Climate-ADAPT use case 16 — Health sector in England

Using Climate-ADAPT information to create a risk and adaptation plan for the health sector in England

Climate-ADAPT features used: database; EU policy; countries, regions, cities (country pages); knowledge (research projects), events

Sector: health
Governance level: national
Biogeographical region: Atlantic
Policy stage: policy development

The challenge

The Sustainable Development Unit (SDU) for the health and social care system in England is funded by Public Health England (PHE) (71) and National Health Service England (NHSE) (72). The SDU is tasked by PHE and NHSE with embedding the principles of sustainable development, carbon reduction and adaptation across the health and social care system and ensuring that this supports societal approaches to the wider determinants of health and health protection. One of the tasks of the SDU is to support embedding and coordination of the work to address challenges related to the impacts of climate change on hospitals and other health facilities, ambulance services and the wider supply chain. Public sector organisations are required to report on their preparation and planning for adaptation under the Second Adaptation Reporting Power (2nd ARP) (73), part of the Climate Change Act 2008. In response to the 2nd ARP, the SDU was tasked by PHE and NHSE with coordinating the cross-sector input and writing a sectoral adaptation plan for the whole of the health sector. The aim was to outline the risks from climate change to the public’s health and to service delivery and the health sector’s responses to these risks, as well as to determine whether or not adaptation plans were in place and provide recommendations for the next five years to increase the sector’s resilience to climate change. This resulted in the Adaptation report for the healthcare system 2015 (74), which provided evidence to inform the policy process, indicators to monitor progress, a sector strategy that set the future vision and recommendations that formed the beginning of a sector plan.

The health and care system in the UK comprises providing care, commissioning care, improving public health, empowering people and local communities, supporting the health and care system, education and training, and regulation, monitoring and safeguarding of patients’ interests; these services are provided at a range of levels from individual to national. The report covered the following parts of the English health system: overarching system level, national bodies, providers (chiefly the National Health Service), ambulance trusts, clinical commissioning groups, and community and public health (Health and Wellbeing Boards).

The approach

The ARP2 report was co-funded by PHE and NHSE, with both sponsors contributing equally, and the SDU

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(71) PHE is an operationally autonomous executive agency of the Department of Health, which exists to protect and improve the nation’s health and well-being, and to reduce health inequalities.
(72) NHSE is the national commissioning board for health services in England.
produced it on behalf of the whole group. The report was produced by a cross-system working group (the Department of Health, NHSE and PHE). The group was aware of the wealth of information on climate scenarios and risk assessment that was available in the UK (from UK Climate Impacts Programme (UKCIP) work until 2012, the Climate Ready Support Service from the Environment Agency 2012-2015 and the UK government, including the 2012 Climate Change Risk Assessment (CCRA) (75)). However, there was benefit in finding out about what the rest of Europe was doing, particularly with a view to understanding the approaches of other European countries to adaptation in the health sector and reflecting on the European state of play in terms of knowledge and adaption responses. To find this information, members of the working group used the individual European country pages to find out what each country was doing in its health sector. They also looked at other countries’ approaches by searching the database using the keywords function and used the research projects pages, knowledge tab and case studies to search for indicators and guidance. Finally, they used the EU policy pages to keep up to date with EU adaptation policy. Overall, this gave them a good understanding of the scope of knowledge and policy in this area; they discovered that, at the time (2013-2014), there were only a few relevant studies because this was a specialist area. In addition to Climate-ADAPT, they also had help from the World Health Organization and Ricardo-AEA.

PHE submitted the final ARP report to the Climate-ADAPT database and also submitted the report Health effects of climate change in the UK (2012) (76). PHE submitted information to provide increased exposure for this work outside of the UK, to increase opportunities for collaboration and to expand and share knowledge.

More generally, PHE used the ‘News’ and ‘Events’ pages on the Climate-ADAPT home page to keep informed about upcoming events on adaptation to climate change in the EU. This information enabled them to participate in several sector-related events (e.g. European Commission meetings in Brussels) and stakeholder participation workshops on EU-funded research projects (e.g. Bottom-up Climate Adaptation Strategies towards a Sustainable Europe (BASE)).

Future plans

The SDU will be working with PHE, NHSE and cross-sector partners to produce the next ARP. PHE have been heavily involved with the CCRA in preparation for this. The CCRA work has been shared and developed through a national adaptation planning group for health attended by key national agencies from across the system, including the Department of Health, the Department for Environment, Food and Rural Affairs, PHE, NHSE and the SDU.

Figure A16 ‘Sustainable, Resilient, Healthy People & Places’

A sustainable approach

Helping to create sustainable, resilient, healthy places and people needs to be approached both by enabling the positives and by retaining the negatives allowing release cycles to constantly improve outcomes.


Source: © Public Health England Sustainable Development Unit.

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