

Department of Health
Block 1, Miesian Plaza
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22/09/2025

EPAC Reference: EPAC-2725

Re: Public Consultation on the Second Health Climate Change Sectoral Adaptation Plan (2025-2030)

Dear Sir/Madam,

The Environmental Protection Agency (EPA) welcomes the opportunity to respond to this consultation on the draft Health Climate Change Sectoral Adaptation Plan. The development and implementation of robust sectoral climate adaptation plans is critical to national resilience. These plans are particularly important in the context of a changing climate, where the frequency, intensity, and unpredictability of extreme weather events are also increasing, as highlighted in Ireland's National Climate Change Risk Assessment (NCCRA) recently published by the EPA.

Overall, the Plan demonstrates reasonable alignment with the National Adaptation Framework and the Sectoral Planning Guidelines for Climate Change Adaptation 2024, involving a thorough and well-integrated process.

In the context of increasing climate risks, adaptation should be embedded across all levels of health management policy, capital investment frameworks, and procurement processes. The EPA recommends that climate resilience be a core criterion in project appraisal and funding decisions, particularly for long-lived infrastructure. The Plan should also be commended for identifying key research gaps and beginning to integrate climate considerations into existing processes and standards, which provides a strong foundation for further embedding resilience across the sector.

Key EPA Recommendations

While the EPA recognises many positive aspects of the Plan, we have identified six key areas that we recommend should be strengthened in finalising the Plan. These are:

1. A more detailed risk assessment should be undertaken;

2. The National Adaptation Framework principles of just resilience, nature-based solutions, and maladaptation should be well addressed;
3. Use of impact chains to illustrate cascading risks should be considered;
4. Stakeholder engagement during the planning phase to date should be highlighted and integrated;
5. Outcome indicators and targets should be put in place to track the implementation of actions and resilience outcomes;
6. An objective to Climate-Proof health infrastructure and assets is recommended.

These points are further developed below.

1. Risk Assessment

The NCCRA Technical Guidance for Sectoral Risk Assessments, published by the EPA in 2024, was designed to support sectors in developing more detailed, sector-specific risk assessments that build on the NCCRA. There is clear scope for the Plan to include a more granular evaluation of climate impacts under reference trajectories such as RCP 4.5 and RCP 8.5. This should involve categorising risk types, identifying vulnerable populations, and addressing cascading and systemic risks. While the Plan frequently references the NCCRA, it does not include a structured risk assessment based on its findings. For example, extreme wind is identified as a high-priority risk, but the Plan offers limited analysis, no contingency measures, and lacks asset-level exposure data. Without consistent, forward-looking assessments aligned with climate and population projections, the health sector cannot effectively prioritise adaptation or plan for long-lived infrastructure. The Technical Guidance should be used to structure a comprehensive risk assessment that supports evidence-based decision-making.

2. Further consideration of National Adaptation Framework principles

The EPA recommends a more in-depth and systematic consideration in the Plan of the key National Adaptation Framework principles of Just Resilience, Nature-based Solutions (NbS) and Maladaptation.

Just Resilience

While social resilience and vulnerability are referenced throughout the Plan, the concept of 'just resilience' would benefit from further inclusion, involving a clear definition of just resilience ideally aligned with NAF and IPCC terminology. To ensure consistency across sectors, actions related to just resilience should be developed and implemented in an integrated manner with other sectors, to ensure that just resilience is being considered consistently across all sectors with no gaps. While vulnerable populations are mentioned, the EPA suggests that the Plan should explore social vulnerability in greater depth, identifying who the vulnerable groups are, why they are vulnerable, and how proposed resilience measures will reduce vulnerability and enhance just resilience.

Nature-based Solutions

The health sector faces growing risks from climate-related hazards such as extreme winds, flooding, and heatwaves, which necessitates a proactive approach to climate-proofing critical infrastructure. As stated in the plan, Nature-based Solutions (NbS) offer a promising way to reduce these risks while supporting public health and wellbeing. Although the draft Plan mentions NbS, it does not contain clear examples for their application within the health sector. To strengthen the Plan, the EPA recommends specifying relevant NbS

such as urban greening and tree planting and clearly explaining their health benefits. For example, shaded green spaces with mature trees can provide relief from heat stress during heatwaves, reduce building temperatures, and offer therapeutic environments that support patient recovery and reduce stress. These examples could be incorporated into relevant policy documents, strategic frameworks, or sectoral adaptation plans, particularly those guiding health infrastructure or climate resilience. However, in dense urban settings where tree planting may be limited, other NbS should also be considered. These include green roofs and living walls to reduce building heat, climate-resilient landscaping to manage stormwater and reduce localised flooding, and nature-inclusive design in new builds or renovations. Including such examples would help integrate NbS more strategically into health adaptation planning and illustrate their relevance across a range of healthcare settings.

Maladaptation

While the draft Plan acknowledges the concept of maladaptation, the EPA recommends a more thorough examination of how health adaptation measures, particularly those related to climate resilience could inadvertently lead to maladaptive outcomes. To support clarity, the EPA also suggests including a definition of maladaptation in the glossary and drawing on sources such as the IPCC and the National Adaptation Framework.

3. Impact chains

Impact chains are a key tool for visualising and assessing how climate risks interact across systems, helping to clarify interdependencies and support integrated adaptation planning. The Plan provides a useful overview of cascading risks affecting the health sector, but it does not apply impact chains as recommended in the EPA's Technical Guidance for Sectoral Adaptation Plans. Their use is especially important in the health sector, where climate impacts often cascade in from other areas. For example, a severe storm could damage energy infrastructure, leading to power outages that disrupt hospital operations, delay emergency care, and compromise cold storage for medications. At the same time, increased patient demand during such events can strain already limited resources. Mapping these chains would help identify pressure points, prioritise adaptation actions, and ensure continuity of care during climate-related disruptions.

4. Stakeholder engagement in the planning phase

The Plan includes several welcome actions focused on stakeholder engagement and communication, including a proposed communication campaign. The EPA recommends that the Plan should be explicit on the stakeholder engagement undertaken to date to inform the Plan, including engagement undertaken with the health sector and especially service providers (e.g. the HSE). Consideration should be given to further stakeholder engagement in finalising the Plan to ensure transparency and to strengthen the credibility and inclusiveness of the adaptation planning process. In this context, there may be merit in engaging with work being undertaken under Section 2.6.3 of the HSE Climate Action Strategy 2023–2050.

5. Indicators

The Plan applies SMART principles and includes a commitment to developing indicators, which is welcome. The EPA recommends including clear indicators that are linked to measurable resilience outcomes that enable the tracking of progress in building resilience. This would help assess long-term impact, support adaptive management, and improve alignment with national and EU reporting frameworks. In relation to nature-based solutions, for example, suitable outcome indicators could be a measurable reduction in

surface temperatures or a reduction in indoor overheating incidents in healthcare facilities following the implementation of tree planting, green roofs, or climate-resilient landscaping.

6. Climate proof objective

While the Plan includes actions that support resilience planning and capacity building, it does not set out a clear objective to climate-proof health infrastructure and assets that are directly managed by the health sector. Long-term resilience depends on targeted adaptation measures that protect essential services and infrastructure from both immediate and long-term risks. These include energy and water system dependencies, coastal vulnerabilities, and disruptions to healthcare delivery. The EPA suggests that the Plan should introduce specific actions with timelines, aligned with NCCRA findings, and extend planning to at least 2050, and ideally to 2100. Without this, the health sector remains exposed to risks that could be avoided through proactive planning.

The NCCRA identifies risks such as overheating in buildings, energy outages, and knock-on effects from other sectors, but the draft Plan does not currently include the steps planned or being taken to address these. For example, more frequent heatwaves could overwhelm hospital cooling systems and put vulnerable groups at risk, while power failures could delay urgent care. In finalising the Plan, the EPA strongly recommends that these risks are further investigated and reflected in targeted actions that help ensure health services can continue to operate safely and effectively in a changing climate.

SEA Screening

As soon as practicable after making your determination as to whether SEA is required or not, you should make a copy of your decision, including, if appropriate, the reasons for not requiring an environmental assessment, available for public inspection in your offices and on your website. You should also send a copy of your determination to the relevant environmental authorities consulted.

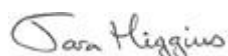
Where changes to the Plan are made prior to finalisation, or where modifications to the Plan are proposed following its adoption, these should be screened for potential for likely significant effects in accordance with the criteria set out in Schedule 1 of the SEA Regulations (S.I. No. 435 of 2004, as amended), as appropriate.

Further Research

The EPA notes that a number of key research gaps have been identified in the draft Plan. The EPA would welcome engagement with your Department on the potential to address some of the identified research gaps through the [EPA's Fast Track to Policy](#) research funding programme, which provides for rapid turn-around evidence reviews to address urgent policy questions.

The EPA looks forward to continuing to work with your Department as part of the Sectoral Adaptation Planning process and we are available to discuss any aspect of this submission.

Yours sincerely,



Dr Tara Higgins
Programme Manager