

Greater efficiency supports patient care.

IMPROVE FACILITY COMPLIANCE AND CAPACITY SHORTAGES TO LEVERAGE FUTURE WORK

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DESCRIPTION

Often, healthcare facility departments mistakenly believe that energy efficiency is an unnecessary distraction from mission critical problems. Many also believe that running a system wide-open will reduce the number of hot and cold calls and increase patient satisfaction. On the contrary, running a system at full capacity wastes energy, money, and degrades equipment and performance. An energy-efficient system is a high-performing system with minimal "pain points" that can save money, reduce compliance issues, and increase productivity.

PROJECT TALKING POINTS

- Solve re-occurring issues through energy conservation measures without using shortterm solutions that prolong inevitable equipment failure.
- Reactive maintenance strategies typically cost two to five times more than a preventive approach. Reducing reactive maintenance and improving energy efficiency will increase fulltime equivalent (FTE) resources for "wish-list" projects & improvements.
- Reoccurring issues often waste energy or create scenarios which lead to wasteful practices to get by in the short-term.
- Operating costs can be reduced significantly by employing energy efficiency strategies.

TRIPLE BOTTOM LINE BENEFITS

Cost Benefits: A proactive, energy efficiency-focused maintenance strategy can cost two to five times less than a reactive strategy. Freeing up additional equipment capacity may negate need for additional infrastructure.

Environmental Benefits: Energy efficiency reduces energy use, and the emissions associated with that energy use.

Societal Benefits: Spending less money on maintenance and reoccurring fixes allows for the redirection of funds to patient care.

PURCHASING CONSIDERATIONS



Perform a cost-benefit analysis when an issue is identified. Consider the time spent on temporary repairs versus a full fix. Ask the following questions:

- Is the unit due for replacement? Reference <u>ASHRAE equipment life tables</u>.
- What is the marginal cost difference between multiple "band-aid" fixes and a comprehensive repair?
- Does this same issue occur elsewhere in the building or is it an isolated incident?
- What is the maintenance history on this piece of equipment?
- Can bringing the equipment down from peak capacity negate the need for additional equipment?

HOW-TO

- 1. Assemble a team of stakeholders including the commissioning agent, facility maintenance staff, purchasing and controls technician.
- 2. Identify the pervasive issues via staff interviews. The following are common issues which may be resolved with energy efficiency measures:
 - a. AHU at capacity
 - b. OR humidity or temperature not compliant
 - c. Condensation on walls, windows, or diffuser
 - d. Chiller plant at capacity
- 3. Evaluate the system in question. Observe the spaces served by the equipment and examine trends on the Building Automation System. Look for easy fixes:
 - a. AHU at capacity
 - i. VAV box dampers fully open
 - ii. Leaking heat valves
 - iii. Sensor inaccuracy
 - b. OR humidity too high
 - i. Humidifier leaks
 - ii. Reheats overridden closed
 - c. Condensation on walls, windows, or diffusers
 - i. Negative building pressure
 - ii. Humidifiers leaking or locked open
- 4. Use BAS trends to identify when the issue began. Look for spikes in temperatures, pressures, overrides, etc.
- 5. Compare airflow setpoints to design conditions. Ensure setpoint overrides are released.
- 6. If the equipment is truly at capacity, look for opportunities to reduce load, including controls strategies.
 - a. Cut airflow minimum setpoints to non-occupied spaces such as closets and IT rooms
 - b. Look for opportunity to re-calculate minimum airflow requirements of spaces that have been re-assigned
- 7. Show improvements with building data and the energy savings associated with the reductions. Emphasize the additional savings in man-hours and avoided capital costs.
- 8. Identify other opportunities and their associated savings potentials.



9. Establish a preventive maintenance plan to monitor equipment and avoid reoccurrence of similar issues.

REGULATIONS, CODES AND STANDARDS, POLICIES

ANSI/ ASHRAE Standard 62.1- Ventilation for Acceptable Indoor Air Quality

ANSI/ ASHRAE/ ACCA Standard 180- <u>Standard Practice for Inspection and Maintenance of</u> <u>Commercial Building HVAC Systems</u>

ANSI/ ASHRAE/ ASHE Standard 170- Ventilation of Healthcare Facilities

ANSI/ ASHRAE/ ASHE Standard 189.3- <u>Design, Construction, and Operation of Sustainable</u> <u>High-Performance Health Care Facilities</u>

ANSI/ ASHRAE/ IES Standard 90.1- Energy Standard for Buildings Except Low-Rise Residential Buildings

CROSS REFERENCES

LEED v4. For BD + C: Healthcare

- Water Efficiency
 - Credit -Cooling Tower Water Use
 - Credit-Water Metering
- Energy and Atmosphere
 - Prerequisite Fundamental Commissioning and Verification
 - Prerequisite Building Level Energy Metering
 - Credit- Enhanced Commissioning
 - o Credit -Optimize Energy Performance
- Indoor Air Quality
 - Prerequisite Minimum Indoor Air Quality Performance
 - Credit -Indoor Air Quality Assessment
 - Credit- Thermal Comfort

LEED v4. For Operation & Maintenance: Existing Buildings

- Water Efficiency
 - Credit- Cooling Tower Water Use
 - Credit- Water Metering
- Energy and Atmosphere
 - Prerequisite- Energy Efficiency Best Management Practices
 - Prerequisite- Minimum Energy Performance
 - Prerequisite- Building-Level Energy Metering
 - Credit- Existing Building Commissioning- Analysis
 - o Credit- Existing Building Commissioning- Implementation
 - Credit- Ongoing Commissioning
 - Credit- Optimize Energy Performance



- Materials and Resources
 - Prerequisite-Facility Maintenance and Renovations Policy
- Indoor Environmental Quality
 - Credit- Thermal Comfort
 - Credit- Interior Lighting

RESOURCES

ASHE- Reducing Operational Costs through Energy Efficiency

ASHRAE- Equipment Life Expectancy Chart

ASHRAE- HVAC Design Manual for Hospitals and Clinics, 2nd Edition

ASHRAE- <u>The Advanced Energy Design Guide- 30% Savings for Small Hospitals and</u> <u>Healthcare Facilities</u>

ASHRAE- The Advanced Energy Design Guide- 50% Savings for Large Hospitals

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