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Implementation Programme

"Developing Safer, Innovative, and Sustainable Healthcare Supply Chains"

Healthcare Industry Sector Programme

Draft Terms of Reference and its Annexes

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Executive Summary:

Healthcare Industry Sector Programme
Developing Safer, Innovative, and Sustainable Healthcare Supply Chains

The Healthcare Industry Sector Programme (HSP) supports implementation of the Global Framework on Chemicals (GFC), particularly Strategic Objective D and Target D6, works by aligning the policies, procurement practices, standards, market incentives, innovation, and partnerships that influence healthcare supply chains, making safer and more sustainable products easier to develop, purchase, and use worldwide.

Why Healthcare?
Healthcare exists to protect health, yet its products and supply chains contribute to chemical exposures, pollution, waste and environmental impacts. Representing approximately 10% of the global economy and 5% of global greenhouse gas emissions, the sector has significant purchasing power and market influence to drive safer products, sustainable innovation and scalable solutions that protect people and the environment. Healthcare therefore has a unique opportunity to reduce harmful exposures, promote safer alternatives, and demonstrate practical solutions that can be replicated across sectors.

Global Framework on Chemicals

Terms of Reference for the Healthcare Industry Sector Programme

Finalized September 2026

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1. Executive Summary

These Terms of Reference (TOR) outline the proposed voluntary, multi-stakeholder Healthcare Industry Sector Programme (HSP) under the Global Framework on Chemicals for a planet free of harm from chemicals and waste (GFC). The Programme is aligned with Strategic Objective D and Target D6[1], as well as other relevant GFC targets, including A1, B2, B3, B5, D7 and E6.

The Programme aims to catalyse coordinated, measurable action across healthcare value chains[2] to reduce harm from chemicals and waste, prioritize chemicals of concern, promote safer alternatives, strengthen transparency and accountability, and protect workers, patients, communities and the environment. It will do so by supporting multiple implementation pathways, including sustainable procurement, product innovation and redesign, transparency and traceability, policy and regulatory alignment, capacity building, knowledge sharing, and other collaborative actions appropriate to different actors across healthcare value chains.

The Programme contributes to the overall GFC implementation architecture by advancing relevant GFC targets and applying relevant thematic priorities across healthcare value chains. It will build upon existing good practices, tools, and implementation approaches already established within the healthcare sector while drawing upon guidance and best practices developed through relevant GFC thematic workstreams. The Programme is intended to complement—not duplicate—existing healthcare-sector initiatives or broader GFC thematic efforts, and to contribute healthcare-sector experience and implementation lessons back to the GFC.

This TOR defines the Programme's rationale, objectives, scope, governance, and implementation approach and will inform the GFC's First International Conference (GFC IC-1) to be held in November 2026.

The Healthcare Industry Sector Programme seeks to strengthen collaboration to align policies, procurement practices, standards, market incentives, innovation, and partnerships that influence healthcare supply chains, sending consistent market signals and making safer and more sustainable products easier to develop, purchase and use worldwide.

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[1] Target D6: By 2030, sustainable chemical and waste management strategies have been developed and implemented for major economic and industry sectors that identify priority chemicals of concern and standards and measures, such as the chemical footprint approach, to reduce their impact and, where feasible, their input along the value chain.

[2] Please see the Target Sector Scope section of the TOR for more details on the scope of the Programme.

2. Programme Development

This TOR has been informed by the key documents and consultation processes listed below. Full references are provided in Annex 1.

- This TOR was developed as part of the consultative process led by World Health Organization (WHO), Health Care Without Harm (HCWH)/Projeto Hospitais Saudáveis (PHS), Inter-Organization Programme for the Sound Management of Chemicals (IOMC) and GFC stakeholders.
- It builds on the October 2024 Expert Consultation in Geneva, convened by WHO and UNITAID, and the December 2024 IOMC discussion document, the February 2025 revised document, stakeholder consultations, including the June 2025 OEWG health-sector workshop, two online global stakeholder consultations convened by WHO, PHS and HCWH in June 2026, and the subsequent public survey conducted in June–July 2026.

This TOR provides the strategic framework to support consideration of the Healthcare Industry Sector Programme at the First International Conference on the Global Framework on Chemicals (GFC IC-1) in November 2026. In parallel, a draft Programme workplan will be developed to guide early implementation and support discussion of implementation priorities at IC-1. Following the launch of the Programme, the workplan will serve as a living document that evolves through stakeholder engagement, implementation experience and periodic review.

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3. Programme rationale

The healthcare sector plays a critical role in protecting and promoting human health but is also a significant contributor to environmental and chemical risks across global value chains. It is responsible for approximately 4.6% of global greenhouse gas emissions, with more than 70% arising from supply chains, and generates significant volumes of waste, including plastics. While the total volume of plastic used by the healthcare sector is not known, plastic is estimated to comprise 30% of all healthcare wastes. Healthcare generates an estimated 1.7 million tonnes of plastic waste in the United States and 133,000 tonnes in the United Kingdom alone. Given the sector's economic scale and purchasing power, healthcare procurement can exert significant influence over product design, manufacturing and supply-chain practices.

Chemical exposures occur throughout the lifecycle of healthcare products—from production and transport to use and disposal—affecting patients, workers, communities, and the environment. Some products contain or release asthmagens, carcinogens, reproductive toxicants, endocrine disrupting chemicals or other hazardous materials, exposing patients, staff, and the community to harm that can be readily prevented. Plastics are found in both clinical and non-clinical healthcare settings. Many plastics contain chemical additives and create risks across their life cycles, linking chemicals, waste and climate concerns. These impacts contribute to pollution, climate change and biodiversity loss, while releases of pharmaceuticals and

antimicrobials can also contribute to antimicrobial resistance. Disposal of healthcare waste remains a particular challenge in low- and middle-income countries.

At the same time, the healthcare sector is uniquely positioned to drive solutions to reduce priority chemicals of concern. Through its purchasing power, product innovation, clinical practice, professional leadership, policy engagement, and collaboration across healthcare value chains, the sector can accelerate the transition to safer and more sustainable products, materials, and practices, and reduce unnecessary products while maintaining high standards of patient care.

The Programme is intended to build upon the substantial work already underway within the healthcare sector, including sustainable procurement initiatives, chemicals management programmes, product standards, certification systems, clinical guidance, and other implementation approaches. By strengthening collaboration, sharing experience, and scaling successful practices, the Programme seeks to accelerate progress while avoiding duplication of existing efforts.

The Programme contributes to implementation of the Global Framework on Chemicals, particularly Strategic Objective D and Target D6, while supporting other relevant GFC objectives and targets including A1, B2, B3, B5, D7, and E6. It translates relevant GFC priorities into practical action within healthcare value chains while contributing healthcare sector implementation experience, lessons learned, and practical tools back to the broader GFC community.

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4. Target sector scope

The healthcare sector is a major economic sector under the GFC. The Programme focuses on healthcare value chains, including manufacturers and suppliers of health products; institutional buyers, including United Nations agencies and global humanitarian organizations; national health ministries; and members of public and private health systems. Other relevant actors across healthcare value chains may participate as described under “Stakeholder participation.”

The Healthcare Industry Sector Programme is intended to serve as the healthcare-sector component of the broader GFC implementation architecture, consistent with decisions taken at IC-1. It is designed to complement—not duplicate—existing healthcare-sector initiatives, relevant GFC thematic workstreams and other GFC implementation programmes. Implementation will build on existing healthcare-sector good practices, tools, procurement frameworks, standards, certification systems and chemicals-of-concern resources, while applying relevant GFC guidance and methodologies. In turn, lessons learned through Programme implementation, pilots, case studies and practical tools will contribute to learning and implementation across the broader GFC community.

The Programme focuses specifically on chemicals and waste issues associated with healthcare products, services and value chains. Broader public-health programmes – such as the Global Burden of Disease programme – are addressed through other programmes and are therefore outside its scope.

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5. Overall programme objectives

Consistent with Strategic Objective D, Target D6, other relevant GFC targets, and thematic groups, the Programme is guided by the following overarching objectives and will build on existing good practices in the healthcare industry sector:

- Data and information on chemicals along supply chains are available, accessible, transparent, and comprehensible, to the extent possible
- Harm to health workers, the public, and the environment from hazardous chemicals is first prevented and, where not feasible, minimized using the hierarchy of controls
- Priority chemicals of concern are identified and addressed through reduction, phase-out or substitution with safer, effective and feasible alternatives.
- Compliance with relevant national and international obligations is met, including through actions that may exceed minimum standards.
- Transparent performance improvement and reporting are promoted.
- Policy coherence and regulatory alignment remove barriers and accelerate innovation.
- Prevention efforts prioritize the protection of populations disproportionately affected by hazardous chemical exposures, including women, children, workers and people in vulnerable situations.
- Equitable participation, leadership, and capacity building across regions, including meaningful engagement of low- and middle-income countries throughout Programme governance and implementation is promoted.

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6. Components and activities of a Healthcare Industry Sector Programme

The following components provide an indicative framework for activities to be further elaborated in the Programme workplan.

6.1. Communication and awareness raising

- Raise awareness and conduct outreach to engage relevant healthcare sector stakeholders at global, regional, and national levels.
- Develop and implement educational programmes to raise public awareness, including among younger audiences, and strengthen health workers' right to know about hazardous chemical exposures.
- Engage with the media to enhance public awareness.

6.2. Baseline assessment

- Conduct a baseline assessment and landscape analysis of healthcare value chains.

- Map existing healthcare-sector good practices, tools, standards, procurement approaches, and chemicals-of-concern resources and identify those with potential for scale-up.

6.3. Prioritization of chemicals and products

- Identify, prioritize, and phase out the priority chemicals of concern in supply chains
- Compile a healthcare-sector list of priority chemicals and materials of concern and a global phase-out list, drawing on authoritative sources and stakeholder input. Priorities may include mercury, PFAS, bisphenols, PVC and phthalates, as well as chemicals of concern associated with pharmaceuticals and disinfectants.

6.4. Transparency and traceability

- Chemical content information is disclosed and traceable in the healthcare products and supply chains throughout their life cycles.
- Build on existing healthcare-sector transparency practices while drawing upon guidance from the GFC Transparency, Traceability and Disclosure thematic workstream.
- Use sustainable procurement to communicate information and transparency requirements to suppliers.

6.5. Health worker protection engagement

- Strengthen occupational health, worker protection, worker engagement and training, including workers' right to know about hazardous chemical exposures and meaningful participation by workers and their representatives throughout healthcare value chains.

6.6. Alternative products and processes

- Identify safer substitutes and make that information widely available.
- Develop guidance on reducing unnecessary product use, adopting safer alternatives and applying life-cycle costing approaches.

6.7. Integration of GFC Issues of Concern

- The Programme will incorporate and address relevant GFC issues of concern, including priority chemicals and emerging risks, ensuring alignment between sector-specific actions and global priorities.

6.8. Sustainable procurement, market shaping and transformation

- Promote procurement policies and incentives that prioritize low-carbon, climate-resilient and environmentally sustainable products and supply chains.
- Strengthen institutional capacity and governance to integrate sustainability considerations throughout procurement processes and supply chain management.
- Promote market-shaping approaches aligned with health, climate, and sustainability goals
- Harmonize sustainability requirements in procurement criteria and target product profiles among countries, United Nations agencies and major buyers, and align monitoring and reporting approaches where feasible.

6.9. End of life: waste management and circularity

- Promote waste minimization and circular economy approaches across the product lifecycle.
- Incorporate safe and environmentally sound circular-economy principles—including reuse, remanufacturing and recycling, where clinically appropriate—from product design and procurement through end-of-life management.
- Promote safe, environmentally sustainable and low-carbon management and disposal of healthcare products and waste.
- Promote sustainable supply-chain and extended producer responsibility approaches.

6.10. Guidance and capacity building

- Share knowledge of front-runner actions and identification of gaps and needs including collect and generate relevant case studies including implementation lessons from pilot projects and policies from various geographic regions and perspectives (labor, clinical, procurement, manufacturer) throughout the healthcare sector value chain
- Identify and share leading practices, gaps and implementation needs. Collect and develop case studies that capture lessons from pilot projects and policies across geographic regions and healthcare value-chain perspectives, including labour, clinical care, procurement and manufacturing.
- Encourage South–South and South–North learning and exchange.
- Provide capacity-building and training for sustainable procurement, including by identifying and sharing existing tools and addressing unmet resource needs.

6.11. Policy, standards, and regulation

- Inventory existing healthcare-sector standards, reporting frameworks, certification systems, and regulatory requirements and identify opportunities to strengthen alignment with the GFC.
- Encourage the development of sustainable chemicals and waste management policies and strategies (D6) by industry associations and corporations including eco-labelling and ‘green’ certification schemes for health products.
- Promote harmonization of global standards and regulatory cooperation, including mechanisms to ensure transparency and credibility.
- Support the adoption of enabling regulatory approaches (“green regulatory highways”) that accelerate the uptake of safer and more sustainable health products.

6.12. Indicators and metrics

- Metrics will be developed to measure progress, learn about key success factors, make improvements, and adjust the workplan as needed. Please see Annex 2 for proposed metrics.
- Metrics will align with the GFC measurability framework and indicators, as adapted for the healthcare industry sector, and will be complemented by sector-specific metrics.

6.13. Reporting progress

- Identify and share good practices, implementation experience, and lessons learned from ongoing stakeholder activities to support learning and continuous improvement across the Programme.
- Participating stakeholders will report periodically through agreed templates, with consolidated reporting to the International Conference, as appropriate.

6.14. Health innovation, research and development

- Promote research and development of safer, lower-impact, reusable and circular health products, care models and service-delivery approaches, including green and sustainable chemistry innovations and solutions.
- Accelerate collaborative research and cultivate partnerships between public, private, and academic sectors to drive innovation.

7. Stakeholder participation

Participation in the Programme is open to all relevant stakeholders and sectors. Stakeholders encouraged to participate include:

- Hospitals, health systems and public-health and hospital associations;
- Procurement officers, supply-chain professionals, group purchasing organizations and pooled procurement organizations;
- Health professionals, healthcare administrators, health workers and their representatives;
- Industry associations, manufacturers, suppliers and individual companies;
- Governments, regional intergovernmental organizations and regulatory authorities for medical devices, pharmaceuticals and other health products;
- Organizations responsible for healthcare waste management and other end-of-life activities;
- Certification and standards-setting bodies for health systems and products;
- International organizations, bilateral development and stakeholder groups offering technical or financial support offering technical or financial support;
- Labour unions, civil-society organizations and academic and research institutions; and
- Women, youth, stakeholders from developing regions and other underrepresented groups.

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8. Process for joining the Programm

Stakeholders may join the Programme by submitting an expression of interest form outlining their alignment with relevant GFC objectives and their intended contributions to the Programme. Participation is voluntary, and participants will be encouraged to share progress, implementation experience and lessons learned.

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9. Monitoring

Monitoring and evaluation will align, where appropriate, with the GFC measurability framework and reporting mechanisms and may be complemented by healthcare sector-specific metrics developed through the Programme. Monitoring should support learning and lead to actions that improve the programme. The Programme will include a structured “lessons learned” component to support continuous improvement and inform the International Conference.

The overall success of the Programme will be assessed based on its contribution to progress towards relevant GFC targets, including Target D6, and its effectiveness in mobilizing stakeholders, strengthening value-chain transparency, scaling good practices, advancing safer alternatives and reducing the impacts of chemicals and waste across healthcare value chains.

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10. Governance and implementing arrangements

10.1 Governance structure

The Programme will be guided by a multi-stakeholder Steering Group (or other governance mechanism consistent with the GFC) that seeks balanced representation across geographic regions, stakeholder groups, gender, including meaningful participation and leadership by stakeholders from low- and middle-income countries and underrepresented populations.

The Steering Group will operate through defined procedures, including consensus-based decision-making where possible.

The Programme will establish a feedback mechanism to inform and be informed by GFC issues of concern processes, including identification of emerging risks and priority chemicals.

The Steering Group should include expertise reflecting the breadth of healthcare value chains, including healthcare delivery, procurement, occupational health, infection prevention and control, manufacturing, regulation, waste management, academia, civil society, governments, donors, labour, industry, finance, and international organizations. Membership should recognize the importance of regional diversity, implementation experience, and perspectives from countries with different health-system capacities and resource contexts.

The multi-stakeholder Steering Group could include the following functions:

- Provide guidance on all aspects of Healthcare Industry Sector Programme Implementation
- Report on Programme implementation to the relevant GFC governance body
- Foster engagement, stakeholder commitment and promote partnerships
- Establish procedures to manage conflicts of interest and ensure transparency in decision-making
- Ensure a feedback mechanism between the GFC Issues of Concern (eg. HHP’s, EPPP’s, EDC’s, etc) and the healthcare industry sector program
- Promote synergies and collaboration among sectors, thematic working groups and other implementation programmes
- Establish mechanisms to track progress, identify gaps, implementation bottlenecks, and solutions

- Help identify priorities for funding and potential funding sources

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11. Synergies with other programmes, workstreams and initiatives

The Programme will actively establish synergies with other GFC implementation programmes, relevant GFC thematic workstreams, and related global initiatives. It will promote coherence, avoid duplication, and strengthen collaboration through coordinated planning, information exchange, and shared implementation experience. Three key linkages include:

- **Labour and worker protection:** Integrate occupational safety and health, worker engagement, social dialogue and workers' right to know throughout Programme activities through collaboration with relevant GFC labour initiatives, the International Labour Organization and worker organizations.
- **Climate-resilient and environmentally sustainable healthcare supply chains:** Coordinate work at the intersection of chemicals and climate change with the WHO Chemicals Road Map, the Alliance for Transformative Action on Climate and Health (ATACH) and relevant GFC implementation efforts.
- **Relevant GFC thematic workstreams:** Apply guidance developed through GFC work on transparency, traceability and disclosure, chemicals of concern and chemical-footprint approaches, as these workstreams are established, while contributing healthcare-sector implementation experience and tools.

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12. Annex 1: Foundation for the TOR

12.1 Basis for development of the Terms of Reference

These Terms of Reference have been developed through a consultative process informed by the following reports and stakeholder inputs:

- World Health Organization (WHO) and Unitaid, *Climate-Resilient and Environmentally Sustainable Supply Chains in the Health Sector: Report of an Expert Consultation* (Geneva, October 2024), including recommendations relevant to the development of a Healthcare Industry Sector Implementation Programme.
- Inter-Organization Programme for the Sound Management of Chemicals (IOMC), *Development of a GFC Implementation Programme on Strengthening Economic and Industry Sector Engagement and Action Along Value Chains* (draft Discussion Document, 5 December 2024), subsequently revised and issued as an Information Document for the first meeting of the GFC Open-ended Working Group on 14 February 2025.
- *Development of Global Framework on Chemicals Implementation Programmes to Advance Integrated Chemicals and Waste Management* (UNEP/GFC/OEWG.1/INF/11, 3 June 2025).

- *Report of the Open-ended Working Group of the Global Framework on Chemicals – for a Planet Free of Harm from Chemicals and Waste on the Work of Its First Meeting* (UNEP/GFC/OEWG.1/14).
- Discussions and feedback from the GFC Open-ended Working Group workshop on *Safer Alternatives and Innovative and Sustainable Supply Chains in the Healthcare Sector* (June 2025).
- Two global stakeholder consultations on the draft Terms of Reference for the Healthcare Industry Sector Implementation Programme (June 2026).
- A public consultation on the draft Terms of Reference, which received 44 survey responses and written submissions from governments, international organizations, industry, labour organizations, civil society, and other stakeholders (June–July 2026).

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13. Annex 2: Proposed metrics

Programme metrics are to be determined, taking into account decisions at IC-1, the broader GFC measurability framework and indicators, and relevant existing healthcare-sector metrics. Monitoring indicators should be sector-specific and capture both outcomes and enabling actions

Possible topics for metrics:

- Participation by organizations, countries and regions;
- Policies and legislation;
- Increased capacity for action;
- Sustainable procurement practices;
- Supplier engagement;
- Disclosure of information on chemicals in healthcare products and supply chains;
- Identification and reduction of priority chemicals and materials of concern;
- Design, development and adoption of safer alternatives;
- Occupational health and worker protection;
- Reduction and environmentally sound management of healthcare chemicals and waste; and
- Case studies and good practices shared across regions and income levels.

In developing metrics, it will be useful to consider existing indicators and data sources, feasibility across different regions and resource contexts, and measures of both implementation and outcomes. These examples are illustrative and do not prejudge the process or final selection of Programme metrics.
