Energy to Care Talking Points

For use with the Energy to Care Benefits Calculator: [hyperlink]

Description of the Tool

The ASHE Energy to Care Benefits Calculator is an estimating tool that uses actual results and data provided by ASHE Energy to Care program participants to highlight a tailored range of program benefits. Hospitals that haven’t yet joined the Energy to Care program can enter basic information to see estimates of money saved, pollution reduced and health harms avoided through reduced fossil fuel consumption. The results of the tool are designed to be used in combination with a variety of talking points to help make the case for program participation. The development of this tool was supported by the American Council for an Energy-Efficient Economy.

Instructions

You can customize talking points A-D below by filling in the blanks with your ASHE Energy to Care Benefits Calculator results. Each blank has a letter and number that corresponds to an output cell from the tool. Talking point E encompasses several additional persuasive arguments, many with examples and supporting studies, to help you make your case.

Talking Points

A. Through participation in the ASHE Energy to Care program, we could reduce our hospital’s energy consumption by [insert D23], reducing operating costs by [insert D24] dollars per year. Over 10 years, participation in the program could save us close to [insert D25] dollars.

B. By participating in the ASHE Energy to Care program, our hospital can protect the health of our community by reducing air pollution. Over time, we could eliminate [insert D26] pounds of fine particulate pollution, [insert D27] pounds of ozone pollution and [insert D28] pounds of greenhouse gas emissions. Health benefits from the avoided fine particulates alone could amount to [insert D29] dollars in health benefits.

C. In our region, coal makes up [insert D30] of electric generation. Coal pollution contributes to four of the leading causes of death in the United States: cancer, chronic lower respiratory diseases, heart disease and stroke. By participating in the ASHE Energy to Care efficiency program, we would reduce pollution from coal and protect the health of our community.

D. Participating in the ASHE Energy to Care program can help our hospital remain competitive. Another hospital in our region is already participating in the ASHE Energy to Care program. They have achieved [insert D31] energy savings, helping to lower their operating costs, create a more healthful space for patients and protect the health of the community they serve.
E. Reducing energy consumption in hospitals can have health benefits for patients, employees and the community. By participating in the ASHE Energy to Care efficiency program we can:

- Contain costs and strategically reduce risk. Energy management adds value to a hospital's bottom line by reducing operating costs and minimizing a hospital's vulnerability to energy price hikes. An EPA study shows that each dollar saved by a nonprofit health care organization through better energy performance is equivalent to generating up to $20 in new revenues for hospitals.\(^{i}\)

- Increase reliability during times of stress on the electric system and increase our ability to respond to system emergencies by maintaining energy supply. Long Island’s South Oaks Hospital relied fully on its combined heat and power (CHP) system when the hospital preemptively disconnected from its soon-to-fail local grid — a repeat of its successful reliance on its system during a 2003 blackout. Connecticut’s 371-bed Danbury Hospital also kept critical facilities running with its CHP system. By contrast, New York University’s Langone Medical Center did not have a CHP system and had to evacuate all 215 of its patients when its existing backup plants failed.\(^{ii}\)

- Improve both patient and employee comfort, reducing the time it takes for patients to recover and improving employee productivity. Research finds that longer hours of daylight and higher illuminance, which can be provided by energy-efficient design and lighting measures, is associated with shorter average length of hospital stays.\(^{iii}\) For some facilities, revenue generated from increased staff productivity can be 10 times as high as the energy cost savings received from performance upgrades.\(^{iv}\)

- Reduce greenhouse gases and other harmful air pollutants. At Boulder Community Hospital in Colorado, high-efficiency, partial-load, low-emission boilers reduced annual emissions of nitrogen oxides (NO\(_x\)) by 70% and carbon dioxide (CO\(_2\)) by 50%, and energy fuel consumption by 20% over standard boilers.\(^{v}\)

- Conserve water and help make our community more resilient. Hospitals are water-intensive and in many communities are among the top 10 water users. A community hospital in Boston implemented a series of water conservation retrofits that now return more than 15 million gallons of water to their community annually. Hospitals operating in drought-prone regions can have a big impact on their communities by conserving water.\(^{vi}\)

- Help to mitigate the effects of climate change on our community. Hospitals that make use of energy-efficient reflective roof technology reduce their energy use and costs associated with interior cooling while helping their communities. The annual mean air temperature of a city with one million people or more can be 1.8-5.4°F (1-3°C) warmer than its surroundings. In the evening this “urban heat island effect” can result in temperatures that are 22°F (12°C) higher than surrounding areas. Heat islands can affect communities by increasing summertime peak energy demand, air conditioning costs, air pollution and greenhouse gas emissions, heat-related illness and mortality,
and water quality. Climate change will lead to more extreme temperatures, resulting in higher temperatures, particularly in urban environments. Hospitals employing efficient roof technologies can help to reduce the urban heat island effect on their surrounding communities.\textsuperscript{vii}

F. The health benefits that energy efficiency can provide are real and substantial. The American Council for an Energy-Efficient Economy generated a report that estimates the health and environmental benefits from a 15\% reduction in electric consumption, a readily achievable goal that some states have already surpassed.\textsuperscript{viii} (Access the report \textcolor{blue}{here} to fill in the following statement: In our state, avoided health harms would total more than _____ dollars per person.)

\begin{itemize}
\item \textsuperscript{1} https://www.energystar.gov/ia/partners/spp_res/Custom_Healthcare.pdf
\item \textsuperscript{ii} https://aceee.org/blog/2012/12/how-chp-stepped-when-power-went-out-d
\item \textsuperscript{iii} https://www.sciencedirect.com/science/article/pii/S0360132311003593?via%3Dihub
\item \textsuperscript{iv} https://www.energystar.gov/ia/partners/spp_res/Custom_Healthcare.pdf
\item \textsuperscript{v} https://www.boulderassociates.com/wp-content/uploads/2014/05/Case-Study9.pdf
\item \textsuperscript{vi} http://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Volume122007/No2May07/HealthyBuildings.aspx
\item \textsuperscript{vii} https://www.epa.gov/heat-islands/using-cool-roofs-reduce-heat-islands
\item \textsuperscript{viii} https://aceee.org/research-report/h1801
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