

Fraser Health's 2019 Carbon Neutral Action Report



Declaration Statement

This Carbon Neutral Action report for the period January 1st, 2019 to December 31st, 2019 summarizes our emissions profile, the total offsets to reach net-zero emissions, the actions we have taken in 2019 to reduce our greenhouse gas emissions, and our plans to continue reducing emissions in 2020 and beyond.

By June 30, 2020 Fraser Health's final Carbon Neutral Action report will be posted to our website at bcgreencare.ca

Retirement of Offsets

In accordance with the requirements of the Climate Change Accountability Act and Carbon Neutral Government Regulation, Fraser Health is responsible for arranging for the retirement of the offsets obligation reported for the 2019 calendar year, together with any adjustments reported for past calendar years. Fraser Health hereby agrees that, in exchange for the Ministry of Environment and Climate Change Strategy ensuring that these offsets are retired on the Organization's behalf, Fraser Health will pay within 30 days, the associated invoice to be issued by the Ministry in an amount equal to \$25 per tonne of offsets retired on its behalf plus GST.

The cover photo was taken by Jeson Mak in 2019 from Columbia Tower of Royal Columbian Hospital in New Westminister overlooking the Health Care Center, new Mental Health building (under construction) and Port Mann Bridge on Fraser River.

COVID-19 Pandemic Statement

Due to the COVID-19 pandemic, the following [Directive](#) was issued on March 31, 2020:

“Under my authority as the Director for the purposes of the Act, and under the authority delegated to me in Section 6 of the Carbon Neutral Government Regulation, I hereby direct that all ministries and Public Sector Organizations covered by the Carbon Neutral Government requirement shall use their 2018 GHG emissions as a temporary estimate for their actual 2019 GHG emissions, for the purposes of the 2019 Carbon Neutral Action Reports and 2019 Carbon Neutral Government reporting required under the Climate Change Accountability Act.”

Neil Dobson, Executive Director, Clean BC Implementation
Climate Action Secretariat

Although 2018 emissions data will be used as a placeholder for 2019, all other qualitative components of this CNAR are to be completed with information from 2019

This document provides guidance to provincial public sector organizations (PSOs) to help them prepare their 2019 Carbon Neutral Action Report (CNAR) in accordance with BC’s Climate Change Accountability Act and the Carbon Neutral Government Regulation.

Executive Summary



Executive Summary: Fraser Health Carbon Neutral Action Report 2019

Victoria Lee, President and Chief Executive Officer

I am proud to present Fraser Health's 2019 Carbon Neutral Action Report.

This marks the tenth consecutive year we have achieved carbon neutrality as part of the Province of British Columbia's public sector commitment to net-zero emissions.

Health care is an energy-intensive industry that continues to grow with expanding and aging populations. Fraser Health's 2019 total emission was 37,384 tonnes of carbon dioxide equivalent. In 2019, 24 mechanical and lighting retrofit projects were initiated, that together saved Fraser Health an estimated 3 gigawatt hours (GWh) or 10,700 gigajoule (GJ) of energy, thereby reducing our carbon footprint by 413 tonnes of CO₂.

In addition, we continue to support staff engagement programs and the Green+Leaders program, which encourages a work culture of energy conservation.

To counteract the 2019 CO₂ emissions that we were unable to reduce through conservation measures, we purchased carbon offsets from the Ministry of Environment at a total cost of \$980,385.00.

Thank you to all our staff, medical staff and volunteers, as well as key external partners, for their hard work to reduce Fraser Health's environmental and carbon footprint. We know every individual can make a difference. By working together, we are able to provide both quality care and a greener health care environment for our patients and our community.



Dr. Victoria Lee

President and Chief Executive Officer
Fraser Health

Our CO₂ Footprint

As per the Directive issued March 31, 2020, each Public Sector Organization (PSO) will use their 2018 Greenhouse Gas (GHG) Emissions as a placeholder for the purposes of their 2019 CNAR.

2019 Greenhouse Gas Emissions Breakdown and Offsets Applied to Become Carbon Neutral

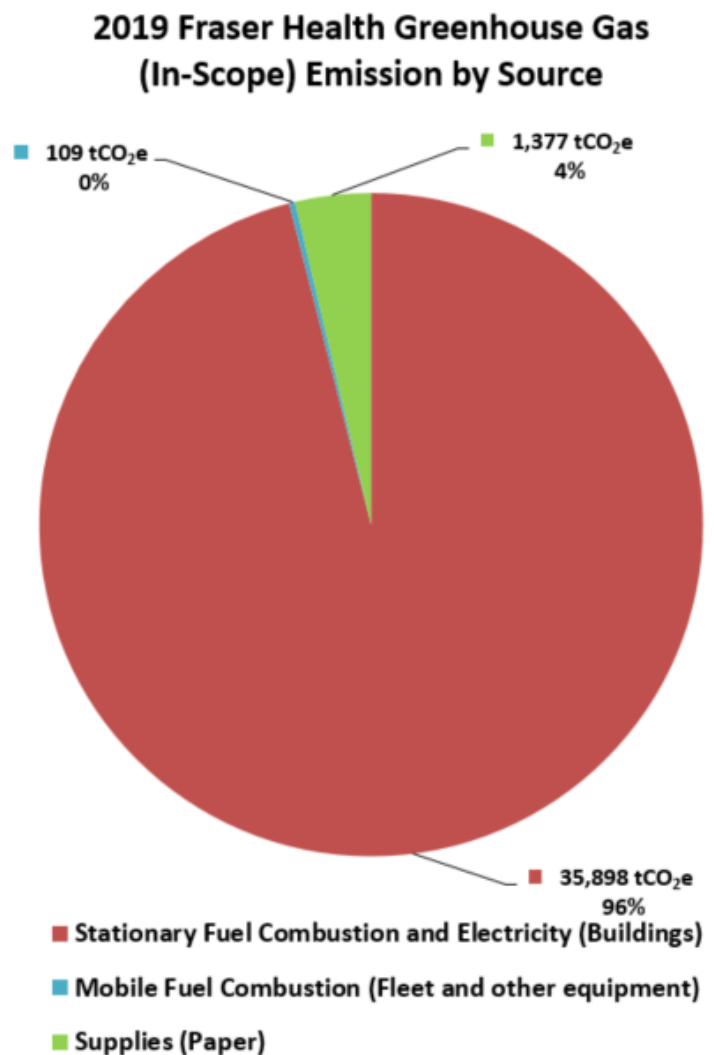
We report our carbon footprint based on guidelines provided by the Carbon Neutral Government Regulation and Climate Action Secretariat in British Columbia.

The Climate Action Secretariat uses various elements of reporting, based on the Greenhouse Gas Protocol Corporate Standard, which has classified carbon reporting into three scopes. Of these three scopes and various elements within each scope, the Climate Action Secretariat has determined Fraser Health's carbon footprint comprises six different greenhouse gases that are converted to tonnes of carbon dioxide equivalent (tCO₂e). The main sources of emissions are categorized into three main groups:

- Stationary Fuel Combustion and Electricity (Buildings)
- Mobile Fleet Combustion (Fleet and other equipment)
- Supplies (Paper)

The total emissions for 2019 was 37,384 tCO₂e. As shown in the chart, 96 per cent of Fraser Health's in-scope emissions are attributed to the stationary fuel combustion and purchased energy (electricity) from the Fraser Health owned and leased buildings.

To become carbon neutral in 2019, Fraser Health purchased carbon offsets from the Ministry of Environment. Fraser Health's 2019 total offsets were 36,348 tCO₂e at a total cost of \$980,385.00.



The table below shows the breakdown of emission and offset for 2019.

Fraser Health Green House Gas Emissions and Offsets for 2019	
As per the <u>Directive</u> issued March 31, 2020, each PSO will use their 2018 Greenhouse Gas Emissions as a placeholder for the purposes of their 2019 CNAR.	
Total Emissions (tCO2e)	37384
Total BioCO2	35.6
Total Offsets (tCO2e)	37348
Offset Investment (\$25 per tCO2e) [Total Offsets x \$25/tCO2e]	\$933,700.00 (\$980,385.00 including GST)

Notes for above table:

- i. Note, BioCO2 is reported in Total Emissions but not Total Offsets
- ii. Prior Year Adjustments (PYAs) are not applicable as emissions and offsets are based on 2018 alone
- iii. Total emissions and offset invoice amounts will be validated by CAS prior to distributing invoices
- iv. Due to a variety of influences including historical data corrections and conversion factors, there may be minor discrepancies between data existing in Clean Government Reporting Tool (CGRT) vs SMARTTool

The carbon emissions reported are not adjusted for changes in weather temperature or usable space. Stationary Fuel (natural gas) emission is the majority of the building overall emissions since the lower mainland has a climate that predominately requires heating to satisfy internal building temperatures. Although the priority climate mitigation actions are focused on natural gas combustion reductions, there are many drivers to continue reducing purchased energy and other emission sources.

Actions Taken To Reduce Our CO₂ Footprint

Stationary Emissions (Buildings)

- **Further reduced environmental impact by initiating 24 retrofit projects** with a total estimated energy savings of 3 GWh (10,700 GJ) resulting in greenhouse gas savings of 413 tCO₂e.
- **Fully utilized the Carbon Neutral Capital Program** to fund the energy / greenhouse gas emission reduction project at Eagle Ridge Hospital and Peace Arch Hospital. About \$1 million of Carbon Neutral Capital Program funds, along with internal capital funds and incentives, were invested in F20.
- **Invested \$432,000 from the Green Revolving Fund** in electricity energy saving projects in F20.
- **Completed lighting audits** at Eagle Ridge Hospital, Mission Hospital, Chilliwack General Hospital, Delta Hospital, Fellburn care Center and Maple Ridge Treatment Centre.
- **Completed Low Carbon Electrification study** at Heritage Village.
- **Embarked on Medical Device Reprocessing sterilizer heat recovery study** at Delta Hospital, Ridge Meadows Hospital and Burnaby Hospital.
- **Continued to roll out an engagement strategy** with Facilities Maintenance and Operation (FMO), adding Surrey Memorial Hospital to the list of seven Fraser Health sites in the engagement program. The strategy focuses on energy performance, identifying conservation opportunities and optimizing existing plants or equipment in buildings.

- **Continued to embed sustainability** by supporting staff engagement initiatives such as the Green+Leaders program, the GreenCare community website, and the BC Hydro Energy Wise program.
- **Engaged in New Construction and Major Renovation Projects** such as Peace Arch Hospital Expansion, Delta Hospital lab and Medical Imaging Expansion, and Mental Health building in Royal Columbian Hospital with the intent to ensure that health care-related new buildings build to the meet highest standards for environmental and human health, performance efficiency, and financial investment.

Mobile Fleet & Other Vehicles Combustion

- Communicated with **supply chain** about the CleanBC plan to encourage the uptake of electric vehicles in fleet
- Fraser Health now has **60 electric vehicles charging stalls** in visitor/employee parking.
- There are **470 bike-parking stalls** available across Fraser Health sites.
- **Continued the shuttle transport service for family members, ambulatory patients, and employees** between three facilities and the Surrey Central Skytrain Station, Royal Columbian Hospital and Braid Station, and Burnaby Hospital and Gilmore/Patterson Stations. Ridership was 156,125 trips, an increase of 23% over 2018.
- **Transit Incentive Program (TIP)** was implemented effective November 1st, 2019 with 298 Fraser Health employees enrolled in the first month. Employees

receive a 15 per cent subsidy if they purchase a Monthly Compass Card.

Supplies (Paper)

- As part of the waste reduction campaign, the Fraser Health Green Leader program was supplied with toolkits to reduce paper use through double-sided printing, paperless meetings, and more.
- **GreenCare Community** website continues to provide inspiration, tips and toolkits to reduce waste, including paper use.

Actions That Fall Outside the Scope of the Carbon Neutral Government Regulation

- Worked with BC Hydro to consolidate all individual site bills into one bill to **reduce mailing of paper invoices**.
- **A Wastewater Pollution Prevention Plan was created for nine Fraser Health sites as required by Metro Vancouver**. These plans form a commitment to reduce the amount of hazardous chemicals, grease or solids that could get into the sewer system.
- **The Facility Management Energy Environment and Sustainability team** collaborated with Provincial Health Services Authority supply chain to create a formal way for frontline health care staff to report an **“environmental concern”** with regards to a product they use to deliver patient care. Identifying concerns such as “not recyclable” and “excessive packaging” will help PHSA Supply Chain procure environmentally preferable products and equipment, for all hospitals in BC, including Fraser Health.
- **Education and awareness on [GreenCare](#) community website**, as well as stories published on our internal communication channels, continued to promote behaviour change and celebrate environmental sustainability success.
- **Continuing to support staff champions through the Green+Leaders program** in training, resources, toolkits, and recognition. In 2019:
 - The Program **collaborated with the Fraser Health Innovation Team** who sponsor annual innovation grants. The 2019 innovation grants had a special focus on “exnovation”: for creative solutions that eliminate unnecessary steps, waste and/or costs, while maintaining or improving the standard of care. \$3,000 was dedicated to Green+Leaders to implement projects that eliminate waste across Fraser Health.
- **Zero waste** initiative by Fraser Health staff, to reduce our hospitals’ environmental impact: In 2019 a Green+Leader nurse at Peace Arch Hospital provided frontline staff in 33 hospital areas with face-to-face education on recycling best practices. Follow-up visual audits showed a significant decrease of recycling bin contamination in staff areas such as kitchens and lunch rooms.
- **The BC Climate Change Accountability Act gave equal importance to climate risk management alongside greenhouse gas emission reductions**. Fraser Health is already mandated or committed to:
 - Participated the 8th annual Public Sector Climate Leadership Symposium on November 2019
 - Demonstrate public sector leadership, and achieve new greenhouse gas emission reductions targets, as per CleanBC (2018).
 - Report climate risks and actions to reduce risks in Carbon Neutral Action Reports.
 - Conduct net zero energy assessment for capital projects, as per the Ministry of Health (2018).
 - Produce 10-year emission reduction and adaptation plans, as per the Climate Leadership Plan (2016).
 - By 2022, conduct an integrated climate and health vulnerability assessment, and develop an integrated climate adaption plan, with a Health Canada grant.
 - Develop an executive summary report series called “Moving Toward Climate Resilient Health Facilities” to introduce the topic of Fraser Health and future climate, understand the risks to patient care and facilities and discuss how to reduce risk.

Future Actions to Reduce Our CO₂ Footprint

Fraser Health plans to continue reducing its CO₂ footprint with a focus on in-scope emission and strategic planning.

In-scope Emissions

The majority of Fraser Health's carbon footprint is related to stationary fuel combustion in its owned and leased buildings. Natural gas is the predominant fossil fuel used for space heating, hot water, and process loads in our stationary combustion plants. Although our priority actions are to focus on our natural gas combustion plant, we are also motivated to reduce purchased energy (electricity) and other in-scope emission sources.

Stationary Fuel Combustion and Electricity (Buildings)

- **Review greenhouse gas performance accountability options** and target design standard such as **Leadership in Energy and Environmental Design (LEED)** with new construction and expansion project team.
- **Setting up long term plan** to achieve new greenhouse gas emission reductions targets as per CleanBC
- **Initializing Net Zero Emissions and Energy Feasibility discussion** with the Royal Columbian Hospital Re-development and new Surrey Hospital project at initial phase and increase collaboration focus in all project phases.
- **Building partnerships with cities and municipalities** to investigate district energy systems opportunities that enable alternative energy solutions for existing buildings or new constructions.
- **Planning and implementing greenhouse gas or energy reduction projects** in our existing buildings portfolio by using the Carbon Neutral Capital Program and supplementing with internal capital funds and incentives from BC Hydro and FortisBC.
- **Continuing the optimization of mechanical plants, lighting, and building controls** in our existing building portfolio.
- **Reinvesting electricity savings** from the previous fiscal year to supplement the Green Revolving Fund and invest in electricity reduction projects.
- **Undertaking existing site energy studies** with support from facilities maintenance operations employees and external consultants to identify greenhouse gas / energy reduction opportunities.
- **Collaborate with building operators and engineers** to identify greenhouse gas reduction opportunities and tracking building performance.
- Continue to **engage and educate Fraser Health employees**, through the Green+Leaders program, GreenCare Community.

Mobile Combustion (Fleet and Other Vehicles)

- Continuing to work with Fleet Procurement and transportation demand management coordinator to improve, promote, and establish low carbon transportation opportunities.

Supplies (Paper)

- Collaborating with BC Clinical and Support Services stakeholders and our paper suppliers about procurement of environmentally friendly and high recycled content paper. There is an ongoing effort across the organization to minimize use of paper in day-to-day workflow.

Feature Project Lesson

Celebrating New Technologies through Performance Commissioning

In 2019, the Energy and Environmental Sustainability Team worked closely with the Eagle Ridge Hospital Facilities Maintenance and Operation (FMO) team, to maximize the potential of a powerful new Heat Recovery Chiller (HRC) installed at the hospital.

Eagle Ridge Hospital is a community hospital, located in Port Moody. It was constructed in 1982 to provide primary and secondary care with some specialty services with an additional Extended Care Unit for seniors built in 1992. An earlier energy study showed the existing chillers were over-sized and performed poorly in fall and spring when the cooling load is small.

The project goals were to improve overall heating and cooling efficiency and capture escaping energy from the exhaust air to reduce greenhouse gas emissions by

- installing a 250-ton HRC, replacing three of the six standard multi-stack chillers;
- connecting the heat recovery chiller to exhaust duct heat recovery coils;
- installing variable speed drives on hot water pumps;
- implementing advance control strategy to optimize the system performance.

The HRC is a dynamic machine that responds to both heating and cooling systems that change throughout the day and year leading to impressive energy efficiency. It can achieve greater efficiency by ramping down at low loads supported by variable speed pumps that can lower the flow of chilled water. The heating feature displaces natural gas that would otherwise be burned by boilers for heating. As well, the HRC can capture and re-use heat from exhausted warm air in the winter for space heating and to heat domestic hot water. This complexity requires the well-tuned, integrated operation of all systems; otherwise, the energy efficiency potential is lost. The installation funding was supported by BC's Carbon Neutral Capital.



Figure 1: New Heat Recovery Chiller



Figure 2: Three remaining Multi-stack chillers

After the unit was successfully installed and in operation, the Hospital's Facilities Team noted the HRC was not always performing as intended. This observation was brought to the energy team's attention.

In the winter of 2019, the energy team engaged the original designer of the HRC system for "performance commissioning". By observing how the HRC is actually performing after the first summer and winter season, the designer was able to adjust programming parameters. As a result, the HRC's winter operation is more stable, with less downtime and the average HRC operation has increased from 50 to 80 per cent of its full capacity. The designer will perform the same optimization for summer operation.

Eagle Ridge Hospital saved 3,633 GJ (13%) in natural gas in 2019, representing a decrease of 185 tons of CO₂ emissions. The savings came from a 7,000 GJ reduction due to heat production of the HRC, minus additional ventilation heating load. The increase in electricity use of 419,000 kWh was expected. Following the adjustments, initial trending of performance data shows the hospital expects to more than double the gas savings due to the HRC, for an overall cost savings of \$50,000 per year.

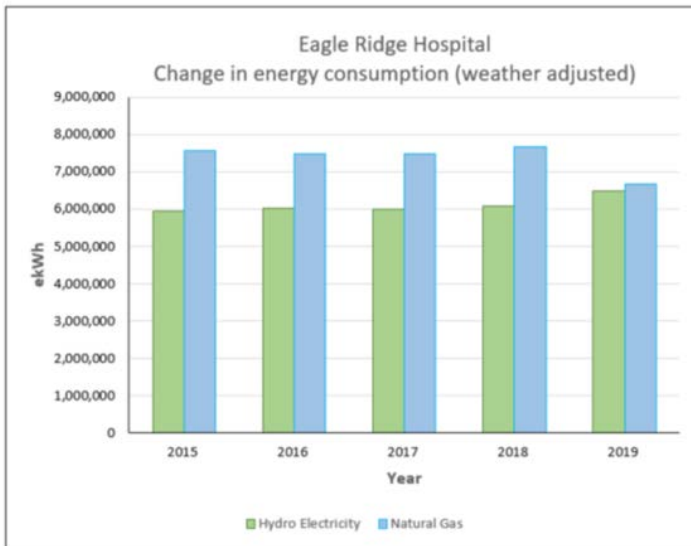


Table 1: This chart shows natural gas reduction (blue) in 2019, compared to previous years, with an increase in electricity consumption due to the Heat Recovery Chiller.

By following up with a Performance Recommissioning effort, the hospital was able to get the full potential of its new heat recovery chiller to maximize energy savings, improve control of the indoor environment and give operators confidence in their new equipment.

The building is currently in the process of upgrading the patient rooms’ ventilation system by replacing the pneumatically controlled “mixing boxes” with new digitally controlled “variable air volume” (VAV) boxes. This is a multi-year project, due for completion in 2021. The HRC performance commissioning enables the optimization of the strategic control of the new VAV boxes system to further improving energy savings and occupants’ comfort.

Confirmation number: 00C579D1

Submitted date: 2020-06-29 19:34:31 Pacific Daylight Time

Carbon Neutral Action Report Survey - 2019

Public sector organizations (PSOs) are required to complete this survey, in addition to a Carbon Neutral Action Report (CNAR) as mandated by BC's [Climate Change Accountability Act](#) and the [Carbon Neutral Government Regulation](#).

Due to the COVID-19 pandemic, the following [Directive](#) was issued on March 31, 2020. Certain deadlines were also extended for the 2019 reporting year (see below).

March 31, 2020 Directive:

Under my authority as the Director for the purposes of the Act, and under the authority delegated to me in Section 6 of the Carbon Neutral Government Regulation, I hereby direct that all ministries and Public Sector Organizations covered by the Carbon Neutral Government requirement shall use their 2018 GHG emissions as a temporary estimate for their actual 2019 GHG emissions, for the purposes of the 2019 Carbon Neutral Action Reports and 2019 Carbon Neutral Government reporting required under the Climate Change Accountability Act.

Neil Dobson, Executive Director, Clean BC Implementation
Climate Action Secretariat

Although 2018 emissions data will be used as a placeholder for 2019, **all other (qualitative) components of the CNAR and CNAR Survey are to be completed with information from 2019 (e.g., actions taken or planned to reduce emissions)**. The only change to the survey is that the deadline was extended by one month to June 30, 2020.

This survey is divided into two parts:

Part 1 - Will be made public on the Climate Action Secretariat (CAS) [website](#) after June 30, 2020; however, it will not be appended directly to each individual PSO CNAR as was done in previous years. This section collects details about actions taken or planned to reduce emissions and is intended to supplement the legislative requirements in your CNAR.

Part 2 - Will NOT be made public. Information you provide in this section is important and will be used internally to help CAS staff with planning for emissions reduction and climate change adaptation initiatives. Although not required, PSOs are highly encouraged to complete Part 2.

Note: Survey progress can be saved at any time by clicking the "Save and continue later" button at the bottom of each page. A new window will open and you will be asked to provide your name and email. An email will be sent to you from Carbon.Neutral@gov.bc.ca with the subject line: "Questionnaire Link", which will include a hyperlink for the "Project: Carbon Neutral Action Report Survey – Broader Public Sector 2019". You can then continue responding at another time or email the hyperlink to a colleague to complete remaining section(s).

May 29, 2020	<ul style="list-style-type: none">The final, signed version of the CNAR (or Small Emitters Form) must be submitted by email to: Carbon.Neutral@gov.bc.ca
June 30, 2020*	<ul style="list-style-type: none">Ministry of Environment and Climate Change Strategy must post a final CNAR for each organization on the BC Government's CNG website and each PSO is encouraged to post the report on their website.The CNAR Survey (optional for Small Emitters) must be completed and submitted online. *Deadline extended from May 29, 2020.<u>All offset invoice payments must be submitted to CAS.</u>
Sept 30, 2020*	<ul style="list-style-type: none">Clean Government Reporting Tool (CGRT) Data Entry must be completed for the 2019 reporting year.

	*Deadline extended from April 30, 2020.
Oct 15, 2020*	<ul style="list-style-type: none"> • Self-Certification checklist must be completed, signed and submitted by email to: Carbon.Neutral@gov.bc.ca. *Deadline extended from May 15, 2020.

*See the [Carbon Neutral Government – Program Requirements website](#) for more information on program requirements, timelines and templates.

PART 1 - Included as part of your public CNAR report.

Reminder that Part 1 will be made public on the CAS [website](#).

Contact Name:
<i>Jeson Mak</i>
Contact Email:
<i>jeson.mak@fraserhealth.ca</i>
Organization Name:
<i>Fraser Health</i>
Role – Please select the best category for your current role with your organization. If more than one individual completed the survey, multiple categories may be selected:
Energy Manager
Please select your sector:
Health (H)

Stationary Sources (e.g. Buildings, Power Generators): Fuel Combustion, Electricity use, Fugitive Emissions.

Actions taken by your organization in 2019 to support emissions reductions from buildings

Do you have a strategy to reduce emissions from stationary sources?
Yes

Whether you have a strategy or not, briefly describe your organization's plans to continue reducing emissions from stationary sources:

Over the medium-term term (1-5 years)
<i>Fraser Health has a 3-year Strategic Energy Management Plan (SEMP), complete with details of our Energy and GHG use reduction targets and planned actions to achieve these targets. Although this is a 3-year rolling plan, the SEMP is reviewed and updated annually. This allows us to compare our energy use & GHG performance across the building portfolio and adjust the planned actions accordingly.</i>

Over the long term (6-10 years)

*Promotion of Energy Conservation via our Policy & Strategic Framework:
Site specific energy studies and audits will continue to be carried out on inefficient processes and plant;
Energy conservation measures will be identified and technical projects implemented;
Existing buildings will continue to be optimized;
Energy awareness and educational strategies will be implemented;
Energy efficient solutions will be recommended for new construction and major renovation.*

Please describe your strategy's goals (if any) related to energy audits.

Minimum one major lighting upgrade study, one major mechanical upgrade study and one major site building automation optimization retrofit study.

What % on average of your building portfolio has an energy audit completed each year (if any)?

10%

Please describe your strategy's goals (if any) related to building retrofits.

Minimum 1 major site lighting retrofit, 1 major site mechanical upgrade and 1 major site building automation optimization retrofit

What % on average of your building portfolio is retrofitted each year in the following categories (if any) - click here for further information:

20%

Minor retrofits (e.g. low cost, easy to implement measures including caulking, lighting, adding roof insulation, etc.)

10%

Major retrofits (e.g. replacing windows and doors, equipment replacement such as boilers, etc.)

10%

Deep retrofits (e.g. replacing roof, replacing the heating, ventilation and air-conditioning system with a renewable technology like a ground-source heat pump, etc.)

0%

Please describe your strategy's re/retro-commissioning goals (if any)?

FHA's strategy is to undertake retro-commissioning studies and implement found ECMs for buildings over 50,000 ft2 and re-visit the implemented measures after 5 years.

What % on average of your building portfolio do you recommission each year?

10%

Do you keep records of Refrigerant gases¹ category and refilling volumes?

[1] Fugitive emissions from stationary cooling equipment are attributed to the leakage and loss of HFC and PFC based coolants from air conditioning and commercial type refrigeration systems. Coolant loss can occur during the manufacturing, operation, and disposal of such equipment. Gases that may be reported via CGRT include HFC R-134, HFC R-134a, HFC R-404a, HFC R-407c, HFC R-410a.

No

What, if any, mitigation approaches have been considered? Please describe.

None

How many newly constructed buildings received at least LEED Gold certification in 2019?

0

How many newly constructed buildings did not receive LEED Gold certification?

0

Please explain why LEED Gold certification was not obtained for those new buildings.

N/A

Other actions? Please describe briefly:

Low carbon Electrification study for an Extended Care Home, two projects to implement heat recovery from steam sterilizers.

Mobile Sources (Fleet Vehicles, Off-road/portable Equipment): Fuel Combustion:

Actions taken by your organization in 2019 to support emissions reductions from mobile sources?

Do you have a strategy to reduce emissions from mobile sources?

No

Whether you have a strategy or not, briefly describe your organization's plans to continue reducing emissions from mobile sources:

Over the medium-term term (1-5 years)

*Reduce the number of fleet vehicles, to encourage staff use of personal vehicles.
The Surrey free staff / patient/ visitor shuttle service between three Fraser Health facilities and Sky Train station at Surrey City Centre, and the staff shuttle service between Royal Columbian Hospital and Braid Sky Train station during site construction will be continued. A new free shuttle service for visitors / patients and staff from Burnaby Hospital to two Sky Train stations was introduced in 2019. Shuttle trips increased from 127,002 in 2018 to 156,125 trips in 2019, for an increase of 23%.
FHA encourages car sharing services on staff website, with dedicated car-share parking stalls; facilitates a carpool registration service for employees. FHA has 470 bike parking stalls.
Implemented Transit Incentive Program (TIP) in November 2019, with 298 Fraser Health employees enrolled in the first month. Employees receive a 15 per cent subsidy if they purchase a Monthly Compass Card.*

Over the long term (6-10 years)

*Continue to work with Fleet Procurement and Transportation Demand Management Coordinator to improve, promote and establish low carbon transportation opportunities.
Work towards policy for purchase of low carbon fleet vehicles.*

How many fleet vehicles did you purchase from the following categories:

Electric Vehicle – EV - (e.g., Nissan Leaf, Chevy Bolt)

0

“Plug In” Electric Vehicle – PHEV (e.g., plug-in Prius, Chevy Volt)

0

Hybrid vehicle – HEV – non “Plug In”- (e.g., Toyota Highlander Hybrid)

0

Hydrogen fuel cell vehicle

0

Natural gas/propane

0

Gas/diesel vehicle

1

If you purchased new gas/diesel vehicles, can you briefly explain why vehicles from the other categories were not chosen?

No policy developed yet, to use any criteria other than cost.

Actions taken by your organization in 2019 to support emissions reductions from mobile sources? (Continued)

How many existing EV charging stations does your organization have in each category:

Level 2?

60

Level 3?

0

How many level 2 stations (if any) are specifically for your fleet vehicles?
As defined as Level 2 stations only your organization's fleet vehicles may use

0

How many level 3 stations (if any) are specifically for your fleet vehicles?
As defined as Level 3 stations only your organization's fleet vehicles may use

0

How many EV charging station(s) did you install in 2019 in each category:

Level 2?

0

Level 3?

0

How many level 2 stations (if any) were installed specifically for your fleet vehicles?
As defined in the previous section

0

How many level 3 stations (if any) were installed specifically for your fleet vehicles?
As defined in the previous section

0

Please briefly describe any other related actions, (e.g. charging station feasibility studies, electrical panel upgrades, etc.)

Partner with BC Hydro to study staff/visitor EV charger power demand and control at a selected hospital.

Please indicate the total number of the vehicles in the following vehicle classes that are in your current fleet

Definitions:

- Light duty vehicles (LDVs) are designated primarily for transport of passengers <13 and GVWR<3900kg
- Light duty trucks (LDTs) are designated primarily for transport of light-weight cargo or that are equipped with special features such as four-wheel drive for off-road operation (include SUVs, vans, trucks with a GVWR<3,900kg)
- Heavy duty vehicles (HDV) includes vehicles with a GVWR>3,900 kg (e.g. ¾ tonne pick-up truck, transport trucks)

Light duty vehicles (LDVs)

Electric Vehicles – EV - (e.g., Nissan Leaf, Chevy Bolt)

0

“Plug In” Electric Vehicle – PHEV -- (e.g., plug-in Prius, Chevy Volt)

0

Hybrid vehicles – HEV – (e.g., non “Plug In”- older Toyota Prius, Toyota Camry hybrid)

0

Hydrogen fuel cell vehicles

0

Natural gas/propane

0

Gas/diesel

0

Light duty trucks (LDTs)

Electric Vehicles – EV

0

“Plug In” Electric Vehicle – PHEV

0

Hybrid vehicles – HEV – (e.g., non “Plug In”- older Ford Escape Hybrid, older Chevrolet Silverado pickup hybrid, etc)

0

Hydrogen fuel cell vehicles

0

Natural Gas/propane

0

Gas/diesel

8

Heavy duty vehicles (HDV)

Electric Vehicles – EV

0

“Plug In” Electric Vehicle – PHEV

0

Hybrid vehicles – HEV – (e.g., non “Plug In”)

0

Hydrogen fuel cell vehicles

0

Natural Gas/propane

0

Gas/diesel

13

Actions taken by your organization in 2019 to support emissions reductions from paper supplies.

Briefly describe your organization’s plans to continue reducing emissions from paper use:

Over the medium-term (1-5 years)

The Energy and Environmental Sustainability Team is working with PHSA Supply Chain and other LMHO stakeholders to determine the appropriate route to change all or the majority of primary paper purchases to 30PCR by 2025.

Over the long term (6-10 years)

The Energy and Environmental Sustainability Team is working with PHSA Supply Chain and other LMHO stakeholders to determine the appropriate route to change all or the majority of primary paper purchases to 50-100PCR by 2030.

Do you have an awareness campaign focused on reducing office paper use?

Yes

Purchased alternate source paper (bamboo, hemp, wheat, etc.)

No

Other 2019 actions, please specify

Through the Green+Leaders staff engagement and behaviour change program, volunteers were supplied with Paperless Meeting Toolkits, and Electronic Filing Toolkit to encourage their colleagues to reduce paper use. FHA had 27 Green Plus Leaders in 2019.

We plan to continue to raise awareness of the importance of emissions reductions from paper supplies through the Green+Leaders behaviour change program. More specifically, we plan to explore a paper strategy and associated campaign to encourage staff to take action and reduce paper consumption in healthcare.