Providence Health Care's 2019 Carbon Neutral Action Report









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Declaration Statement

This Carbon Neutral Action Report for the period January 1, 2019 to December 31, 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.

In 2010 Vancouver Coastal Health, Fraser Health, Providence Health Care and Provincial Health Services Authority consolidated their efforts towards environmental sustainability to create the GreenCare Community. By June 30, 2020 Providence Health Care'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, Providence Health Care (the Organization) 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. The Organization 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, the Organization 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 is the exterior of the St. Vincent's: Brock Fahrni Long Term Care home in Vancouver.





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: Providence Health Care, CNAR 2019Fiona Dalton, President & Chief Executive Officer

It gives me great pleasure to present Providence Health Care's (PHC) tenth annual Carbon Neutral Action Report (CNAR) for 2019. For ten consecutive years, Providence has been proud to be carbon neutral, through our purchasing of carbon offsets. As an organization driven by innovation and social justice, we believe that our role as health care providers goes beyond caring for individuals and to caring for the environment, too.

Stewardship is one of our key organizational values and throughout our 125 years of providing compassionate and innovative care, teaching and research, we have been responsible and accountable stewards. For us, that includes taking personal responsibility for the carbon footprint produced by our operations and facilities.

In 2019, Providence had a carbon footprint of 11,948 tonnes of carbon dioxide equivalent (tCO_2e), which was offset at a total cost of \$313,635.00. This represents a 3.6 per cent decrease in carbon emissions relative to the 2007 baseline year.

In 2019, Providence reached substantial completion for the St. Paul's Hospital Chiller 2 & Heat Recovery project, which received an incentive of \$428,546 from FortisBC in recognition of the significant carbon reduction achieved. Also worth highlighting is a project underway at St. Vincent's: Brock Fahrni which will add cooling and synergistically reduce carbon emissions and operating costs. This project will utilize Carbon Neutral Capital Program funding and take advantage of a \$313,000 incentive from FortisBC, thus minimizing any investment required by Providence.

PHC's Energy Manager played a key role in bringing Dr. Stephanie Taylor back to Vancouver for a healthcare specific audience. Dr. Taylor's research presents compelling evidence that highlights the importance of maintaining indoor relative humidity carefully between 40% and 60% to reduce the spread of infectious agents and to create a healing indoor environment. Humidification can result in significant energy and carbon emissions; therefore a low carbon approach is essential. These ideas are especially relevant as we prepare to response appropriately to our new reality, post COVID-19.



In 2020, we will continue to improve our environmental performance through improved energy efficiency, coordinated efforts, and education. These projects have a positive impact; saving energy, decreasing air pollution, and ultimately adding to the health and wellness of facilities, workplaces and the communities we serve.

Date: May 29th, 2020

Fiona Dalton
President & Chief Executive Officer
Providence Health Care



Our CO₂ Footprint

As per the Directive issued March 31, 2020, each PSO will **use their 2018 GHG Emissions** as a placeholder for the purposes of their 2019 CNAR.

2019 GREENHOUSE GAS EMISSIONS BREAKDOWN AND OFFSETS APPLIED TO BECOME CARBON NEUTRAL

Providence Health Care reports its organizational carbon footprint based on guidelines provided by the Carbon Neutral Government Regulation (CNGR) and B.C. Climate Action Secretariat (CAS).

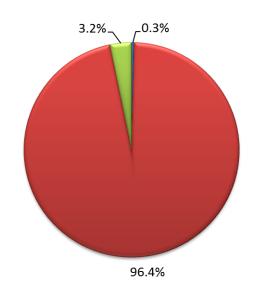
CAS developed reporting guidance based on the GHG Protocol Corporate Standard. Based on these guidelines, Providence Health Care's carbon footprint is comprised of six different greenhouse gases, which are converted into a common metric of tonnes of carbon dioxide equivalent (tCO₂e). In scope carbon emissions are categorized in three main categories:

- 1. Stationary Fuel Combustion
- 2. Mobile Fleet Combustion
- 3. Supplies (Paper)

PHC's 2019 Carbon footprint offset was 11,948 tonnes of carbon dioxide equivalent (tCO_2e). That represents a 3.6 per cent decrease in PHC's carbon footprint since 2007.

Over 95 per cent of Providence Health Care's in-scope emissions are attributed to the building portfolio. Within the building portfolio, over 80 per cent of emissions are due to the use of fossil fuels.

2019 Providence Health Care's Greenhouse Gas (In-Scope) Emissions by Source



- Mobile Fuel Combustion (Fleet)
- Stationary Fuel Combustion & Electricity (Buildings)
- Supplies (Paper)

To become carbon neutral in 2019, Providence Health Care purchased carbon offsets at a total cost of \$313,635.00.

"The environmental impact from healthcare facilities, operations, and services affects the health of the populations and patients they are meant to serve." - Adapted from World Health Organisation & Healthcare without Harm





Providence Health Care GHG Emissions and Offsets for 2019

As per the <u>directive</u> issued March 31, 2020, each PSO will use their 2018 GHG Emissions as a placeholder for the purposes of their 2019 CNAR.

Total Emissions (tCO2e)	11,952.20
Total BioCO2	4.20
Total Offsets (tCO2e)	11,948.00
Offset Investment (\$25 per tCO2e)	\$298,700.00
[Total Offsets x \$25/tCO2e]	(\$313,635.00 including GST)
[Total Offsets x \$25/tCO2e]	(\$313,635.00 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





Actions Taken to Reduce Our CO₂ Footprint

2019 LIST OF ACTIONS TAKEN TO REDUCE CO2 FOOTPRINT

Stationary Emissions (Buildings)

- Continuous Optimization: Providence completed the post-project or coaching phase of BC Hydro's Continuous Optimization Program at two sites in 2019; at St. Vincent's: Langara and Holy Family Hospital.
- Waste Heat Recovery: Providence completed two studies (at St. Vincent's: Brock Fahrni and St. Vincent's: Langara) in 2019 to explore options to address a clinical need to add cooling in response to changing climate. In cooperation with the energy management team, these studies were expanded to explore synergistically recovering waste heat and reduce carbon emissions. In both cases a low exergy Thermal Gradient Header (TGH) design approach (similar to that employed at St. Paul's Hospital) was recommended. The Brock Fahrni project is now underway.
- FMO Staff Engagement: The Providence energy management team has continued to build an engagement strategy with Facilities Maintenance and Operations (FMO) departments. This was focused initially at St. Paul's Hospital, and is now being extended to Holy Family Hospital and Langara Long Term Care. There are plans to expand to all major owned sites over time. The outreach focuses on reviewing energy use in buildings, identification of reduction opportunities, and optimization of existing equipment/plants.

- Design Guidelines: PHC's energy management team was involved in further refinements to GreenCare's Energy and Environmental Sustainability Design Guidelines for New Construction and Major Renovation projects with the intent of ensuring health care related new construction and major renovation projects are built to the highest standard of energy efficiency and conservation, within financial constraints. These guidelines informed the approach to environmental sustainability for the new St. Paul's Hospital and health campus.
- Behaviour Change: PHC's energy team continues to promote energy conservation and GHG emissions reduction through awareness and behaviour change programs, such as Green+Leaders and the GreenCare Community website. In 2019, Brian Simmers, Chief Financial Officer (CFO) and Vice President, Corporate Development for Providence, became a trained and active Green+Leader. In addition, The CFO provided financial support for pilot sustainability projects across the PHC community. As the Executive Champion for PHC's Mission Forward Strategic Plan's Sustainability Foundation Principle, we'd like to acknowledge the CFO's commitment and support for sustainability across the organization, and look forward to future collaborations.





Mobile Fleet Combustion (Fleet and other vehicles)

Providence continues to provide **electric vehicle charging stations** at various sites including regular plug-ins.

Providence continues to partner with Provincial Health Services Authority and Vancouver Coastal Health to provide a **shuttle service** between sites.

Providence sites offer **bike parking stalls** to encourage and enable active transportation by bike.



Supplies (Paper)

As part of the Green+Leader program, a paper/waste reduction campaign supports volunteers with Paperless Meeting Toolkits to encourage their colleagues to reduce paper use.

Providence **encourages teleconferencing** for meetings by installing web- conferencing hardware / software at various sites.

Actions That Fall Outside the Scope of the Carbon Neutral Government Regulations:

The Green+Leaders behaviour change program at Providence recruit staff volunteers who help improve the environmental sustainability of PHC operations.

Providence continues to support the GreenCare Community site, which provides tips and toolkits on using less paper, as well as other environmental sustainability initiatives linked to health and wellness.

Providence offers in-person staff education on waste management processes in collaboration with Business Initiatives and Support Services (BISS)¹.

Providence also offers a **Waste Management Basics Learning Module** online.



¹ For more information, please contact BISS Hazardous Waste Coordinator, Teri Guimond, Teri.Guimond@vch.ca





Future Actions to Reduce Our CO₂ Footprint

PHC plans to continue reducing GHG emissions and Energy in the following ways:

 Optimizing our Existing Buildings: Planning and implementing GHG

implementing GHG / Energy reduction projects in our existing building portfolio by utilizing the Carbon Neutral Capital Program as our primary funding source.

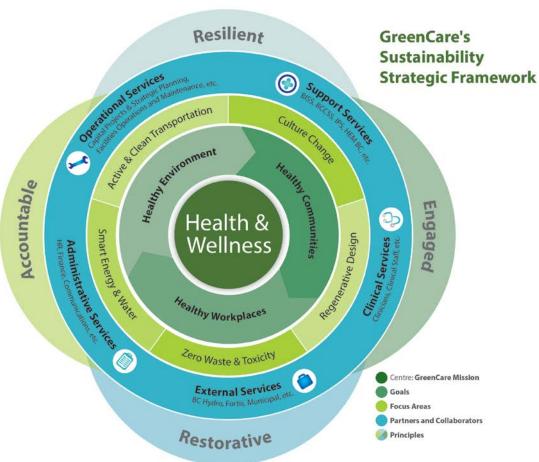
 Efficient New Construction:

Implementing project-specific energy performance targets to ensure that our new buildings are as energy efficient as possible.

Systemic Change:

Leveraging and promoting our Sustainability Policy, and implementing standards, guidelines, and processes to embed energy management principles further into standard operations.

 Align with our Core Mandate: Working with GreenCare's refreshed Strategic Framework; PHC's efforts to reduce carbon emissions will take a collaborative approach and seek to support a sustainable and environmentally responsible health care system, which continues to advance health and wellness in its broadest sense.



- Behaviour Change: Engaging and educating our staff, via the Green + Leaders program, GreenCare Community and FortisBC's Communication, Engagement and Outreach program.
- Innovation and Demonstration: Promoting innovative approaches and taking other small "seedling actions" to prepare for larger innovation as appropriate opportunities arise.





Feature Project

Low Carbon and Resilient Asset Management across PHC Sites Yields Value

In 2019, Providence completed two studies (at St. Vincent's: Brock Fahrni and St. Vincent's: Langara) to explore options to address a clinical need to add cooling in response to our changing climate. Tony Munster, Executive Director Projects Planning and Facilities Management, gave approval to expand these studies to explore options to synergistically recover waste heat in order to reduce both operating costs and carbon emissions, in collaboration with the energy management team.

The expanded study scope was funded through the FortisBC Custom Energy Study program. In both cases a low exergy Thermal Gradient Header (TGH) design approach (similar to that employed at St. Paul's Hospital) was recommended as a means to increase climate resilience while also reducing carbon emissions.

The Brock Fahrni project is now underway and will utilize Carbon Neutral Capital Program (CNCP) funding and take advantage of a \$313,000 incentive from FortisBC. The temporary once-through cooling systems will be replaced with permanent mechanical cooling consisting of a heat recovery chiller and a TGH approach to enable waste heat to be reused within the building.

These projects build upon the success of the St. Paul's Hospital Chiller 2 & Heat Recovery project, which was featured in the 2018 issue of this report. That was a major capital project that is now substantially complete with only final commissioning and measurement and verification (M&V) tasks still underway. Early M&V results are in line with the anticipated utility savings. The eighty per cent **pre-M&V incentive (\$428,546)** from FortisBC was delivered in 2019, and the **remaining incentive (\$137,425)**, the final twenty per cent post-M&V plus implementation bonus, is anticipated within the next 10 months.

All three of the projects mentioned are the result of collaboration between numerous different stakeholders and departments including PHC's Facilities Maintenance and Operations (FMO) team, PHC Finance, as well as the Energy Management and Capital Projects teams responsible for the Providence Portfolio.

Brock Fahrni Cooling & Holistic TGH Heat Recovery Project

Technology: Thermal Gradient Header (TGH) holistic heat recovery strategy

Predicted Energy Savings: An estimated 8,200 GJ per annum of steam and an increase of 244,000 kWh/year of electricity to operate the new chiller.

Predicted GHG Reductions: 400 tCO₂e/year anticipated GHG reduction.

Incremental Project Cost*: \$380,000 (total project cost estimated at \$1.1M)

Incentive Funding: \$45,000 Study Incentive & \$313,000 Capital Incentive

Operational Cost Savings: \$67,000 (estimated utility cost savings relative to the baseline with reduced steam offsetting increased electricity)

Business Case: Simple payback of less than six (6) years taking incentives into account.

Benefits/Co-Benefits: New asset. Added cooling capacity. Improved climate resilience. Cost effective carbon reduction: <\$4,000 per tonne GHG reduction (good use of CNCP funding with comparable projects up to \$5,000/tCO₂e capital cost of carbon reduction). *Incremental Project Cost refers to the additional cost required to implement the low carbon solution over and above the bare minimum solution required to meet the needs and building code standards (in this case, above the cost of adding cooling without heat recovery).





Feature Initiative

Collaborative Approach Explores the Intersection of Healing Environments and Low Carbon Resilience

A small group of attendees from a November 2019 ASHRAE event were so impressed by Distinguished ASHRAE Lecturer Dr. Stephanie Taylor and her research that they organized for her to return to Vancouver for a healthcare specific audience. Dr. Taylor's research presents compelling evidence that highlights the importance of maintaining indoor relative humidity carefully between 40% and 60% to reduce the spread of infectious agents and to create a healing indoor environment.

This small group, included Alex Hutton, Energy Manager responsible for PHC's portfolio, saw the potential to explore how these important findings might intersect with our context of a declared Climate Emergency and the associated necessity to achieve low carbon climate resilience.

Dr. Taylor delivered a wealth of information within just 30 minutes, leaving 50 minutes for a facilitated breakout session and talk-back. The hypothesis behind the activity was that if we explore the potential at the intersection of healing environments and low carbon resilience, we will arrive at different and better solutions than exploring either in isolation, or exploring both through a purely risk management lens.

Each of the four groups was led by a facilitator through a contemplation and exploration of an optimistic future state in which we have responded appropriately as climate change has progressed. The future state imagines for example that our healthcare facilities being designed and operated to new standards defined by parameters that reflect the intersection of a healing, resilient and sustainable built environment (including carefully controlled indoor relative humidity). This would include taking a low carbon approach to humidity control.

"[The group] in Vancouver, BC organized one of the most forward thinking events I have ever experienced. They brought together health, regulatory, scientific, engineering and architecture professionals to brainstorm design approaches to integrate the goals of supporting occupant health while conserving carbon-based energy use. Bravo!" – Dr. Taylor



PHC's Energy Manager (Alex Hutton, Left) with Distinguished Lecturer Dr. Stephanie Taylor (Right)

Pathogen infectivity is high when RH < 40%

Greater aerosol transmission

Evasion from surface cleaning through resuspension

Figure 1: Slide from Dr. Taylor's presentation

The energy in the room was palpable and evidenced by the challenge of silencing the group discussions in order to reconvene for a brief talk-back. A wide variety of ideas, solutions, and new questions arose from the discussion.

These ideas are especially relevant as we prepare to response appropriately to our new reality, post COVID-19. As summarized in Figure 1, low relative humidity increases pathogen infectivity via several mechanisms.





Confirmation number: 00C5EEFD

Submitted date: 2020-07-01 09:01:58 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 <u>Carbon Neutral Government Regulation</u>.

Due to the COVID-19 pandemic, the following <u>Directive</u> 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) <u>website</u> 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	The final, signed version of the CNAR (or Small Emitters Form) must be submitted by email to: <u>Carbon.Neutral@gov.bc.ca</u>
June 30, 2020*	 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 <u>CNAR Survey</u> (optional for Small Emitters) must be completed and submitted online. *Deadline extended from May 29, 2020. All offset invoice payments must be submitted to CAS.
Sept 30, 2020*	Clean Government Reporting Tool (CGRT) Data Entry must be completed for the 2019 reporting year.

	*Deadline extended from April 30, 2020.
Oct 15, 2020*	Self-Certification checklist must be completed, signed and submitted by email to: <u>Carbon.Neutral@gov.bc.ca</u> . *Deadline extended from May 15, 2020.

^{*}See the <u>Carbon Neutral Government – Program Requirements website</u> 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:	
Alex Hutton	

Contact Email:

alex.hutton@phsa.ca

Organization Name:

Providence Health Care

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

Other - Please Specify:

Angie Woo - Climate Resilience and Adaptation Program Lead, Jacob Vu - Energy Coordinator, Marianne Dawson - Sustainability Consultant, Sarah Currie - Sustainability Consultant, Kelly Lim – Energy Specialist, Cathy MacDonald – Energy Specialist

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)

Providence Health Care (PHC) is developing a 3 year Strategic Energy Management Plan (SEMP), complete with details of our Energy & GHG use, reduction targets and planned actions to achieve these targets. Although this is a 3 year rolling plan, the SEMP will be reviewed and updated annually. Our work can be summarized within five main areas: optimizing our existing buildings; influencing new construction; behaviour change; systemic change; and innovation and demonstration.

Over the long term (6-10 years)

Our longer term strategy is currently to continue with the types of efforts described in the short term; however, we can anticipate that there may be changes in the priorities (such as increased focus on electrification) as well as the specific projects that result. We can also anticipate the specific projects may involve new and innovative technologies and strategies not currently available or ready for implementation.

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

We aim to complete several energy audits each year in order to continually update our portfolio wide knowledge of the best available opportunities to reduce energy consumption and carbon emissions.

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.

Each year the building retrofits implemented are chosen via a multifaceted decision making process that takes into account the most recent energy audit results, opportunities to build upon and synergize with other planned capital spending, and the opportunities with the best performance based on numerous key performance indicators, including cost per ton of carbon.

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

5% or less

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

5% or less

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

5% or less

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.)

5% or less

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

We aim to implement some form of recommissioning or real time energy management strategy at all major owned and operated site every 5 years and we leverage utility provider support for such programs.

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

10% or less

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-404a, HFC R-407c, HFC R-410a.

No

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

There are ongoing discussions within healthcare sector on the best process to develop and maintain a refrigerant gas inventory for major cooling equipment. A specific approach has not been developed yet for PHC.

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.

Not applicable

Other actions? Please describe briefly:

Other actions taken are outlined within the Carbon Neutral Action Report (CNAR) Overview as well as our annual Environmental Performance Accountability Report (EPAR), both of which are available at our BC GreenCare site by searching CNAR and EPAR respectively.

https://bcgreencare.ca

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)

Providence continues to provide electric vehicle charging stations at various sites including regular plug-ins.

Providence continues to partner with Provincial Health Services Authority and Vancouver Coastal Health to provide a shuttle service between sites.

Providence sites offer bike parking stalls to encourage and enable active transportation by bike.

Over the long term (6-10 years)

Continuation of medium-term actions.

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
0
If you purchased new gas/diesel vehicles, can you briefly explain why vehicles from the other categories were not chosen?
Not applicable
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?
9
1122
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?
8
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.)

Not aware of any at this time

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

Definitions:

0

- 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
- s)

 GVWR<3,900kg) Heavy duty vehicles (HDV) includes vehicles with a GVWR>3,900 kg (e.g. ¾ tonne pick-up truck, transport truck 	cks
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	
1	
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	

Natural Gas/propane
0
Gas/diesel
1
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
3
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 to encourage their colleagues to reduce paper use. There are 75 trained Green+Leaders within Vancouver Coastal Health.

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.