

Decarbonisation of Energy Infrastructure in Displacement Situations:

Technical Tips and Tools for Energy Systems

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HOMER Background

1992: Originally developed at NREL by Dr. Lilienthal

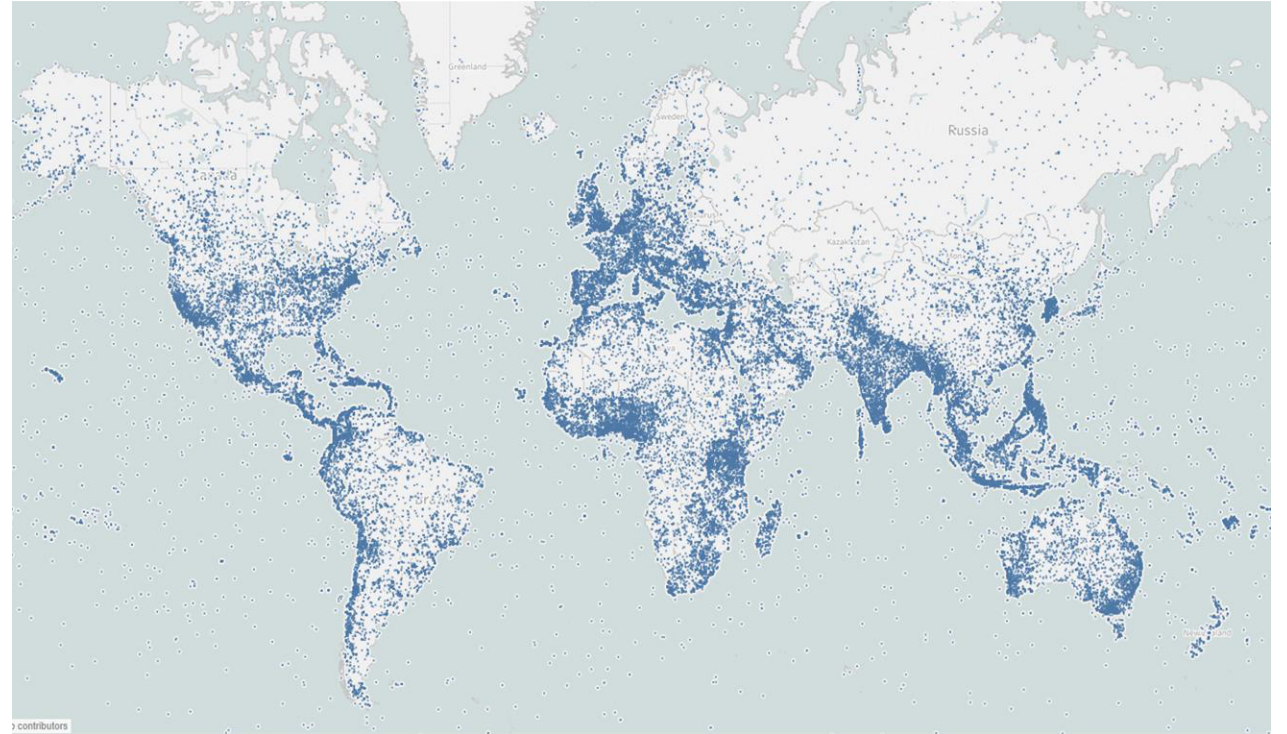
1997 & 2002: Major upgrades

2009: Licensed to HOMER Energy

2010: Powering Health v.1

2014: HOMER Pro

2019: Acquired by UL



De-facto Global Standard

- >250,000 people have used HOMER
- >100,000 opted-in to our network
- >90,000 projects modeled since 2014

www.homerenergy.com

<https://poweringhealth.homerenergy.com/>

- 2010: Funded by USAID as part of PEPFAR (President's Emergency Plan for AIDS Relief)
- 2020: Adapted by World Bank ESMAP for Covid Relief
- 2021: New project by World Bank ESMAP for broader energy needs in displacement situations
- Intended for non-engineers
- Lots of explanatory information
- Creates initial design & HOMER file for use in desktop version of HOMER Pro

PoweringHealth Webapp

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Founder, HOMER Energy
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Solar for Healthcare
August 18, 2021



Poweringhealth.homerenergy.com

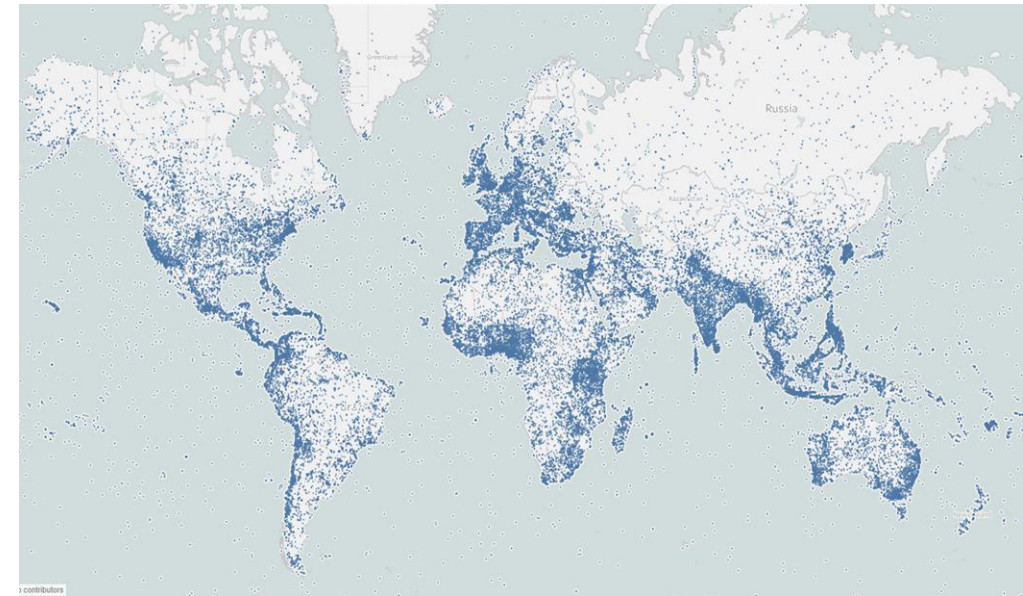
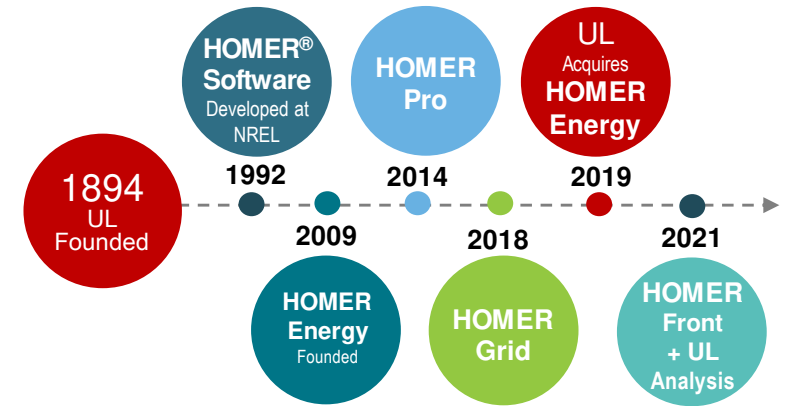
HOMER Energy by UL

Designing Hybrid Systems for almost 30 years

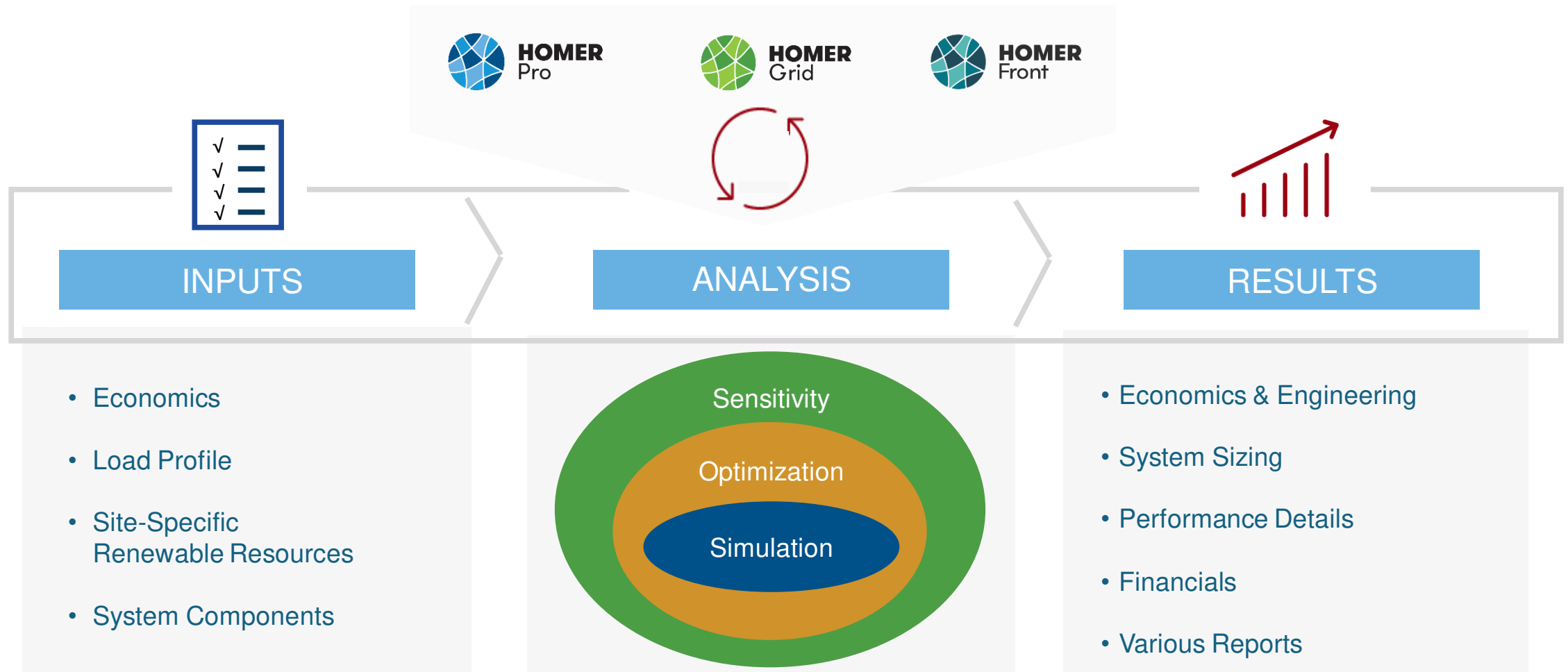
- 1992 – National Renewable Energy Lab creates Village Power Program
- 2009 – HOMER Energy spun off with exclusive license
- 2010 – USAID funds PoweringHealth 1.0
- 2019 – Acquired by UL (Underwriter’s Laboratory)
 - 14,000 staff in over 100 countries
- 2020 – World Bank funds PoweringHealth v. 2.0 for COVID relief

De-facto Global Standard

- >250,000 people have used HOMER
- >100,000 opted-in to our hybrid system design network
- >90,000 projects modeled since 2014



Microgrid/ DER optimization and design in HOMER®



Download at <https://www.homerenergy.com/products/pro-vs-grid.html> Free 21-day trial

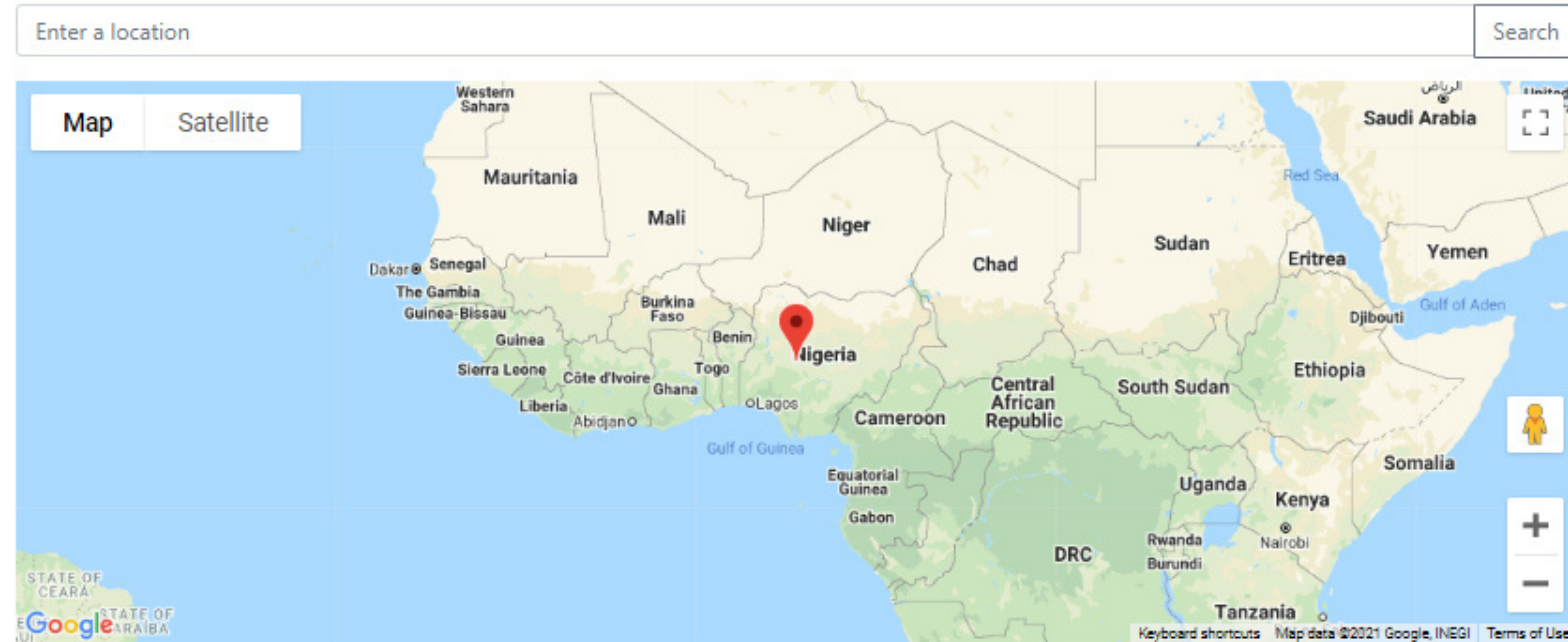
HOMER Powering Health Tool

▼ What is this tool for?

The HOMER Powering Health Tool is a free online model to create initial designs of electric power systems for health care facilities that have no other power supply or have grid electricity available for a predictable period of hours each day. The tool is intended for project managers, engineers and financiers in the energy industry to simplify the design process for such systems. The tool models optimal combinations of power supply options to meet electrical loads of a health facility at least cost based on the given inputs. It compares combinations of grid electricity (if available), batteries (lithium-ion or lead-acid), solar photovoltaics (PV), and generator sets fueled by diesel, gasoline or propane. The model runs entirely online and can be used an unlimited number of times with no need to sign in or download software.

> How to use the tool?

1) Location



- Easy to use
- Click on a map
- Lots of explanatory information
- Intended for non-engineers
- Creates initial design & HOMER file for use in desktop version of HOMER

District / Referral Hospital
145 beds

Rural Hospital
50 beds

Small Inpatient Clinic
14 beds

Rural Dispensary - No Inpatient
4 emergency beds

Equipment

- > EPI: Immunization
- > Outpatient Treatment
- > Obstetric Delivery
- > Maternity Ward
- > MCH
- > Neonatal Care
- > General Wards
- > Laboratory
- > Administration & Admissions
- > COVID Isolation Ward
- > COVID Basic Care Ward
- > Operating Theatre
- > Radiology
- > Intensive Care Unit
- > Mortuary
- > Staff
- > Water Supply
- > Water Heating
- ▼ Custom Equipment

+ Add

Total

Equipment

Equipment	Quantity	Nameplate Power (W)	Average Power (W)	Always on?	Daytime Hours on 7:00-17:59	Evening Hours on 18:00-21:59	Night Hours on 22:00-6:59	Total Energy (kW-h/day)
> EPI: Immunization								0.7
> Outpatient Treatment								0.5
> Obstetric Delivery								0.2
> Maternity Ward								1.4
> MCH								0.1
> Neonatal Care								0.0
> General Wards								1.0
> Laboratory								3.1
> Administration & Admissions								1.0
▼ COVID Isolation Ward								3.2
Lights LED (add to General Ward)	4	10	10	No	0	4	3	0.3
Exhaust fan (per COVID isolation cubicle)	2	40	40	Yes	11	4	9	1.9
Exhaust fan (staff change area)	1	40	40	Yes	11	4	9	1.0
▼ COVID Basic Care Ward								26.0
Lights LED (add to General Ward)	4	10	10	No	0	4	3	0.3
Exhaust fan (per COVID isolation cubicle)	2	40	40	Yes	11	4	9	1.9
Oxygen Concentrator (50% of beds)	1	350	350	Yes	11	4	9	8.4
BiPAP respirator (50% of beds)	3	80	80	Yes	11	4	9	5.8
CPAP respirator (50% of beds)	3	80	80	Yes	11	4	9	5.8
Pulse Oximeter *(rechargeable)	2	20	5	No	0	0	8	0.1
Infusion pump	2	50	50	Yes	11	4	9	2.4
EKG/ EGC (*potable rechargeable)	2	30	30	No	0	0	8	0.5
Exhaust fan (staff change area)	1	40	40	Yes	11	4	9	1.0

Outputs

Least cost system has generator

- Only runs for 212 hours/year

System without generator

- Almost twice as large

Generator only system

- Over 3 times more expensive

List of Suggested Configurations

PV (kW)	Generator (kW)	Grid (kW)	Storage (kW-h)	Converter (kW)	Initial Capital (\$)	Total Net Present Cost (\$)	Operating Cost (\$/yr)	COE (\$/kWh)	Fuel (L/yr)	Generator (hrs/yr)
Configuration: Genset / PV / Storage										
6	5	—	14	3	20,024	27,056	401	0.305	227	212
Configuration: PV / Storage										
14	—	—	24	4	33,387	38,748	306	0.437	0	0
Configuration: Genset / Storage										
—	5	—	5	3	9,642	49,829	2,293	0.561	1,745	1,360
Configuration: Genset										
—	5	—	—	—	5,519	98,726	5,318	1.112	4,289	7,309

Inputs Summary

See the [HOMER inputs report](#) for this simulation.

Save the HOMER Output File

Download the [HOMER Pro output file \(.homer\)](#) for this simulation (for use with the HOMER Pro desktop application only).

Conclusion

Very many non-engineers need to understand the basics of solar power systems

- Approximate sizing and costs

Poweringhealth is a simple app that gets the process started

- Creates a HOMER file that can be fine-tuned in HOMER Pro

Solar + storage is the most sustainable source for rural healthcare

Diesel generators

- Not sustainable, if used by themselves
- Can be useful – **if used sparingly, just as backup**