Goal 4. Objective D: Improve HHS environmental, energy, and economic performance to promote sustainability

Conducting our activities in a sustainable manner will benefit Americans today as well as secure the health and well-being of future generations of Americans. In carrying out this objective, HHS will be a leader in promoting the co-benefits of sustainability to health and well-being. By conserving resources through sustainable purchasing operations, management of real property and recapitalization of building infrastructure and waste management positions, HHS can meet its mission while managing costs. Operational efficiencies, such as reductions in paper, water, and energy use, allow more resources to be devoted to mission-specific purposes.

HHS efforts to reduce greenhouse gas emissions will protect our environment and the public's health. Our operations produce greenhouse gases that are associated with negative health impacts resulting from alterations of our climate, ecosystems, food and water supplies, and other aspects of the physical environment. These gases and other air, water, and land contaminants are generated from energy production and use, employee travel and commuting, facility construction and maintenance, and mission activities, such as patient care and laboratory research.

The Senior Sustainability Officer in the Office of the Secretary helps ensure that HHS operations promote sustainability and comply with Executive Order 13514. However, meeting sustainability goals is a shared responsibility, underpinning the functions offices throughout HHS. It is also the responsibility of the individuals directly employed by HHS as well as its grantees and contractors. To integrate sustainability into the HHS mission HHS agencies and offices are using a variety of techniques, the following measures illustrate some of the ways the HHS will be tracking progress toward this objective. The Office of the Secretary led this Objective's assessment as a part of the Strategic Review.

Objective 4.D Table of Related Performance Measures

Reduce HHS fleet emissions (Lead Agency - ASA; Measure ID - 1.2)[98]

	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
Target	1,285 Gasoline Gallon Equivalent (GGE)	1,184 Gasoline Gallon Equivalent (GGE)	1,360 Gasoline Gallon Equivalent (GGE)	1,635 Gasoline Gallon Equivalent (GGE)	1,602 Gasoline Gallon Equivalent (GGE)	1,570 Gasoline Gallon Equivalent (GGE)
Result	1,360 Gasoline Gallon Equivalent (GGE)	1,184 Gasoline Gallon Equivalent (GGE)	1,086 Gasoline Gallon Equivalent (GGE)	1,603 Gasoline Gallon Equivalent (GGE)	Dec 31, 2016	Dec 31, 2017
Status	Target Not Met	Target Met	Target Exceeded	Target Exceeded	Pending	Pending

[98] This value excludes all fuel products used by HHS law enforcement, protective, emergency response or military tactical vehicles (if any), as well as any HHS international deployments not already excluded by the previous categories due to constraints of regulating and enforcing US standards abroad and the intent of the metric.

Ensure Power Management is enabled in 100% of HHS computers, laptops and monitors (Lead Agency - ASA; Measure ID - 1.3)

	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
Target	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Result	94.0%	90.0%	99.0%	95.0%	Dec 31, 2016	Dec 31, 2017
Status	Target Not Met but Improved	Target Not Met	Target Not Met but Improved	Target Not Met	Pending	Pending

Analysis of Results

HHS has surpassed the Executive Order 13514 and EISA 2007 petroleum-use reduction targets of reducing FY 2005 usage 20 percent by FY 2015. The FY 2005 baseline usage was 2.04 million gasoline gallon equivalent (GGE) and FY 2014 total usage was 1.36 million GGE, meeting the target. In general, the HHS fleet's overall cost has gone down more than 25 percent compared to its FY 2005 baseline. The fleet size, about 4,890 vehicles, has changed to meet evolving regulatory demands. The HHS fleet is among the top performers in the United States in the Executive fleet cadre for performance and compliance. HHS best practices include rapid deployment of high efficiency sedans, empirical studies focused on safety and operator behavior, and flexibility for internal customers in the United States and 35 countries worldwide. The FY 2015 value is preliminary - data collection for the year is not closed until January 15th and the analysis will not be final until the fleet emission report is released January 30th.

HHS IT contracts have been revised to include power-saving configuration requirements. HHS is measuring the percentage of eligible computers, laptops, and monitors with power management, including power-saving protocols in the standard configuration for employee workstations. Consistent application of power management will decrease the electricity use of HHS facilities. The target for this measure is for 100 percent of HHS eligible computers, laptops, and monitors to have power management. HHS set aggressive goals to move from the 2010 level of 32 percent of devices with power management enabled to 100 percent of devices with power management by 2013 and to maintain that level continuing through 2015. In 2011, 85 percent of eligible devices were reported in compliance across the department, while in 2012 this increased to 94 percent. The 2013 department-wide Electronic Stewardship Report showed that 90 percent of computers, laptops, and monitors were covered by power management. The 2014 Electronic Stewardship Report showed this value increased to 99 percent. For FY 2015 the percentage of PC and laptops with power management was 90.65 percent and for monitors it was 98.53 percent. This averages to approximately 95 percent, missing the target of 100 percent. Historically, there have been issues with data collection, verification, and validation, which likely has contributed to fluctuation in trends, particularly with regards to the PC and laptops. With the introduction of clearer definitions and criteria as well as better data collection methods, this metric should have less fluctuation in the future.

Plans for the Future

HHS will continue to support initiatives toward the achievement of the goals in the Executive Order 13693 and the Sustainability Performance Plan. HHS is replacing conventionally (petroleum based) powered vehicles with alternative fuel vehicles as possible, reducing the amount of HHS greenhouse gas emissions. ASA staff members plan to assist OASH in the development of a Climate Adaptation Planning Workshop to include mission-related programmatic planners, emergency coordinators, continuity of operations planners, occupant emergency planners, chief sustainability officers, and climate change experts. This first-of-its-kind workshop will discuss the contents of an adaptation plan, share tools to

conduct risk/vulnerability assessments, review component mission essential functions, and identify adaptation activities for each component to consider. ASA will also continue to explore policies and technologies that will help to expand telework, a primary strategy to reduce scope 3 emissions associated with commuting.

FY 2014 Strategic Review Objective Progress Update Summary

Please note that this section summarizes the result of the FY 2014 HHS Strategic Review process, limiting the scope of content to that available prior to spring of 2015. Due to this constraint, the following may not be the most current information available.

Conclusions: Progressing

Analysis: HHS has made progress improving environmental, energy, and economic performance to promote sustainability, as demonstrated by performance measures.

The performance measure focused on reducing HHS fleet emissions continued to exceed the target. In addition to reducing overall fleet emissions, HHS also reduced its vehicle inventory by an additional 8 percent overall, and also added two plug-in electric vehicles to the fleet while placing alternative fuel vehicles in locations where alternative fuel is more readily available. The performance measure focused on ensuring power management being enabled in 100 percent of HHS computers, laptops, and monitors improved from the previous measuring period. The performance measure focused on increasing the percent of employees on telework or on an alternate work schedule seemed to have a substantial decline with inconsistent trends over the past three years. However, further study revealed that the methodology behind the measurement was adjusted for this year. If prior years had been adjusted to use this methodology, this year would have shown a small but measureable increase over prior years.

Organizations within HHS also excelled in this area. The CMS Headquarters Complex achieved 64 percent waste diversion, exceeding an Executive Order that targeted 50 percent reduction. IHS has met its target for FY 2020 greenhouse gas emissions. During 2014, SAMHSA experienced a 12.6 percent decrease in annual electricity usage.

HHS will continue to explore opportunities to reduce the HHS footprint by consolidating office space, expanding telework, and seeking to recycle or reduce energy usage. A challenge for some HHS Divisions which are part of larger federal efforts to consolidate office space is that these efforts are sometimes delayed. These delays lead to additional costs in supporting multiple locations, and delay the reduction of the HHS footprint. Some HHS Divisions are challenged in adhering to the “Freeze the Footprint” mandate while also adding FTE resources to meet new mandates. There are sometimes challenges maintaining compatibility with applicable state and local recycling.

HHS will continue to explore policies and technologies that will help to expand telework, a primary strategy to reduce scope 3 emissions associated with commuting. In addition an HHS Division is currently pursuing a LEED Silver rating for new construction of its central office, to include a geothermal system, a photo-voltaic array, and a green rooftop reduce the use of carbon based energy and waste.