

Dear Allan

Thank you for this opportunity to support your proposals

Some background to give you context

I lead a NHS collaboration to support the NHS Estate to achieve net zero, starting with the 209 biggest hospitals in the land (in terms of fossil fuel consumption) www.nhpower.net . The next group of NHS sites total over 1600 significant users

We are chaired by a member of the cross parliamentary geothermal team and Iheem the NHS Engineering Institution who set engineering and technical standards for the NHS

Our objective is to meet the statutory net zero targets for the NHS estate

There are 4 ways to net zero for the NHS estate (geothermal, green district energy, green fuel (mostly hydrogen) and electrification)

I wont bore you with the whys and wherefores, but

- Hydrogen offers the NHS a net zero solution that is the best way to net zero for many hospitals
- The reasons are lack of viable alternatives, costs of the alternatives per unit of heat, state of the electrical grid, or the cost of converting the engineering plant to a new energy source
- Hydrogen offers the opportunity for steam sites to retain steam, for hospitals to retain CHP (combined heat and power plant) and lowest conversion costs

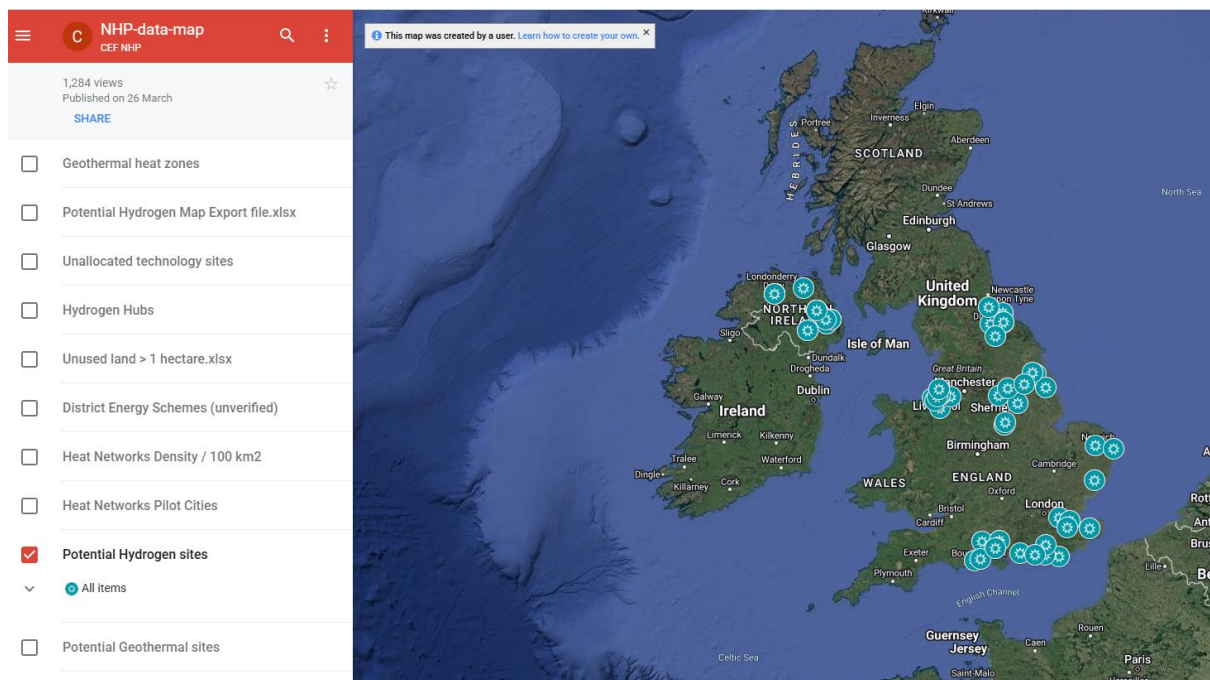
Our team has been working closely with Hynet, NGN and Cadent for 18 months now to make sure that hospitals are included in the hydrogen plans

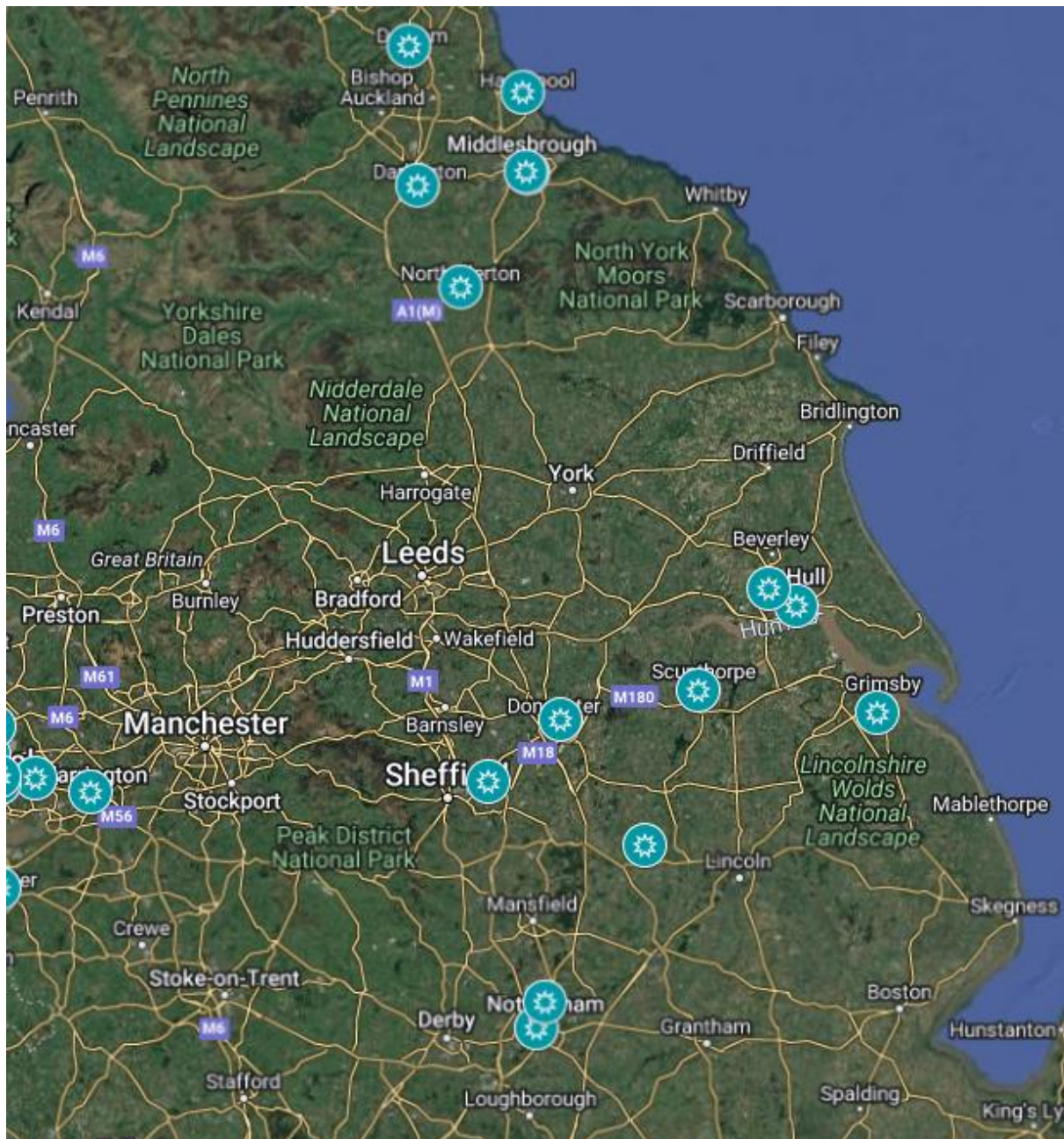
I very much welcome your "mindedness" for this study, as providing hydrogen will allow a number of sites in the NHS to reach net zero and allow them to participate in district energy schemes that will allow us to work with councils and other heat users to get them to net zero too.

By way of example, we have worked hard with [REDACTED] hospital to implement a district energy scheme, fuelled by waste wood, and part grant funded, to provide heat to the hospital and council, but the hospital part of project is stalled

because the energy plant conversion for the hospital will cost £20m that we cannot afford. Should your project make hydrogen available to the hospital under the hydrogen business model, we will not need to spend the £20m, or lose the site CHP plant, and we will be able to provide heat from the hospital to the other DE users, and reduce the use of waste wood combustion, which has its own pollution and respiratory implications. (*If you publish this section please redact the name of the hospital*)

Here is a map showing the hospitals that we are trying to get to net zero through Hydrogen, in the 1st instance (I am only showing the hospitals that Hynet, Cadent and NGN believe they can supply – there are very many additional sites that would take hydrogen were it to be available)





Here is a map of hospitals that have no easy route to net zero and where hydrogen would be very welcome (Maps exclude hospitals run by devolved Scottish and Welsh institutions)



I and our team would be very happy to work with your team and your shippers to deliver these project

Answering your questions

Q1, Do you agree with our Draft Determination not to provide funding for the WWU Hyline Cymru project FEED study?

We would prefer that there was a hydrogen solution in Wales, but bow to your judgement regarding the best way to achieve that

Q2, do you agree with our assessment of the Needs cases for the three East Coast FEED studies?

The NHS Trusts in this collaboration and being supported by the collaboration very much agree with your assessment of the Needs cases for the 3 East coast Feed studies, and we would in fact welcome the opportunity to support further Needs studies, especially for the hospitals in the last map shown above, that have no viable route to net zero other than electrification

We have less understanding around your remaining questions, but our hydrogen business cases (we have done nearly 150 strategic outline cases so far) are predicated on hydrogen being available near the existing gas supply points and subsidised to retain energy cost parity with the gas price at the time. Our reading of your remaining questions is that you are working in a way that will give us hydrogen on that basis, and based on that understanding we support your approach

Q3, do you agree with our proposed approach to protect consumer value by standardising our approach to funding in some areas?

We agree with your approach to standardise funding as we need a solution that we can roll out across many Trusts and hospitals and is consistent with our understanding above and our ability to use common financial models

Q4, Do you agree with our proposal to approve funding for the Cadent East Coast North project under the NZASP re-opener mechanism, and at the value proposed?

We agree with your proposal to approve funding for the Cadent East cost North project, and trust your judgement regarding value

Q5, Do you agree with our minded-to decision to approve funding for the NGN East Coast project under the NZASP re-opener mechanism, and at the value proposed?

We agree with your proposal to approve funding for the NGN East cost project, and trust your judgement regarding value

Q6, Do you agree with our minded-to decision to approve funding for the NGT PU: East Coast project under the NZASP re-opener mechanism, and at the value proposed?

We agree with your proposal to approve funding for the NGT PU: East cost project, and trust your judgement regarding value

Q7, Do you agree with our proposed deliverables for Cadent, NGN and NGT?

We do agree with your deliverables, but would like to draw your attention to the NHS statutory net zero timescales, which requires an 80% reduction in CO2 emissions by 2032, so we would like a firm set of timescales as the average NHS Trust conversion project takes 4 years to implement due to governance and approvals, and can only start when we have a commitment to supply

Q8, Do you agree with our proposed directions for Cadent, NGN and NGT?

We do agree with your proposed directions, but would like to draw your attention to the NHS statutory net zero timescales, which requires an 80% reduction in CO2 emissions by 2032, so we would like a firm set of timescales as the average NHS Trust conversion project takes 4 years to implement due to governance and approvals, and can only start when we have a commitment to supply

I would be happy to work with you and your team if there was a way that our combined efforts could make hydrogen available to as many NHS sites as possible

Yours

#hello my name is...

Clive Nattrass Programme manager NHPower

<https://nhpower.net/>

NHPOWER

Collaboration of NHS Trusts seeking to meet net Zero targets together