

Assessing progress in adapting to climate change - Northern Ireland 2023

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UK Climate Change Committee

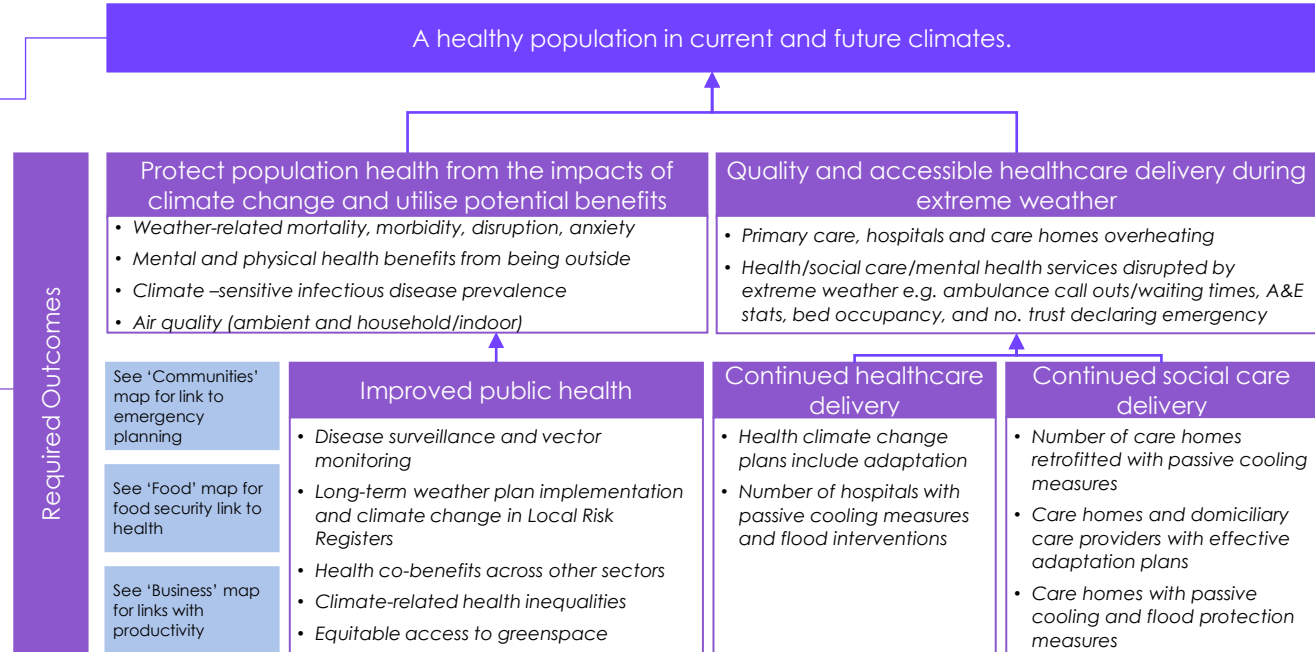
1. Assessment framework

An evolution of the CCC progress monitoring framework

We use a 'monitoring map' within each chapter to structure our assessment of progress around. The can all be found online for each adaptation area.

Goal: These are overarching vision statements for each area which describe what being well-adapted to climate change looks like.

Required Outcomes: These outcomes break down the goal into manageable domains that may often also align with existing policy areas. Outcomes can be used for monitoring progress towards achieving the overarching goals.



1. Assessment framework

Enablers: Enablers vary for each system, but include themes such as funding & investment, research, and engagement & education.

Policies and plans. We identify key roles and milestones for public policy and planning to deliver the climate resilience outcomes and to put in the place the necessary enablers.

Contextual factors. We also highlight factors that are largely (but often not entirely) independent of Government policy, but important for building climate resilience.

Enablers

Governance

- Cross-sectoral requirements for health and social care facilities
- Coordination and leadership for public health action on adaptation

Funding and investment

- Public and private funding to adapt health and care settings
- Public funding for disease surveillance and environmental monitoring
- Provision of local greenspace

Engagement & education

- Training of health workers about risks, benefits of adaptation and awareness of actions in weather/climate plans
- Risk communication about health risks from extreme weather, inc. public awareness of impacts on health
- Education about ticks and infectious disease risks

Data and monitoring

- Monitoring of overheating, flooding
- Surveillance of climate-sensitive infectious diseases
- Environmental public health tracking

Skills

- Certified installers of adaptation measures
- Public health professionals able to plan for and respond to events

Research

- Costs of extreme weather to the health system
- Interventions to reduce overheating
- Interactions between heat and air pollution
- Horizon scanning for emerging diseases

Policies

Financial instruments

- Long-term funding to adapt hospitals and care homes
- Public funding for vector and disease surveillance

Legislation, regulations and standards

- Intersectoral policies for action in care homes and hospitals
- Regulations for new and existing healthcare facilities
- Integrated surveillance of animal, plant and human diseases

Information and reporting

- Adaptation planning
- Guidance (Heat, flooding, tick avoidance, spending time outdoors safely)
- Long-term weather plan actions
- Response to climate-sensitive disease outbreaks

Contextual factors

Vulnerability

- Deprivation level
- Age of population (old/ young)
- Underlying health conditions
- Inability to adapt own behaviour/environment
- Social isolation
- Housing and built environment

Exposure

- Location of hospitals and care homes (e.g. at flood risk)
- Levels of resilience in homes and health/social care buildings
- Ambient temperature/urban heat islands
- Access to local greenspace

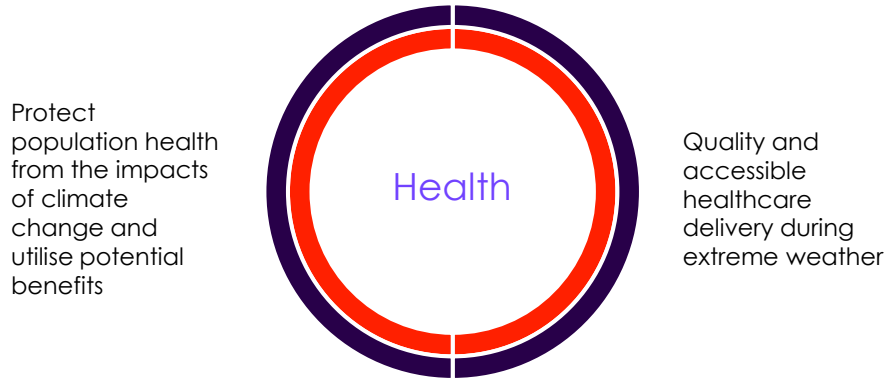
Hazard

- Length and intensity of heatwave events
- Severity of flooding incidents
- Climate-sensitive infectious disease risks
- Air quality

2. Assessment findings

Northern Ireland - Health

Score



Delivery and implementation (outer)



Policies and plans (inner)



Chapter summary

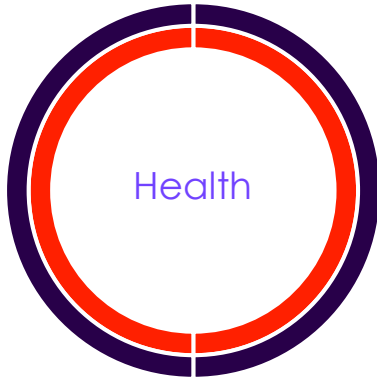
- There has been a particular lack of adaptation progress in relation to both population health and the health and social care system in Northern Ireland. Limited disease surveillance and a regional severe weather plan are in place, but only one action on health was included in NICCAP2, and arm's length bodies like the Public Health Agency and Health and Social Care Trusts have no clear policy direction on how best to address the impacts of climate change on health.
- There are no health plans or strategies which consider climate change impacts on delivery of health and social care.
- At the time of writing, environmental issues in the Department of Health have also been put on a formal policy pause due to Covid-19.

2. Assessment findings

Northern Ireland - Health

Score

Protect population health from the impacts of climate change and utilise potential benefits



Delivery and implementation (outer)



Policies and plans (inner)



Outcome summary

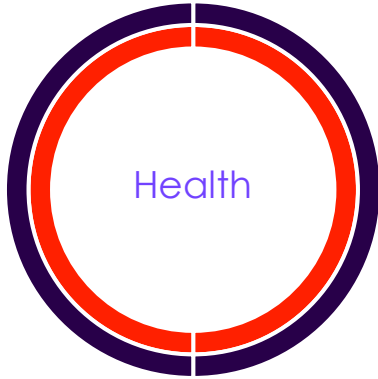
Population Health

- The Winter Mortality Index (WMI) shows deaths in winter months, but no equivalent dataset for summer/heat-related mortality. A 2022 survey of 1000 people found 32% have personal experience or know someone who experiences serious health impacts from heatwaves.
- 43 per cent of households in Northern Ireland have accessible natural space within 400 metres, comparable to GB.
- Unavailable indicators included: **Regular monitoring of the health effects of increased extremes** (e.g. heat impacts on outdoor workers, programme of monitoring on mental health impacts.); **infectious disease prevalence; long-term programme of monitoring for indoor air quality in NI.**
- A clear strategy for climate and population health does not exist. Department of Health (DoH) received feedback from arm's length bodies that a specific Health Sustainability Strategy would help them prioritise health-specific actions. The Public Health Agency and the HSC Trusts have no clear direction from Department of Health in NI to take more action on climate issues.
- There is currently no heatwave plan, but heat is included in the regional severe weather plan. Met Office have produced Heat Vulnerability Index for Belfast.
- The Public Health Agency (PHA) and DAERA collaborate with the UK Health Security Agency (UKHSA) on disease surveillance.
- Data is available on air pollution exposure in NI.
- The voluntary sector is taking a lead in developing baseline information on population health.

2. Assessment findings

Northern Ireland - Health

Score



Quality and accessible healthcare delivery during extreme weather

Delivery and implementation (outer)



Policies and plans (inner)



Outcome summary

Health and Social Care

- Data on overheating in primary care, hospitals and care homes is not available.
- Disruption to health and social care services by heatwaves or flooding is unknown. This could include A&E statistics, hospital admissions, or ambulance callouts at times of weather extremes.
- Further unavailable indicators include:
 - Health and social care facilities with passive cooling measures;
 - Adaptation plans, heat management plans or flood protection measures.
- Data gaps and a lack of clear policy drivers indicate that an adaptation plan is needed to progress work across the Health and Social care system. Environmental issues should be removed from a formal policy pause as soon as possible.
- Clear direction is needed on increased coordination and capacity between DoH and other agencies such as the HSC Trusts.
- There are no regulations for avoiding overheating in new or refurbished healthcare buildings and no financial instruments for adapting H&SC premises. Reporting of instances of overheating in health and social care (HSC) settings in Northern Ireland is ad-hoc.
- It is likely that the HSC Trusts will soon have to report on climate risks and risk management as part of the new Public Body Reporting requirement under the Climate Change Act (NI) 2022.

Recommendations

Health

Primary responsibility	Recommendation	Timing
DoH	Develop an NI Health Adaptation Plan as a standalone or part of a wider health sustainability strategy, which establishes a baseline for priority climate adaptation indicators and risks for both population health and the Health and Social care. This should use a cross sectoral approach to include collaboration with wider structures e.g. community planning, emergency response, housing and health adaptation plans in ROI.	2025
DoH	DoH should provide clear strategic direction on coordination roles, ownership, training, resources and required deliverables for climate adaptation actions to arm's length bodies and agencies including Public Health Agency and HSC Trusts.	2025
DoH, DoF	Consider the need for long-term, protected funding to adapt hospitals, care homes and other healthcare buildings to the impacts of climate change.	From 2023
DoH	Undertake a regular health vulnerability and adaptation assessment across the department and with arm's length bodies and agencies, including gathering information about impacts on health and social care which are caused by weather extremes.	2025
DoH	Work with other departments to collate research into the risk of overheating occurring in various building types which could allow adaptation actions to be planned for buildings most susceptible to overheating occurring in the future.	2024
DoH	Work with relevant health partners in Republic of Ireland to support transboundary collaboration and knowledge exchange between public health professionals and policymakers on the island of Ireland.	2023

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