the relationship.

5.7. Communication

- **Internal:** this plan is explained at induction and in the annual refresher, kept on the shared drive and the distribution centre notice board, and environmental performance is discussed at team meetings.
- **External:** our Carbon Reduction Plan, Carbon Study and sustainability information are published at isol8health.com/sustainability. This plan is available to customers and other stakeholders on request.
- **Enquiries and complaints** from customers, neighbours or regulators are handled under section 7.
- **Compliance-related communication**, such as incident reports to regulators and packaging data, is made by the Director of Operations, who makes sure the information is accurate and consistent with this system.

5.8. Planned Changes, Product Design and Contractors

- **Planned changes.** Before a new or changed site, product, process, main supplier or logistics route is introduced, the Director of Operations assesses its environmental aspects and compliance obligations and updates the registers and controls in this plan. Unintended changes are reviewed, and action is taken to limit any adverse effects.
- **Product design.** Under our QMS design and development procedure, environmental requirements are considered at design input and design review: materials, packaging and recyclability, transport efficiency, and disposal information for customers.
- **Contractors.** Contractors working at our sites (for example cleaning, maintenance and waste collection) are told our environmental rules, including waste separation and incident reporting, before they start work, and their work is checked.

6. Environmental Emergency Preparedness and Response

6.1. Potential Environmental Emergencies

Scenario	Possible impact	Prevention
Spill of liquids at the distribution centre (cleaning chemicals, liquid products, equipment fluids)	Contamination of drains, soil or watercourses	Liquids kept in small quantities in a designated area; spill kit on site; drains identified
Fire at the distribution centre or office	Smoke and toxic fumes from burning plastics; contaminated fire-fighting water	Fire risk assessment, detection and alarms; good housekeeping; waste removed regularly
Damaged stock or packaging	Litter and waste escape	Inspection on receipt; quarantine of damaged goods
Flooding or severe weather	Stock and waste washed into the environment; supply disruption	Stock and waste stored securely and off the floor; business continuity plan
Incident at a manufacturing site or logistics partner	Pollution in the supply chain	Supplier controls (section 5.6) and business continuity plan

6.2. Response Procedure

If an environmental incident happens, staff follow these steps:

- **Make safe.** Protect people first and raise the alarm. Call 999 (112 in Ireland) for a fire, an injury or a spill that cannot be controlled.
- **Stop the source** if it is safe to do so, for example by righting a container.
- **Contain.** Use the spill kit to cover drains and absorb the spill, keeping liquids away from surface water drains.
- **Clean up.** Bag and label used absorbents and dispose of them as hazardous waste through a licensed carrier.
- **Report.** Tell the distribution centre manager and the Director of Operations straight away. If pollution has reached, or may reach, a drain, watercourse or land, the Director of Operations reports it to the Environment Agency incident hotline (0800 80 70 60, 24 hours) or, in Ireland, the local authority or EPA.
- **Record and investigate.** Log the incident (section 7) and find the root cause and corrective action (section 10).

In a fire, staff evacuate and call the fire service, telling them what materials are stored (plastics, cardboard) and where the drains are. Where it is safe, fire-fighting water is kept out of drains.

6.3. Preparedness and Testing

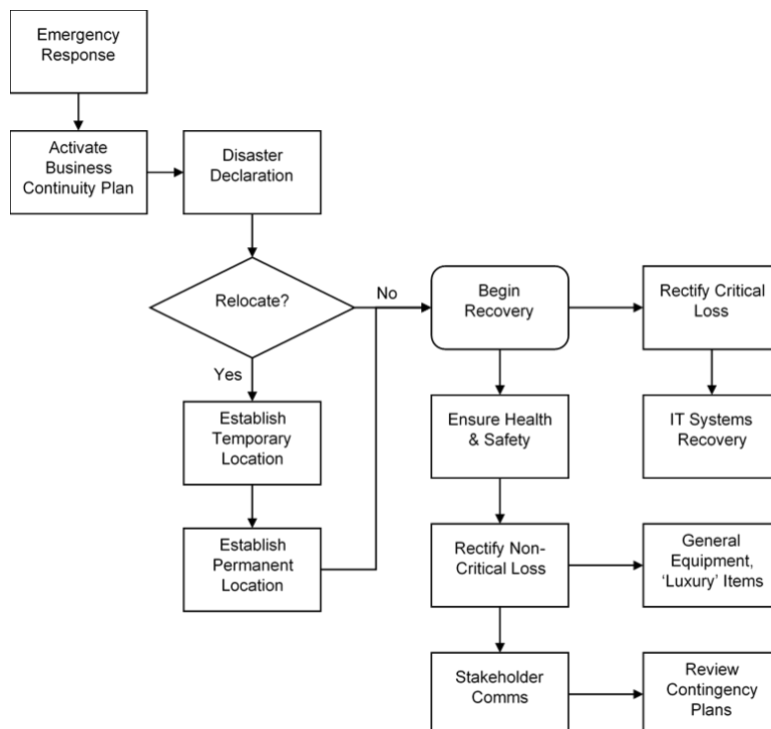
- A spill kit is kept at the distribution centre. It is checked every month and restocked after use.

- Staff are trained in this procedure at induction and in the annual refresher (section 8).
- Evacuation drills take place at least once a year, and a spill exercise is held every year.
- The scenarios and procedure are reviewed after every incident or drill, and at least once a year.

6.4. Business Continuity

We operate a procedure compliant with the Management of Health and Safety at Work Regulations 1999. Our Business Continuity Plan sets out the full procedure. Below is a summary of our emergency response procedure.

Preparedness includes disaster response planning; alternative distribution routes and local suppliers; a choice of logistics routes (sea, rail, road and air freight); alternative critical suppliers; short-term storage space that can be rented; relationships with several logistics companies; cloud-based software; and experience of working remotely.



7. Environmental Incidents, Complaints and Records

All environmental incidents, near misses and complaints, whether from staff, customers, neighbours or regulators, are reported to the Director of Operations on the same day. They are recorded in the Environmental Incident and Complaints Log with the date, location, description, cause, action taken, person responsible and date closed. Complaints are acknowledged promptly and answered in writing. Incidents and complaints are investigated through the non-conformity procedure (section 10), and trends are reviewed at the management review.

The following records are kept:

Record	Kept by	Retention
Environmental Incident and Complaints Log	Director of Operations	At least 6 years
Waste transfer notes	Distribution centre manager	At least 2 years (legal minimum)
Hazardous waste consignment notes	Distribution centre manager	At least 3 years (legal minimum)
Energy, waste and other KPI data	Director of Operations	At least 6 years
Training records	Director of Operations	At least 6 years
Legal register and compliance evaluations	Director of Operations	Current and previous versions
Internal audit and management review records	Director of Operations	At least 6 years
Supplier environmental assessments and visit reports	Director of Overseas Operations	At least 6 years
Non-Conformity Forms (QP11A) and CAPA log	Per QMS	Per QMS record retention

8. Training and Awareness

Everyone working for or on behalf of ISOL8 must understand this policy, the significant environmental aspects of their work and what they must do to prevent pollution. The training programme is:

Who	Training	When
All new staff	Environmental induction: this policy and our objectives, the significant aspects of their work, waste separation, saving energy, reporting incidents and complaints, the emergency procedure, and the consequences of not following these procedures	On joining, before starting work at the distribution centre
All staff	Environmental refresher: performance against our KPIs, changes in the law, good practice and lessons from incidents	Every year
Distribution centre staff	Spill kit use, waste separation and duty of care, safe storage, evacuation	At induction and every year, including a spill exercise
Purchasing staff	Sustainable procurement and supplier assessment (Sustainable Procurement Plan section 2.7)	One-day course, then a refresher every year
Directors and managers	Environmental and sustainable procurement awareness; legal updates; ISO 14001 and internal auditor training for staff who audit	Every year, and before the ISO 14001 audits

Training records are kept for every employee. The Director of Operations checks completion every year (target 100%), and the effectiveness of training is checked through KPIs, audits and incident trends.

9. Monitoring, Measurement, Audit and Review

9.1. Key Performance Indicators

KPI	Measure	Frequency	Target
Greenhouse gas emissions	tCO ₂ e, Scope 1, 2 and 3 (Carbon Reduction Plan method)	Every year	2027: Scope 1 and 2 4.5 t, Scope 3 57 t 2030: 47.3 t total 2040: Net Zero
Electricity at the distribution centre	kWh; % renewable	Monthly	100% renewable; lower kWh year on year
UK company fleet	% electric vehicles	Every year	100%
Operational waste	Tonnes by type; % recycled or recovered	Monthly	At least 90% by 2027
Business travel	Flights and distance travelled	Quarterly	Lower year on year
Incidents and complaints	Number; time to close	Monthly	No significant incidents
Training	% of staff completing induction and refresher	Every year	100%
Supply chain	% of new tier 1 suppliers assessed; % of key suppliers reassessed	Every year	100%
Legal compliance	Breaches found	Every year	None

9.2. Monitoring and Data

Each KPI has an owner (section 11) who collects the data and keeps the records in section 7. Our carbon footprint is calculated every year for the Carbon Reduction Plan using the GHG Protocol and the UK Government conversion factors, and we are extending our product carbon footprint assessments across our core device ranges, starting with our blood collection range in 2027.

9.3. Internal Audit

The environmental management system is audited every year as part of our QMS internal audit programme. The audit includes the evaluation of compliance with the legal register (section 4). Auditors do not audit their own work. Findings are raised as non-conformities or opportunities for improvement under section 10.

9.4. Management Review

Senior management, chaired by the Director of Operations, reviews the environmental management system every year. The review covers:

- the status of actions from previous management reviews;

- changes in external and internal issues, stakeholder needs, compliance obligations, significant aspects, and risks and opportunities;
- progress against objectives, targets and KPIs;
- the results of compliance evaluation and internal audit;
- incidents, complaints, non-conformities and corrective actions;
- supplier environmental performance;
- feedback from staff, customers, suppliers and other stakeholders;
- whether resources are adequate, and progress on the ISO 14001 roadmap (section 12);
- opportunities for continual improvement.

The review concludes whether the system remains suitable, adequate and effective. Its outputs include decisions on improvement opportunities, changes to the system and resources, actions where objectives have not been met, opportunities to integrate the system with other business processes, and any implications for the company's strategic direction. The minutes are kept and the actions followed up, and the Board receives the conclusions.

9.5. Reporting

Our environmental performance is reported every year through our Carbon Reduction Plan and to NHS and other healthcare customers on request. We welcome input from the Board, managers, employees, our supply chain, customers and the public, who can contact us through our website.

10. Non-Conformities and Corrective Action

A non-conformity is any failure to meet this plan, a legal requirement, an objective or a supplier requirement. Non-conformities are identified through incidents, complaints, monitoring, audits and supplier visits, and are handled through the QMS procedure:

- The first response is always to limit the impact. If the issue can be resolved immediately, it is.
- The non-conformity is recorded on the Non-Conformity Form (QP11A) and in the CAPA log.
- It is classified as Critical (immediate action), Major (action within 30 days), Minor (within 60 days) or an Opportunity for Improvement (within 90 days). Breaches of the law are always Critical and are dealt with by the directors as a matter of urgency.
- The root cause is investigated and corrective and preventive actions are agreed with the Director of Operations.
- We check whether similar non-conformities exist or could occur elsewhere, and act on them.
- An effectiveness check confirms the actions worked before the CAPA is closed. Where needed, this plan, the aspects register or the legal register are updated.
- Supplier non-conformities are investigated by the Director of Overseas Operations. The supplier may be suspended during the investigation, and we stop working with suppliers found in breach of our policy (Sustainable Procurement Plan section 3).
- Non-conformities caused by staff error lead to investigation, retraining and a review of our processes.

11. Roles and Responsibilities

Role	Responsibilities
Board of Directors (top management)	Accountable for the effectiveness of the environmental management system; approves the environmental policy, objectives, Carbon Reduction Plan and Net Zero targets and makes sure they fit the company's strategic direction; provides resources; receives the conclusions of the management review
Director of Operations	Owns this plan and signs the policy on behalf of the Board; chairs the management review; keeps the legal register; assesses planned changes; reports incidents to regulators; leads the ISO 14001 project; reports environmental performance to the Board
Director of Overseas Operations	Environmental assessment of overseas suppliers and annual site visits; investigates supplier non-conformities
Product Manager	Carbon Study and product carbon footprints; Carbon Reduction Plan data; sustainable product and packaging development
Distribution centre manager	Day-to-day controls at the distribution centre: waste separation and carrier checks, spill kit, energy saving, monthly data, contractor briefings, first response to incidents
Purchasing / Sustainable Procurement Manager	Applies the Sustainable Procurement Plan; supplier and logistics partner assessment
All employees	Follow this plan; complete training; report incidents, near misses and ideas
Suppliers and logistics partners	Meet our environmental requirements and code of conduct; provide data; report incidents

12. ISO 14001 Certification Roadmap

ISOL8 does not yet hold ISO 14001 certification. As a small company, our certification work to date has focused on our EN ISO 13485 medical device quality management system. This plan is aligned with ISO 14001:2015 and integrated with that QMS, and we are working towards certification:

Milestone	Target
EMP Ver 002 issued, aligned to ISO 14001:2015	July 2026
Formal gap analysis against ISO 14001:2015	2027
Close the gaps found; internal auditor training; first full cycle of internal audit and management review against ISO 14001	2027 to 2028
Appoint a UKAS-accredited certification body; Stage 1 audit	First half of 2029
Stage 2 certification audit and ISO 14001 certificate	By October 2029

Progress is reviewed at every management review.

13. Policy Development and Review

- This plan is reviewed at least once a year, after the annual management review.
- It is also updated after new legislation or Government initiatives, significant incidents or non-conformities, and changes to our sites, products or main suppliers.
- It is a controlled document under our QMS, and every change is recorded in the revision history.

14. Signature

For any queries about this plan, please contact:

Fergal Whitehead, Director of Operations

Office address: Unit 4 Joyce House, Barrack Square, Ballincollig, Co. Cork, P31 HW35, Ireland

Signed:



Fergal Whitehead

Position:

Director of Operations, on behalf of the Board of Directors

Date:

08/07/2026

Review Date:

08/07/2027

Appendix A: ISO 14001:2015 Cross-Reference

ISO 14001:2015 clause	Where it is addressed in this plan
4.1 Context of the organisation	Section 2
4.2 Needs and expectations of interested parties	Sections 1.6 and 4
4.3 Scope of the environmental management system	Section 1.5
4.4 Environmental management system	This plan, integrated with our EN ISO 13485 QMS
5.1 Leadership and commitment	Sections 1.2 and 11
5.2 Environmental policy	Section 1.2
5.3 Roles, responsibilities and authorities	Section 11
6.1.1 Risks and opportunities	Section 2
6.1.2 Environmental aspects	Section 3
6.1.3 Compliance obligations	Section 4
6.1.4 Planning action	Sections 1.4, 2 and 5
6.2 Environmental objectives and planning	Sections 1.4 and 9.1
7.1 Resources	Sections 1.4, 9.4 and 11
7.2 Competence and 7.3 Awareness	Section 8
7.4 Communication	Sections 5.7 and 9.5
7.5 Documented information	Sections 7 and 13
8.1 Operational planning and control (including life-cycle perspective and change)	Section 5, including 5.8
8.2 Emergency preparedness and response	Section 6
9.1 Monitoring, measurement and evaluation of compliance	Sections 4, 9.1 and 9.2
9.2 Internal audit	Section 9.3
9.3 Management review	Section 9.4
10.2 Nonconformity and corrective action	Section 10
10.3 Continual improvement	Sections 1.2, 9.4 and 13