Healthcare Facilities and Restoration Contractor Scope 3: Why RCP Belongs in Your ESG Vendor Stack

THE DIRECT ANSWER

Restoration and remediation work on hospitals and medical office buildings is Category 1 Scope 3 (purchased services) for health systems reporting under GRESB, SBTi, ISSB-aligned frameworks, and—starting in 2027—California SB 253 supply chain disclosures. The Restoration Carbon Protocol (RCP) v1.0 gives facility teams a free, job-level standard so preferred restoration vendors deliver auditable Job Carbon Reports instead of leaving mold, water, and biohazard scopes off the inventory. Healthcare facilities occupy a unique position in the ESG disclosure landscape.

WHY HEALTHCARE FACILITY RESTORATION IS A SCOPE 3 COMPLIANCE PROBLEM

- Healthcare facility decarbonization programs, GRESB submissions, and science-based targets all pull the same lever: complete Scope 3 inventories. Loss-response and maintenance restoration—water extraction, structural drying, fire and smoke cleanup, mold remediation, biohazard response—are purchased services (GHG Protocol Category 1).

WHAT RCP PROVIDES FOR HEALTHCARE FACILITY OPERATORS

- RCP is an open-source standard for per-job Scope 3 from restoration work. For facility directors and health system real estate teams, three elements map directly to how healthcare losses are actually executed.

FIELD QUESTION

Is restoration contractor work really Scope 3 for hospitals?

Yes. Under the GHG Protocol, outsourced restoration and remediation are typically Category 1 purchased goods and services. Health systems that report Scope 3 for real estate and operations should treat recurring water, mold, fire, and biohazard contractor work as part of that inventory when materiality thresholds apply—not as uncategorized facility spend.

From Healthcare Facility Hub - free, like everything on the site. The full article is at the link below.

Caution: codes, editions, and targets vary by facility and authority having jurisdiction (AHJ). Figures marked as common practice are facility targets, not code requirements. Confirm against your AHJ and the current code text before acting.