

UCSF Advisory Committee on Sustainability Meeting Minutes

MU 244E and MH6400

10:30am – 12:00pm

September 21, 2016

Present: David Odato(chair), Lujain Al Saleh(fellow), Annemarie Donjacour, Lyandra Dias(coordinator), Gail Lee, Tom Newman, Eli Perszyk(speaker), Jodi Soboll(speaker), Geramye Teeter(fellow)

On conference call: Robby Barton(UCOP), Andrew Clark, Mahdavi Dandu, Seema Gandhi, Michael Grabe, Geoffrey Lin (for Bruce Lanyon), Janika McFeely (UCOP) , Patti Mitchell, Arianne Teherani

Agenda	Action Items	Person Responsible	Due Date
Introductions - David	<ul style="list-style-type: none"> • Welcome to new members and guests 		
UCOP Annual Report Highlights - Gail	<ul style="list-style-type: none"> • See attachments UCOP Annual Reports (campus and medical center) 		
Water Work Groups Update Eli	<ul style="list-style-type: none"> • See attached pdf Water Plan Water consumption trend surpassed UCOP goal. Medical center and campus combined likely to increase consumption because of planned new construction • Question: How are the gallons of water on campus weighted i.e. staff, students, etc. <ul style="list-style-type: none"> ○ 1st graph (slide 3) we had per person, 2nd graph facility usage • New housing construction is not projected in the graph. Other medical and campus construction projects are accounted for in graph. • Water utilities budget. <ul style="list-style-type: none"> ○ Water rates are increasing so investment in efficiency projects are increasing. Rate increase is ~6%/yr. If UCSF flat lines its consumption, the utility rate will increase. Audience remark: (Rate of ~6% is too conservative) ○ UCSF has funded a number of water efficiency project and implementing this year • UC Policy goal: Eliminate once through equipment cooling. High efficiency fixtures in buildings. Critical that we measure and verify savings. SkySpark is new software facilities is using. Sterilizers and other equipment are being metered. • Recycled water facility serving in Mission Bay campus is under evaluation <ul style="list-style-type: none"> ○ Question: How many sterilizers/autoclaves all together? 100. Instead of having potable water we would utilize recirculating system. 3-5 years to get all 100 replaced. Huge cost and pilot is just starting. Started a savings fund with the promise that as water bill decreases, it pays for future improvements as there is not an infinite budget. Medical center just phased out 22 sterilizers that were not used. ○ Question: Will these new sterilizers be individually metered so we know if they are turned on all the time? Not currently, but working with a vendor to complete this. • Opportunities: High efficiency lab equipment operating standards, shutting down equipment at night. Purified water study with Zebra fish facility that use purified water. • Question: What about clinical (medical center) aspect water infrastructure improvements? <ul style="list-style-type: none"> ○ No this is just for campus. At MB it's all high efficiency but we do not know what is happening at Parnassus/MZ MCs • Restroom fixtures upgrading for water efficiency for costs savings • Water infrastructure connecting to control systems to collect data. Develop a water quality program. Water lead level testing program in place. • District scale recycled water project – CCSF to set up a contract to share recycled water to MB bldgs. This water is not allowed at OSHPD facilities currently. This water would be used for all cooling towers, irrigation, dual-plumbed toilets and urinals and will offset MB potable water consumption and reduce water utility budget 		

Agenda	Action Items	Person Responsible	Due Date
	<ul style="list-style-type: none"> • Goal for all the task outlined: All equipment and fixtures high efficiency; Once through cooling; Water meters; Data analysis; Plumbing layout is on GIS system; Water quality testing program, District scale recycled water • UCSF Facilities Team has only one Water Coordinator and Energy Manager. They work closely with facilities and operations and engineering to complete projects. There is no one doing this for the med center. Med center is 1/3 campus water consumption. Savings is great and David will take it to the CEO of UCSF Health for review. 		
<p>Climate Change Workshop Update: Carbon Reduction Strategy and Discussion (Campus Only) Jodi</p>	<ul style="list-style-type: none"> • See attachment pdf Carbon Neutrality Plan • Campuses with cogeneration plants burn natural gas. CO2 emissions attributed to the entity at the point of combustion. • Carbon emissions 48% from of natural gas burned at PCUP • Anesthesia gas: Seema collaborates on decreasing anesthesia gas but not looking at nitrous oxide only halogenated gases. Implemented a system in APEX for data collection. UC Davis and UC Irvine are collaborating UCSF as a model. Preliminary data suggest using 3 fold amount of gas that is actually necessary. Data also serves as a feedback mechanism. Newer anesthesia machines have prompts that alert when using too much. Not available everywhere at UCSF med centers. Working to see if software can be tweaked in older machines for alerts. • These gases account for 3-4% in the bigger picture for carbon emission. • Graph is only reportable emissions (slide 7). Only Nitrous Oxide is a reportable emission. <ul style="list-style-type: none"> ○ Question: Why not working on NO2. No we are not (only looking at halogenated gases) but maybe later. School of Dentistry has the biggest use on this gas. ○ Question: Are anesthesia gases particularly potent GHGs? Most are 100x more potent. UCSF is inventor of desflurane, which has a very high GHG emissions value. Yale has banned some desflurane. ○ Question: Travel etc. is not included? it is in scope 3, we only look at scopes 1 & 2 for our TCR reporting ○ Question: Could we purchase energy from Clean Power SF? Yes • Graph with the plan (slide 7). Green and blue colored areas are scope 1 & 2. If we did nothing we would see increase in carbon emissions. 23 strategic energy partnership (SEP) which will bring down energy use. Going to begin acquiring electric from Clean Power SF. Solar installation. UCOP will convert to buying biogas instead natural gas. Dark blue colored area on graph is what we are actually doing. Can get down to 75K metric tons CO2 emissions. Going to get close to achieving goal of 1990 levels. Doing nothing will cost \$4.7 million/yr • Graph shows limited med center involvement (slide 7). Graph is mostly based on campus efforts. Not enough rooftop space to utilize enough solar to offset energy consumption. • Funding sources for current efforts appear to lie with Public Private Partnerships (PPP), utility budgets, & SEPs • Energy Efficiency is the top priority. • Phase 1 refer to slides with active carbon reduction efforts are ongoing. • Leadership needs to make Energy Efficiency efforts more visible. Responsibility should include Medical Center leadership. OSHPD financially restricts ability make capital improvements with reasonable payback. Inefficient operating rooms with HVAC settings etc (Seema working with a resident on this). OR is opportunity to inspire programs but more resources are needed. Multipronged approach is necessary. • Commitment to NetZero for new bldgs will be required for sustainable growth however, UCSFs growth could erode carbon neutrality efforts 		
<p>What more can we do Janika – UCOP perspective</p>	<ul style="list-style-type: none"> • Green leasing, efficiency space utilization in all buildings, support and funding for carbon reduction projects. • Janika: Sharing info on results is beneficial to all UCs. UCSF is ahead of others on a Carbon Action Plan. UCSC and UCSB are very close too. • Janika could share info on UCSC action plans when they are submitted in December. 		
<p>Last words - David</p>	<ul style="list-style-type: none"> • Great presentations and big welcome to all new folks and Gail will follow up with David on Med center 		
<p>Next Meeting</p>	<p>Dec 21 meeting to be moved a week earlier. Watch for the invitations.</p>		