



Energy for Hospitals: Structured Force > Inertia

*Superior insights. Strategic
solutions. Brighter future.*

Your Reality



**Cost
Pressures**

**Aging
Infrastructure**

**Continuous
Critical
Operations**

**Hard
Constraints**

Your Aspirations



**Cost
Reductions**

**Enhanced
Infrastructure**

**Sustainable
Operations**

**Expanded
Options**

Intent + Governance = Results



Structured Force > Inertia



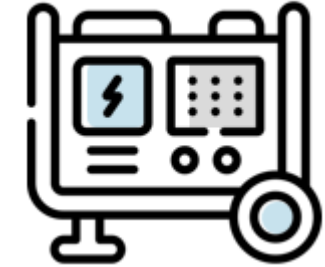
Rule 1:
Establish
Commitments



Rule 2:
Develop a
Framework



Rule 3:
Establish
Agency



Rule 4:
Ensure
Accountability



Rule 1: Establish Commitments

The source of force



1

Prime Mover

2

Reality Grounded

3

Authoritative

Operating principle

Make the commitment specific enough that action has a source



Rule 2: Develop a Framework

Where the rules live



1

Collect Decision Rules

2

Front-Run Objections

3

Aggregate Consensus

Operating principle

Commit to shared rules before projects becomes contested



Rule 3: Establish Agency

Empowering a prime mover



1

Clear Accountability

2

Capacity to Execute

3

Control of Resources

Operating principle

Give the accountable party enough authority to move the work



Rule 4: Ensure Accountability

Applying a reality test

1

Define Outcomes

2

Verify with Credibility

3

Report Transparently

Operating principle

Test the project against reality, not intention

Program to Execution

**Benchmark
&
Assessment**

**Project
Pipeline**

**Approval
Framework**

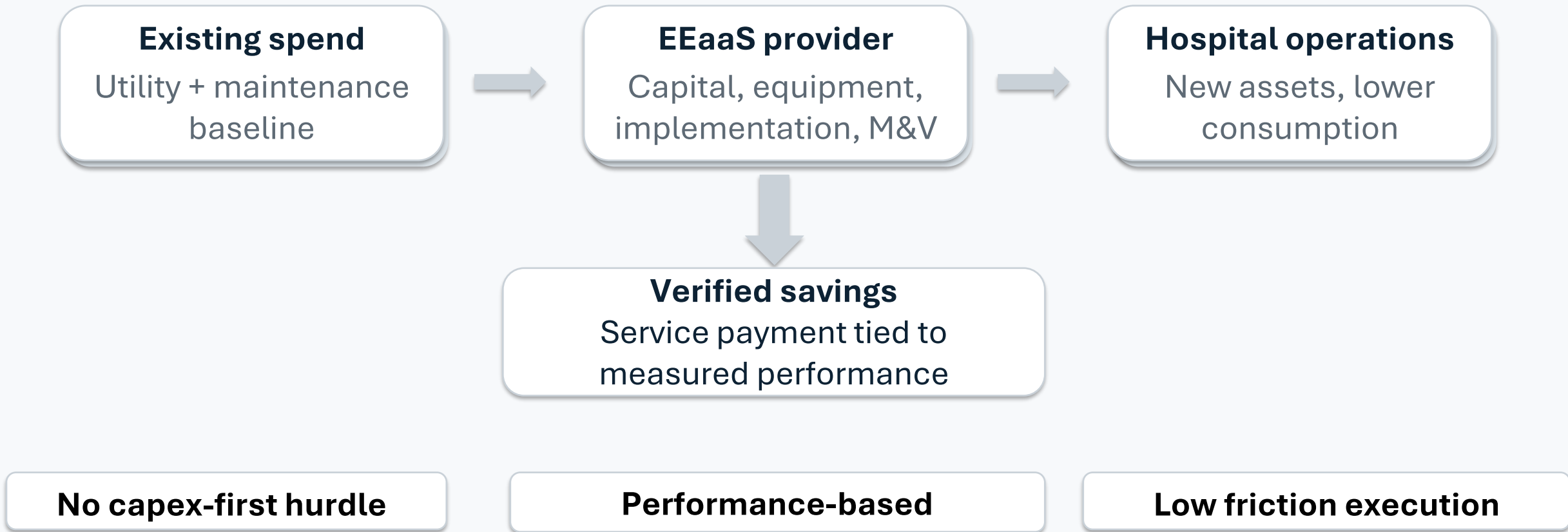
Execution

Performance

EEaaS: The Instrument



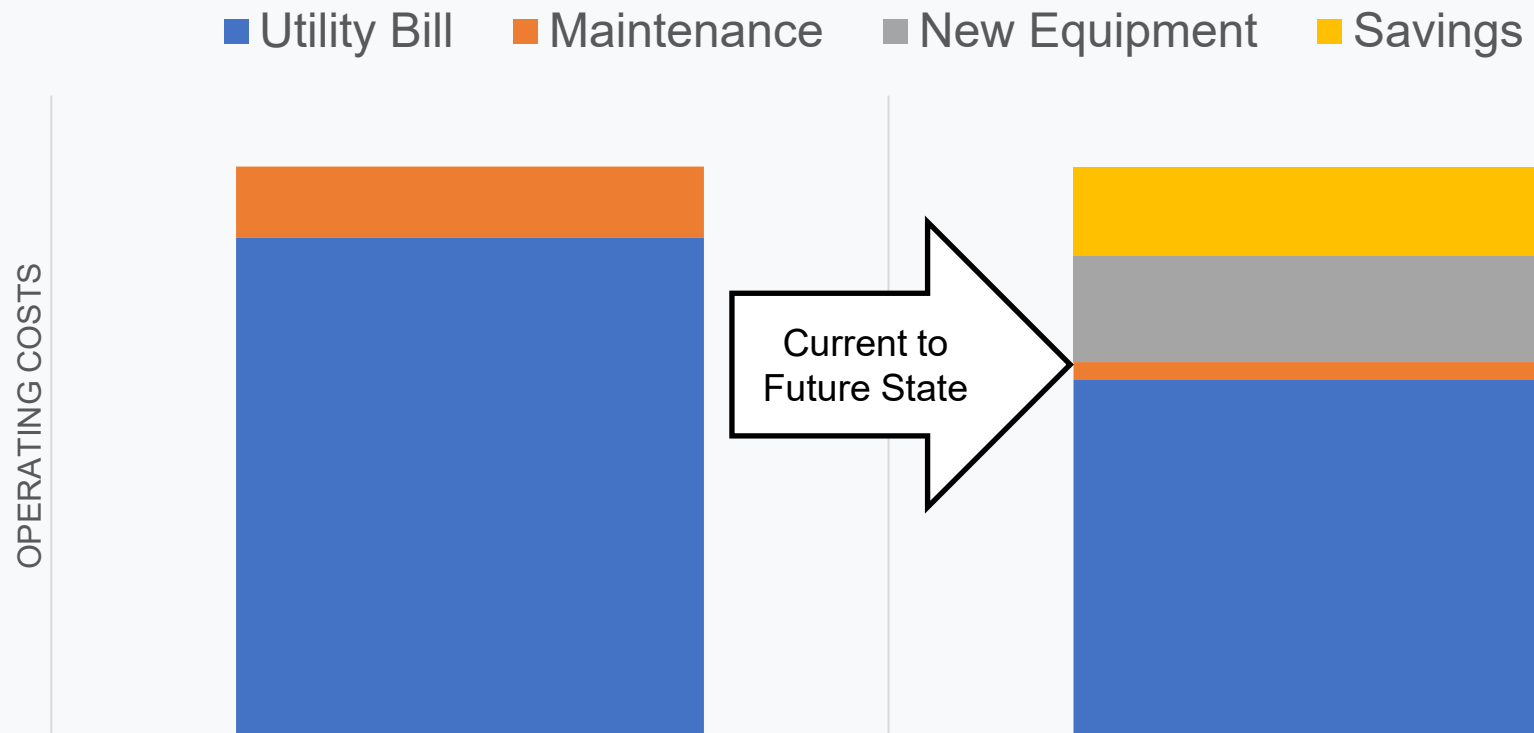
Energy Efficiency as a Service packages delivery, financing, and verified savings



EEaaS: The Instrument



Current Energy Spend → New Equipment + Savings



EE for Healthcare: What did we get?

**A language for
action**

**An operating
model**

**A practical
instrument**