

Australian Government

Department of Health and Aged Care

Ministerial Submission - Standard MS22-000843

Version (1)

Date sent to MO: 18 July 2022

Minister Butler To:

Assistant Minister Kearney cc:

Subject: HEALTH IMPACTS OF CLIMATE CHANGE - PRIORITY AREAS FOR ACTION

Critical date: 29 July 2022, to enable work on the projects, if agreed, to commence as soon

as possible.

Recommendation/s:

- Note that a proposal for the development of a National Health and Climate Strategy (4). 1. Strategy) will be developed for consideration as part of Budget 2022-23
- Agree to the Department commissioning a 2. review of climate change and health research and evidence as outlined in Attachment A.
- 2. Agreed/Not agreed/Please discuss
- Agree to the Department designing a National 3. Health Vulnerability and Adaptation Toolkit in collaboration with states and territories as outlined in Attachment B.
- 3. Agreed/Not agreed/Please discuss
- Agree to funding the proposed projects via 4. the Health Protection Program (PRI046) at \$1.25 million over the 2022-23 and 2023-24 financial years
- 4. Agreed/Not agreed/Please discuss

Signature

Date: 28 / 7 / 22

Media Release required? YES/NO

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Contact	Lara Purdy	Assistant Secretary, Environmental	Pł
Officer:		Health and Health Protection Policy	М
		Branch	
Clearance	Prof Brendan	Secretary, Department of Health	Ph
Officer:	Murphy	and Aged Care	М

Issues:

- The Australian Government's commitment to taking action to address the health impacts of climate change was reaffirmed by Assistant Minister Kearney in her recent address to the Climate and Health Alliance roundtable of 29 June 2022. Assistant Minister Kearney advised stakeholders that the Government would make climate change a national health priority and committed to developing Australia's first National Strategy on Climate Change and Health, to address the health impacts of climate change.
- 2. A functional paper on climate change and health was provided to you as part of the incoming government brief. The paper outlined an opportunity for the Government to develop a National Health and Climate Strategy to establish a consistent and measurable national approach to driving key outcomes across adaptation, resilience, health sector emissions reduction, greening the supply chain, and improved sustainability of healthcare consumables. This is consistent with the commitment outlined above.
 - The Strategy will provide a strategic and long-term vision for Australia, as well as
 identify tangible actions and tools, agreed with key stakeholders, to support reform.
 In addition, it will identify key priority areas to focus on to improve the capability of
 the Australian health system to effectively manage the associated risks.
 - A commitment to the development of the Strategy will strengthen Australia's
 position ahead of the 27th Conference of the Parties (COP27) in Egypt in November
 2022 where discussions will be held on the United Nations Framework Convention
 on Climate Change (UNFCC).
 - More information on the Strategy will be provided to you as part of preparations for Budget 2022-23.
- 3. Consistent with the Government's commitment to national action in this area and aligned with the development of the Strategy, the Department recommends commencing two priority projects relating to health impacts of climate change.
- 4. The projects focus on evaluating existing knowledge and introducing nationally consistent approaches to better identify and manage health and climate risks in the Australian context. The outcomes of these projects will support the Government's leadership role in ensuring the health system is well placed to respond to current and anticipated impacts of climate change on human health.
 - Observed and Projected Impacts of Climate Change on Health in Australia: A Scoping Review will provide an overview and synthesis of Australian specific evidence regarding the impacts of climate change on human health and identify knowledge gaps to be addressed. Further information is at Attachment A.

Document 1

Development of a National Health and Vulnerability and Adaptation Toolkit (the Toolkit) will provide a nationally consistent framework to support all jurisdictions, including the Commonwealth, to assess and report health system vulnerability in relation to climate change, and identify and implement adaptation actions. The project will be undertaken in collaboration with states and territories. Further information is at Attachment B.

Background:

On 16 June 2022, the Prime Minister signed an updated version of Australia's nationally determined contribution to the UNFCC, committing Australia to reduce its emissions by 43 per cent by 2030, and to net zero by 2050.

Internationally, over 60 countries have committed to developing climate resilient and low carbon sustainable health systems, through the COP26 Health Program. On 27 June 2022, the World Health Organisation and the United Kingdom launched the Alliance for Transformative Action on Climate Change and Health (ATACH). ATACH is the platform developed to bring together government institutions that have committed to the COP26 Health Program, and relevant partner organisations, to coordinate efforts, exchange knowledge and best practices, build networks, provide access to technical and financial support, link up existing initiatives, tackle common challenges, and monitor global progress.

In Australia, key stakeholders from the health sector have released reports and publications advocating for the Commonwealth Department of Health and Aged Care to take a stronger leadership role in driving national policy in relation to the health impacts of climate change. Relevant publications include the Climate and Health Alliance report Healthy, Regenerative and Just: Our Vision for a better future, the Australian Medical Association position statement on climate change, and the Royal Australian College of Physicians report, Climate Change and Australia's Healthcare Systems

There are existing resources to support the development of the proposed Toolkit. Several states and territories have completed assessments of vulnerability and/or adaptation capabilities. In addition, the World Health Organization has developed the *Protecting health from climate change: Vulnerability and adaptation assessment* as a general guide to assessing the health risks of climate change, and for information on policies and programs that could increase resolience.

Attachments:

- A: Observed and projected impacts of climate change on health in Australia: a scoping review Project Outline
- B: National Health Vulnerability and Adaptation Toolkit Project Outline

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Budget/Financial Implications:

Funding proposed from Health Protection Program (PRIO46) to support the projects:

	2022-23	2023-24	Total
Observed and Projected Impacts of Climate Change on Health in Australia: A Scoping Review	\$250,000	\$250,000	\$500,000
National Health and Vulnerability and Adaptation Toolkit	\$320,000	\$430,000	\$750,000
			\$1,250,000

Your agreement to expend PRIO46 funds will enable the projects to commence more quickly, rather than seeking funding through the 2022-23 Budget process. This will demonstrate to stakeholders the Government's commitment to action in this area ahead of 2022-23 Budget announcements.

As noted above, the proposal to develop the National Climate and Health Strategy will be progressed concurrently through the 2022-23 Budget process.

Election Commitments / Budget Measures

In 2019, the Australian Labor Party called on the Morrison Government to add climate change as a national health priority area and confirmed its election commitment to develop Australia's first National Strategy on Climate Change and Health.

Sensitivities: n/a

Consultations:

The Finance Business Partner was consulted in the preparation of this submission.

Regulatory Burden Implications and/or Deregulation Opportunities: n/a

Communication/Media Activities: n/a

Impact on Rural and Regional Australians:

People living in rural and remote locations, as well as vulnerable members of our communities, are likely to experience more negative health impacts as a consequence of climate change. This has been demonstrated through the 2019-20 bushfires as well as recent flood events.

Attachment A

Observed and projected impacts of climate change on health in Australia: a scoping review - Project Outline

Purpose

The project will assess literature, reports, and other publications published in the last 10 years, to identify:

- key climate stressors affecting human health outcomes in Australia, and the observed consequences (financial and other) of these stressors on the Australian health system.
- existing work which models the expected mid- and long-term impacts and associated impacts (financial and other) of these climate stressors on health service delivery across Australia, taking into account regional, environmental and socio-economic contexts.
- current knowledge gaps and outline research and modelling opportunities that will support healthcare preparedness in relation to climate change impacts.

Rationale

There is increasing evidence about the negative health impacts associated with climate change (eg. the Sixth Assessment Report by the Intergovernmental Panel on Climate Change (IRCC). There is also growing concern amongst the public and more specifically, the health sector about this issue. Key stakeholders from the health sector have released reports and publications advocating for the Commonwealth Department of Health and Aged Care (the Department) to take a stronger leadership role in driving national policy in relation to the health impacts of climate change.

Under this project, suitably qualified experts will be engaged to conduct a scoping review of literature, reports, and other publications published in the last 10 years, to identify the observed and projected impacts of climate change on health in Australia (the Review). This will provide the evidence to inform mitigation and adaptation strategies at the national level in addition to identifying current knowledge gaps. Considerations for the Review include defining key climate stressors, categorising population health impacts, differentiating expected population health impacts, and analysing the overall anticipated effects to the Australian health system (eg. from financial to health service delivery impacts). Given stressors in Australia are likely to be different to those in other countries, and will vary across the continent, it will be important that the project focuses on identifying and understanding Australian-specific exidence.

The population health impacts of climate change are classified as primary, secondary, and tertiary. Primary signs include the acute and chronic stress of heat waves, and trauma from increased bushfires and flooding. Secondary signs are indirect, such as changes in the epidemiology of many infectious diseases resulting from an altered distribution of arthropod vectors, intermediate hosts and pathogens. Tertiary effects are classified as broader impacts with implications to the Australian health system due to long term downstream effects of climate change, and could include matters such pressures to health service delivery in Australia due to food insecurity, water quality and access, and significant population displacement.

Proposed approach and deliverables

Given the scale and complexity of this project, the work will be delivered through three phases with the final report at 12 months.

Phase One: Key climate stressors in Australia and observed consequences (financial and other) on the Australian health system.

• Identify through assessment of literature, reports and other publications published in the last 10 years, the key climate stressors affecting human health outcomes in Australia, and the observed consequences (financial

and other) of these stressors on the Australian health system. Issues to be considered include accessibility, availability and resilience of health services, and viability of medicines.

Identify the observed population health consequences (i.e. primary, secondary and tertiary health consequences) in Australia linked to identified key climate stressors.

Phase Two: Expected mid-and long-term impacts and associated implications of key climate stressors on health service delivery in Australia.

- Building on Phase One of the project, identify, examine, and provide a synthesis of literature, reports and other publications published in the last 10 years which model the expected mid- and long-term impacts and implications (financial and other) of key climate stressors on health service delivery in Australia, taking into account regional environmental and socio-economic contexts.
- Differentiate expected population health impacts and overall anticipated effects to the Australian health system from implications (financial and other) to health service delivery across Australia.

Phase Three: Current knowledge, and potential future research and modelling opportunities for the Department.

- Building on Phase One and Phase Two of the project, identify current knowledge gaps by cross-referencing identified key climate stressors with existing modelling.
- Provide an outline of research and modelling opportunities for the Department that will support healthcare preparedness in relation to climate change impacts.

Phase Four: Final Report

Provide a full report of the analysis undertaken including a summary of key findings and policy gap recommendations.

y Stakeholders

Key Stakeholders

The following entities have been identified as likely to have a keen interest in the outcomes of this project.

- State and Territory Health Departments
- National Health and Medical Research (NHMRC)
- Commonwealth Scientific and Industrial Organisation (CSIRO)
- Healthy Environments and Lives (HEAL) Network, Australian National University (ANU)
- Australian Climate System (ACS)
- Australian Research Council (ARC)
- Climate Systems National Environmental Science Program (NESP)

Risks and Mitigations

Risks

- 1. There may be real or perceived overlap with the NHMRC funded HEAL Network, and work undertaken by the ACS.
- 2. The aspects considered in this project are broad and include responsibility of other areas both within the Department and across government. Hospitals and large portions of health infrastructure for example are primarily the responsibility of states and territories.

Mitigations

- 1. The Department will ensure ongoing consultation and communication with the NHMRC, HEAL network leaders and ACS in order to reduce potential duplication of effort and strengthen key relationships.
- 2. The Department will regularly share information and communicate with key stakeholders throughout the project. In addition, prior to publication or sharing of the project outcomes, the Department will develop communication materials to manage expectations in relation to potential next steps and clarify areas of Commonwealth responsibility.

Attachment B

National Health Vulnerability and Adaptation Toolkit – Project Outline

Purpose

The purpose of the project is to develop a National Health Vulnerability and Adaptation Toolkit (the Toolkit) in collaboration with state and territory health departments. This toolkit will support all jurisdictions, including the Commonwealth, to assess and report health system vulnerability in relation to climate change in a nationally consistent manner and identify associated adaptation measures. Following its development, the Commonwealth Department of Health and Aged Care (the Department) will utilise the Toolkit to assess and report on its own health programs.

Rationale

There is no universally accepted standard method or framework through which to conduct a climate vulnerability and adaptation assessment. The World Health Organization (WHO) has developed three foundational documents focusing on the emergency management response to climate change: Operational Framework for Building Climate Resilient Health Systems, WHO checklists to assess vulnerabilities in healthcare systems in the context of climate change, and Protecting health from climate change: Vulnerability and adaptation assessment. These documents provide guidance on processes for addressing the challenges presented by climate variability, as well as advice on policies and programs that can increase resilience of the health care sector.

There have been increasing calls by stakeholders for leadership and governance in the Australian climate risk and adaptation space beyond emergency management response. A National Health Vulnerability and Adaptation Toolkit (the Toolkit) led and coordinated by the Commonwealth and developed in collaboration with states and territories will provide the following:

- National coordination and leadership on implementing climate vulnerability assessments, reporting, and identifying appropriate adaptation measures.
- A centralised resource to capture existing projects and expertise in this space that is easily accessible to relevant stakeholders.
- Nationally consistent reporting mechanisms to capture health-related climate vulnerabilities and adaptation measures.
- A source of evidence to learn about adaptation successes of other jurisdictions.

In addition, the Toolkit will support jurisdictions to develop action plans to mitigate identified vulnerabilities in their respective health systems in relation to services, policies, programs, and operations. The Toolkit will also support long-term strategic consideration of climate change vulnerabilities of the Australian health system by informing decisions regarding climate and health funding, and the scope of future national strategies including the health component of national adaptation plans.

This project and the *Observed and projected impacts of climate change on health in Australia: a scoping review* will constitute critical components of a National Health and Climate Strategy.

Proposed approach and methodology

The Toolkit will be developed utilising existing international and domestic expertise, and with reference to documents such as the WHO guide *Protecting health from climate change: Vulnerability and adaptation assessment* as guidance.

The development of the Toolkit will be led and coordinated by the Department in collaboration with state and territory health departments. The Department will engage suitably qualified experts to progress this project. Ongoing review, reporting and evaluation arrangements for the Toolkit will be determined in collaboration with states and territories as part of the project.

Following its development, the Department will use the Toolkit to complete an assessment of its own health programs including in areas such as aged care, sport, mental health services, Pharmaceutical Benefits Scheme (PBS) and Medical Benefits Scheme (MBS). This final stage is integral to the success of the Toolkit's uptake by users. It will enable the Commonwealth to demonstrate the application of the Toolkit in a practical, real-world setting, and provide meaningful leadership in supporting climate change adaptation in the health system.

Key Stakeholders

The success and take-up of the final product will largely be dependent on buy-in from the key stakeholders: state and territory government health agencies. The Department will ensure that a partnership approach is established with these agencies early in the life of the project and that close collaboration continues throughout the development of the Toolkit. This engagement is likely to be facilitated through the Australian Health Principal Protection Committee (AHPPC).

Risks and Mitigations

Risks

- 1. States and territories may be concerned about the potential for duplication given that some already have existing frameworks in their respective jurisdictions and may be reluctant to conduct the assessments.
- 2. Non-government organisations may wish to be involved with developing the Toolkit because they perceive themselves to be the target audience.
- 3. Application of the Toolkit to Commonwealth health programs will require significant engagement and agreement to be successful.

Mitigations

- 1. The Department will provide states and territories with a clear explanation of the rationale for the project and the expected benefits at a national as well as state and territory level.
- 2. The Department will develop communication materials for non-government organisations to explain the purpose of the project and the rationale for the target audience ie. policy makers.
- Policy leads for relevant Commonwealth health programs will be included as stakeholders throughout the project to ensure that the Toolkit is practical and fit for purpose.



Australian Government

Department of Health and Aged Care

Ministerial Submission – Standard

MS22-001064

Version (1)

Date sent to MO: 17 August 2022

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Parliamentary Section

To: Mark Butler

cc:

Assistant Minister Kearney

Subject: A National Health and Climate Strategy

Critical date: 2 September 2022, to support work on the Strategy commencing as soon as

possible.

Recommendat	tion/	s:
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Agree to the proposed approach and governance 1. for the development of a National Health and

Climate Strategy outlined in Attachment A.

Agree that the National Health and Climate

Strategy be finalised by mid 200 2.

Signature ...

Agreed/Not agreed/Please discuss

get to so-ordinather with

greed/Not agreed/Please discuss

Date: 7×/ 8 / 2022

Media Release required?

Comments:

Ph: (02) 63 Contact Prof Paul Kelly Chief Medical Officer Officer: Mobile: 04 Clearance Prof Brendan Secretary, Department of Health and Ph: (02) 62 Officer: Mobile: 04 Murphy Aged Care

Issues:

- 1. On 3 August 2022, in Parliament, you confirmed your commitment to developing a National Health and Climate Strategy (NHaCS) in consultation with state and territories.
- 2. An outline of the proposed approach for the development of the Strategy and a suggested structure is provided at Attachment A.

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- 3. The outline provided recognises that consultation with a broad range of key stakeholders (Attachment B), and close collaboration with state and territory health departments will be critical to the success of the Strategy. It also acknowledges the significant volume of work already undertaken by these groups to pull together the evidence base, identify key issues and potential actions. This foundational information will assist with expediting the Strategy's development.
- 4. We propose establishing an advisory group as soon as possible to provide advice to the Chief Medical Officer on the development of the Strategy as well as broader climate and health policy issues. A list of proposed members will be developed for your consideration.
- An indicative timeline for the development of the Strategy is provided at Attachment C.
- The Strategy will provide an opportunity for the Commonwealth to use the levers it has at its disposal to drive reforms to reduce emissions across the health system. This includes incentives, regulatory arrangements and funding agreements. These reforms have the potential to realise significant efficiencies and cost savings over time. Implementation of the Strategy will involve regular reporting against agreed targets to ensure a collective focus on agreed objectives, and confidence that the actions are having the intended impact.

Background:
On 16 June 2022, the Prime Minister signed an updated version of Australia's nationally determined contribution to the UNFCC, committing Australia to reduce its emissions by 43 % by 2030, and to net zero by 2050.

Internationally, over 60 countries have committed to developing climate resilient and low carbon sustainable health systems, through the COP26 Health Program. On 27 June 2022, the World Health Organisation and the Wnited Kingdom launched the Alliance for Transformative Action on Climate Change and Health (ATACH). ATACH is the platform developed to bring together government institutions that have committed to the COP26 Health Program, and relevant partner organisations, to coordinate efforts, exchange knowledge and best practices, build networks, provide access to technical and financial support, link up existing initiatives, tackle common challenges, and monitor global progress.

In Australia, key stakeholders from the health sector have released reports and publications advocating for the Commonwealth Department of Health and Aged Care to take a stronger leadership role in driving national policy in relation to the health impacts of climate change. Relevant publications include the Climate and Health Alliance report Healthy, Regenerative and Just: Our Vision for a better future, the Australian Medical Association position statement on climate change, and the Royal Australian College of Physicians report, Climate Change and Australia's Healthcare Systems.

Attachments:

- A: Proposed approach to a National Health and Climate Strategy
- B: List of stakeholders
- C: Indicative timeline for the development of the Strategy
- D: Summary of health and climate activities from jurisdictions, medical colleges and internationally

Budget/Financial Implications:

A proposal to develop the National Health and Climate Strategy and establish a National Health Sustainability and Climate Unit is being progressed as a part of the upcoming Budget.

Election Commitments:

The Australian Government has committed to making climate change a national health priority. Both you and Assistant Minister Kearney have recently publicaly reaffirmed the Government's commitment to the development and implementation of a National Health and Climate Strategy.

Sensitivities:

Many stakeholders in the public health sector have already undertaken extensive work and research and hold strong views on this topic. A summary of health and climate activities being progressed by jurisdictions, medical colleges and internationally is provided at Attachment D. Key stakeholders including the Climate and Health Alliance (CAHA), Doctors for the Environment Australia (DEA), Australian Medical Association (AMA) and the Royal Australasian College of Physicians (RACP) will expect to be engage and see their work and expertise reflected in the development of the Strategy. However, there are many other health and climate stakeholders who will also be keen to participate. It may be difficult to manage expectations of the full range of stakeholders.

Given the connection between climate policy and public the alth policy and the need for broad consultation, it may be difficult to finalise the strategy within a short timeframe.

Impact on Rural and Regional Australians:
People living in rural and remote land remote land. People living in rural and remote locations, as well as vulnerable members of our communities, are likely to experience more negative health impacts as a consequence of climate change. This has been demonstrated through the 2019-20 bushfires as well as recent flood events.



National Health and Climate Strategy | 2023 Project Plan

Month	Date Responsibility Activity				
ים,	February: Finalise Consultation Paper				
Febru ary	HCEF and HMM Update				
Hear noted the Project Plan and agreed to support state and territory engagement in workshops.					
	March – July: State and territory engagement and Public Consultation				
	Chief Medical Officer Advisory Group (CMOAG) Meeting				
	Discuss Draft Consultation Paper and consultation plan				
	AHPPC and subcommittee review				
	Review and comment on Consultation Paper out of session.				
	State and territory online workshop				
<u>></u>	Online workshop with state and territory representatives, to discuss Consultation Paper.				
nr -	CMOAG Review				
March - July	Provide overview of state and territory feedback received on the Consultation Paper.				
Лаг	Public Consultation				
~	• A series of workshops with members from academia, interest groups, and health professional networks to be run, to				
	provide input on the Strategy. Government representatives from the jurisdictions will also be invited.				
	An online submission portal will be made available on the Department's website for open public consultation on the				
	elements of the Strategy (minimum of 6 weeks).				
	Develop Strategy				
	NHSC Unit to review and incorporate all feedback on Consultation Paper (from state and territory reps., AHPPC,				
	enHealth and other Australian Government Departments).				
	July – August: Preparation of draft strategy and review by HCEF, HMM and Minister				
	CMOAG Review Provide draft Strategy to CMOAG and request feedback: Ministerial review				
ıst	Provide draft Strategy to CMOAG and request feedback:				
ugr	Ministerial review				
July - August	Ministerial review Send draft Strategy to Minister for comments and input State and draft Strategy to Minister for comments and input				
uly	State and territory online workshop				
_	Online workshops with state and territory representatives, to discuss Draft Strategy.				
	HCEF and HMM review				
	Table draft Strategy at HCEF and HMM for review and input				
	September - November: Finalise National Health and Climate Strategy				
1.	CMOAG Meeting				
September – November	Provide Final Strategy for review and teedback.				
	Finalise Strategy				
	Review feedback from public consultation and stakeholder workshops.				
Se	Draft and finalise Strategy.				
	Minister Approval Final Strategy				
	HCEF/ HMM Review Final Strategy				
	Publish National Health and Climate Strategy				

ATTACHMENT B

National Health and Climate Strategy Identified Key Stakeholders

Group	Rationale
State and territory governments	Broader state and territory collaboration will be imperative to ensure the Strategy is appropriate and its outcomes are practical and effective. We note that consultation will likely be broader than the Australian Heath Protection Principal Committee (AHPPC) and health departments to ensure adequate buy-in nationally.
Department of Climate Change, Energy, the Environment, and Water (DCEEW)	DCEEW is responsible for Australia's response to climate change and sustainable energy use, and protection of the environment, heritage and water. They deliver policies and programs to help address climate change and build a more sustainable energy system. DCEEW will be the key Commonwealth Department to liaise with due to their explicit mandate to focus on climate change.
Department of Agriculture, Fisheries and Forestry (DAFF)	DAFF are responsible for Australia's agriculture, fishery, food and forestry industries. They are responsible for climate adaptation and science policies that ensure the interests of agriculture and food chain are sustainable. They also advance the agricultural industry's intent to reduce emissions. Working with DAFF will ensure that food, which is integral to health and wellbeing, and biosecurity threats, are considered in the Strategy.
Department of Infrastructure, Transport, Regional Development, Communications, and the Arts (DITRCA)	DITRCA have responsibility on improving living standards and facilitating growth in cities and regions, including special support for Northern Australia. They also look to achieving sustainable and accessible transport systems. They assist regional areas and Australia's territories to assess the risk of climate change. Working with DITRCA will ensure that risks to infrastructure are considered and support the different actions needed for urban and regional and rural areas.
National Indigenous Australians Agency (NIAA)	NIAA works to implement policies and programs to improve the lives of all Aboriginal and Torres Strait Islander peoples. They have a specific focus on reducing the health gap between Indigenous and non-Indigenous Australians and also support First Nations people to manage their lands and waters

	through Caring for Country programs. Working with NIAA will ensure the Strategy considers First Nations peoples.
Department of Foreign Affairs and Trade (DFAT)	DFAT leads Australia's international response to climate change through multilateral negotiations, foreign policy and trade, and climate-related support through the development assistance program. Consulting DFAT will ensure the Strategy is aligned to international trends and promotes Australia's action through all relevant channels.
Department of Industry, Science, and Resources (DISR)	DISR is responsible for consolidating the Government's efforts to drive economic growth, productivity, and competitiveness. Whilst the strategy will focus on health, it is likely that it will intersect with several policy responsibilities of DISR.
Prime Minister and Cabinet (PM&C)	The role of PM&C is to support policy agendas of the prime minister and Cabinet by providing high quality policy advice and coordinating the implementation of key government programs. Noting the cross portfolio nature of climate policy, it will be vital to ensure PM&C has contributed to the development of the NHaCs and has critical oversight of this work from the beginning.
The Treasury	The Treasury is the Government's lead economic adviser and is responsible for providing advice in relation to the potential financial risks as a result of climate change scenarios through appropriate evidence based modelling. Consutaion with Treasury will ensure that the NHaCS considers evidence and reporting requirements which may facilitate the analysis of financial risks across the health sector.
Department of Home Affairs (National Recovery and Resilience Agency)	Home Affairs coordinates efforts to respond to, and recover from, disasters and emergencies. Home Affairs also works to build a disaster resilient Australia that prepares for and responds to disasters and emergencies through recovery assistance and response plans. The National Recovery and Resilience Agency combines expertise in natural disaster response, recovery, and resilience by working with affected communities and all levels of government and industry.
Australian Health Protection Principal Committee (AHPPC)	Consultation will occur with the AHPPC to utilise their experience and knowledge to collaborate on what a national climate strategy might look like, what it should include, and the role of key stakeholders.
The Climate Change Expert Advisory Panel (CCEAP)	The CCEAP is an advisory panel being established under the auspices of the AHPPC. The CCEAP will provide leadership and evidence-based advice to the AHPPC (and through it to the

	Health Chief Executives and Ministers) on national health and climate change resilience, environmental sustainability priorities, and known and emerging climate change-related health threats including interventions to mitigate and respond to those threats. Note: Health Chief Executives Forum is currntely considering the proposal to establish the CCEAP.
Healthy Environments and Lives Network (HEAL)	The Government announced, through the National Health and Medical Research Council (NHMRC), the establishment of the HEAL network to contribute to Australia's preparedness and responsiveness to health threats from changing environmental conditions and extreme weather events. HEAL is a collaborative, multidisciplinary research network that will provide national and international leadership in environmental change and health research.
Climate Change Health Alliance (CAHA)	CaHA is a coalition of health care stakeholders who work together to see the threat to human health from climate change and ecological degradation addressed through prompt policy action.
Doctors for the Environment Australia (DEA)	DEA is an organisation of doctors who recognise that human health and wellbeing requires an environment free of pollution that is capable of providing nutritious food, is rich in biodiversity, and able to provide for current and future generations sustainably.
The Australian Medical Association (AMA)	The AMA has joined other health organisations around the world – including the American Medical Association, the British Medical Association, and Doctors for the Environment Australia, in recognising climate change as a health emergency.
Public Health Association of Australia (PHAA)	PHAA has spoken publicly about the need for a strategy on climate, health and wellbeing. PHAA advocates the imperative that the Australian Government work alongside the public health sector and all states and territories to intensify actions and commitments to cut harmful emissions and help the many communities at risk from global heating.
The Royal Australasian College of Physicians (RACP)	The RACP is part of a large and growing global network of health and medical organisations calling for action on climate change to protect health. The RACP has released 3 position statements on climate change and health that they promote when responding to public consultations and engage in key projects in this space; Climate Change and Health,

	Environmentally Sustainable Healthcare and the Health Benefits of Mitigating Climate Change.
Other medical colleges, private sector and non-government health, social services, and climate change organisations.	A broad range of colleges and NGOs have shown significant interest and leadership in relation to this issue. At a recent AMA webinar on climate change and sustainability for example, 11 separate collages presented on the work they had been progressing. It will be important that broad public consultation is undertaken to give these groups opportunity to contribute to the NHaCS.

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ATTACHMENT C

Indicative timeline for the development of a National Health and Climate Strategy

Milestone	Notes	Date (indicative)
Ministerial submission for approval of approach to developing the Strategy	This submission MS22-001064	19-26 August 2022
Write to states and territories seeking nominations for the expert advisory group.	Letter to come from the Chief Medical Officer as Chair and you or the Secretary.	September 2022
Convene Expert Advisory Group to establish scope and timing of the Strategy.	Expect this to be made up of climate and health experts.	October 2022
Consult with broader reference group to draft Principles, Objectives, Strategies and Actions.	Workshop style collaboration with key stakeholders including peak bodies, private sector health providers, and academics.	November 2022
Consult with other Commonwealth portfolios	Assisted through the AS IDC.	November 2022
Expert Advisory Group to agree draft Principles, Objectives, Strategies and Actions.	THOS IN THE	December 2022
Open consultation on the draft Strategy.	This will be a true open, public consultation opportunity.	February 2023
Seek support of proposed Strategy from Health Ministers	Assisted through the Australian Health Protection Principal Committee and regular engagement with the Health Chief Executives Forum.	April 2023
Announce the release of the National Health and Climate Strategy	This will be accompanied by a comprehensive communications plan that we will bring to you in a subsequent Ministerial Submission to accompany the Strategy's release.	June 2023

Climate Change Adaptation Documents

Title	Description
Domestic	
Climate Compass: A climate risk	Climate Compass is a framework designed to help Australian public servants manage the risks from the changing
management framework for	climate to policies, programs and asset management. It includes step by step instructions, guidance and
Commonwealth agencies	information to develop an understanding of climate change risks. Climate Compass builds on the best climate
	change adaptation research and science over the past decade, Climate Compass reflects the current leading
	practice in guidance for climate risk management and planning for long-term, uncertain, pervasive change.
	Australian Public Servants have obligations to understand and appropriately manage climate and disaster risks
	where they are relevant to Australian Government policies, programs and operations. The Climate Compass is the
	integral framework for managing these risks.
Victorian Health and Human	An action plan on health and human services climate change adaptation jointly developed by the Victorian
Services Climate Change	Department of Health and Department of Families, Fairness and Housing. The plan sets clear actions to support the
Adaptation Plan 2022-2026	Victorian community to stay healthy and well in a changing climate by improving access to climate and health-
	related information.
	This document provides the strategic oversight on climate change adaptation in Victoria. The Victorian Department
	of Health is the agency responsible for administering health services and progressing assessment of the health system's adaptation to climate change.
Queensland Human Health and	The Human Health and Wellbeing Climate Change Adaptation Plan (H-CAP) is one of eight sector adaptation plans
Wellbeing Climate Change	being developed by the Queensland Government under the Queensland Climate Adaptation Strategy. The H-CAP
Adaptation Plan 2018	supports healthcare, aged care and early childhood education and care services to be innovative and resilient in
	managing the risks, and to harness the opportunities provided by responding to the challenges of climate change.
<u>Link</u> (publications page)	ST S
	This plan provides the strategic oversight of climate change adaptation in Queensland. Queensland Health is the
	agency responsible for administering health services and progressing assessment of the health system's adaptation
	to climate change and were responsible for drafting this plan.
South Australia Government	A whole-of-government climate change adaptation plan that describes government-led objectives and actions to
Climate Change Adaptation Plan	build a strong, climate smart economy, further reduce greenhouse gas emissions, and support South Australia to
<u>2021-2025</u>	adapt to a changing climate. Health is referenced in Objective 6 – Resilient Communities.

FOI 4589	This plan provides the strategic oversight of climate change adaptation in South Australia. South Australia Health 15th 2 the agency responsible for administering health services and progressing assessment of the health system's adaptation to climate change.
ACT Climate Change Strategy 2019-	A whole-of-government strategy outlining the next steps for the community, business and government will take to
2025	reduce emissions and establish a pathway for achieving net zero emissions by 2045. Health is one of the main focus areas underpinning the strategy's objectives. This Strategy replaces the 2016 ACT Climate Change Adaptation Strategy.
	This Strategy provides the strategic oversight of climate change action in the Australian Capital Territory. ACT Health is the agency responsible for administering health services and progressing assessment of the health system's adaptation to climate change.
Northern Territory Climate Change	The Climate Change Response sets a framework for long-term action by the Territory Government, in partnership
Response: Towards 2050	with all Territorians. In setting policy directions, it is important to understand the unique context of the Territory and how this affects our response. The aim of this framework is to maximise the economic, social and
<u>Link</u> (publications page)	environmental well-being of Territorians while responding proactively to the risks and opportunities of climate
	change. The policy framework established in this Response is built around four objectives:
	1. Net zero emissions by 2050
	2. A resilient Territory
	3. Opportunities from a low carbon future
	 Net zero emissions by 2050 A resilient Territory Opportunities from a low carbon future Inform and involve all Territorians
	This plan provides the strategic oversight of climate change action in the Northern Territory. NT Health is the
	agency responsible for administering health services and progressing assessment of the health system's adaptation to climate change.
Climate Health WA Inquiry 2020	The aim of the Inquiry was to review the current planning and response capacity of the health system in relation to
	the health impacts of climate change, and make recommendations for improvement with respect to climate
	change mitigation and public health adaptation strategies. The Final Report sets a blueprint for the next 10 years of
	the WA health system's response to adapt to climate change to protect the health of the community and how
	health services can do more to reduce emissions and waste. The State's former Chief Health Officer was appointed
	to conduct the inquiry.
	While not a government-endorsed strategy on climate change and health, this inquiry is the most recent
	assessment of the WA health system's response to climate change. WA Health is the agency responsible for
	administering health services and progressing assessment of the health system's adaptation to climate change and
	participated in the inquiry.
New South Wales Climate Change	The NSW Climate Change Policy Framework outlines the long-term objectives to achieve net-zero emissions by
Policy Framework 2016	2050 and to make New South Wales more resilient to a change climate. The framework aims to maximise the

FOI 4589	economic, social and environmental wellbeing of NSW in the context of a changing climate and current and emerging international and national policy settings and actions to address climate change. Health is one of the policy directions outlined in the framework.
	This framework provides the strategic oversight of climate change action in NSW. NSW Health is the agency responsible for administering health services and progressing assessment of the health system's adaptation to climate change.
NSW Climate Risk Ready Guide	The Climate Risk Ready NSW Guide is the key source of information for state government agencies to approach
<u>2021</u>	climate risk assessment and management. The guide provides a 4-step iterative process to help state government
	agencies adapt to climate change impacts. Training is available to help state governments apply the guide to
Link (publications page)	conduct climate change risk assessments and management practices.
	.2-
	This is the most recent guide on climate risk assessment and management in NSW.
Tasmania Climate Change and	The aim of the Roundtable was to help identify and prioritise policies, programs and research in climate change
Health Roundtable Report 2020	and health, specific to the Tasmanian context. The Roundtable identified seven key policy action areas, including
	health-promoting and emissions-reducing policies, emergency and disaster preparedness, supporting healthy and
	resilient communities, education and capacity building, leadership and governance, a sustainable and climate-
	resilient health sector, and research and data.
	L'AI', AI
	While not a government-endorsed climate change strategy, this report provides the most recent assessment of
	climate change action in Tasmania. Tasmania Department of Health is the agency responsible for administering
	health services and progressing assessment of the health system's adaptation to climate change and participated in
	the Roundtable.
Norfolk Island Regional Council –	The Norfolk Island Environment Strategy (Environment Strategy) was prepared for Norfolk Island Regional Council
Norfolk Island Environment	(Council) to support the achievement of outcomes of Strategic Direction 1: An Environmentally Sustainable
<u>Strategy 2018-2023</u>	Community, of the Norfolk Island Community Strategic Plan 2016–2026 – Our Plan for the Future' (Norfolk Island
	Regional Council, 2016). The Environment Strategy is not a climate change specific document but includes climate
	change as an underpinning element.
	Regional council with unique setting and populations potentially vulnerable to climate risk.
Torres Strait Regional Authority –	The Torres Strait has conducted a First Pass Risk Assessment as a way of addressing the comparatively greater
Torres Strait Climate Change and	climate related health impacts in the face of climate change, as compared to most mainland communities. This risk
<u>Health – First Pass Risk Assessment</u>	assessment focuses on impacts of climate change on human health, health infrastructure and the health system.
Link (publications page)	Regional council with unique setting and populations potentially vulnerable to climate risk.
The Healthy Environments And	The Healthy Environments And Lives (HEAL) Network has been established through the National Health and
Lives (HEAL) Network	Medical Research Council Special Initiative on Human Health and Environmental Change to contribute to

FOI 4589	Australia's preparedness and responsiveness to health threats from changing environmental conditions and extreme weather events. Document 2
Climate and Health Alliance (CAHA)	The HEAL Network is a collaborative, multidisciplinary coalition of 100 investigators and more than 30 organisations from across Australia that will provide national and international leadership in environmental change and health research. HEAL will bring together Aboriginal and Torres Strait Islander wisdom, sustainable development, epidemiology, data science and communication to address environmental change and its impacts on health across all Australian states and territories. Relationships between communities, scientists and policymakers will be developed to focus on solution-driven research that will provide robust scientific evidence to underpin structural policy and practice changes. This evidence will be based on a holistic assessment of social and economic costs and benefits, and distributional effects of policies to support long term solutions that will bring measurable improvements to our health, the Australian health system and the environment.
Climate and Health Alliance (CAHA)	 CAHA has released two reports that advocate for the Commonwealth Department of Health and Aged Care to take a stronger leadership role in driving national policy in relation to the health impacts of climate change. Framework for a National Strategy on Climate, Health and Well-being for Australia, 2017, provides a roadmap to support the Commonwealth Government in taking a leadership role in protecting the health and well-being of Australian communities from climate change, and in fulfilling its international obligations under the Paris Agreement. Healthy, Regenerative and Just: Our Vision for a better future, 2021, builds on the 2017 report and provides a comprehensive roadmap to support Australian governments, businesses and health sector actors to protect the health and wellbeing of Australian communities from climate change, and fulfil its international obligations, including the Paris Agreement. The Framework covers eight areas of recommended policy action and nine principles that provide the foundation for the intention, rationale and objectives of the Framework to guide the application and provide a conceptual underpinning to the policy directions and recommendations.
The Australian Medical Association (AMA) and Doctors for the Environment Australia (DEA)	The AMA and DEA are strong advocates for the Australian Government to address the impacts of climate change on human health. Both organisations have declared that climate change is a health emergency. The AMA has released two position statements. One in 2015 on Climate Change and Human Health, and the latest on Environmental Sustainability in Health Care in 2019 which recommend actions to enable emissions reduction in the healthcare sector. The DEA also makes recommendations for reducing health sector emissions in its, Net zero carbon emissions: responsibilities, pathways and opportunities for Australia's healthcare sector report.
	In March 2021, the AMA and the DEA called on the Australian health care sector to reduce carbon emissions to net zero by 2040, with an interim goal of 80% reduction by 2030. They are further advocating for the Australian Government to establish a National Sustainability Unit to provide better coordination between governments,

FOI 4589	private and not-for profit sectors to reduce emissions in the healthcare sector. This Unit would seek to increase environmental sustainability in healthcare sector, including by setting targets, measuring progress against the sector targets, providing advice and best-practice examples, and incentivising behavioural change. Central to the Unit's success would be strong coordination and liaison with State and Territory Health Departments. The AMA and DEA support the development of a National Health and Climate Strategy, as a means for the Australian Government to take a leadership role and drive national action on climate health issues.
The Royal Australasian College of	The RACP has released 3 position statements on climate change and health that they promote when responding to
Physicians (RACP)	public consultations and engage in key projects in this space.
	 Climate Change and Health Environmentally Sustainable Healthcare The Health Benefits of Mitigating Climate Change and Australia's Healthcare Systems – A Review of Literature, Policy and Practice, on the risks of climate Change to Australian healthcare systems and how best to manage these risks.
Additional Australian Colleges	Many other Australian Colleges have an interest in climate and health as suggested by their upcoming appearance
	at the Australian Medical Association Doctors for the Environment Australia webinar, Climate Change and Sustainability: Leadership and Action from Australian Doctors. The Australasian College of Dermatologists (ACD) The Australian College for Emergency Medicine (ACEM) The Australian College of Rural and Remote Medicine (ACRRM) The Australian and New Zealand College of Anaesthetists (ANZCA) The College of Intensive Care Medicine Of Australia and New Zealand (CICM) The Royal Australian College of General Practitioners (RACGP) The Royal Australian and New Zealand College of Ophthalmologists (RANZCO) The Royal Australian and New Zealand College of Psychiatrists (RANZCO) The Royal Australian and New Zealand College of Psychiatrists (RANZCP) The Australasian College of Sport and Exercise Physicians (ACSEP) The Royal Australian and New Zealand College of Radiologists (RANZCR)
International	
WHO Operational Frameworks on	WHO supports countries to increase the climate-resilience of their health systems by providing direct support
building climate resilient health	through projects on climate change and health, and through the generation of guidance for multiple areas of work
<u>systems</u>	that contribute to the overall functioning of health systems. The wide range of guidance developed to support

	countries on heath adaptation to climate can be generally structured under ten components outlined in the WHO
FOI 4589	Operational framework for building climate resilient health systems:
	1. Leadership and governance
	2. Health workforce
	3. Vulnerability, capacity and adaptation assessment
	4. Integrated risk monitoring and early warning
	5. Health and climate research
	6. Climate-resilient and sustainable technologies and infrastructure
	7. Management of environmental determinants of health
	8. Climate-informed health programmes
	9. Emergency preparedness and management
	10. Climate and health financing
	The Operational Frameworks provide internationally endorsed guidance on addressing the challenges presented by
	climate variability and change specific to healthcare facilities.
WHO checklists to assess	The primary purpose of this document is to support health care facility managers and other health workers in
vulnerabilities in healthcare	establishing a baseline with regards to climate change resilience in health care facilities. It also aims to inform the
systems in the context of climate	design of interventions to strengthen overall resilience and conduct vulnerability assessments in health care
change	facilities.
	Separate checklists are provided for a cange of climate hazards: floods; storms; sea-level rise; droughts; heat
	waves; wildfires; and cold waves. Each checklist focuses on the following areas to assess vulnerability in health care
	facilities:
	Identify climate hazards of concern.
	Assess current vulnerability for each of the hazards, in each of the key components of health care facilities.
	Understand potential impacts posed by climate variability and change in each of the key components of health
	care facilities.
	20,5x,5x,
	The checklists outline internationally endorsed guidelines on assessing climate change resilience in heath care
	facilities, focusing on specific hazards.
Canada Health Care Facility Climate	(Registration required for access)
Change Resilience Checklist	The Canadian Coalition for Green Health Care with support from the Nova Scotia Department of Environment has
	co-developed the Health Care Facility Climate Change Resiliency Toolkit, which health care facilities can use to
	assess their resiliency to climate change.
	Canada is comparable to Australia in terms of geography, population size and distribution around the coastal
	edges, shared history both as a Commonwealth country and as a country with significant Indigenous and First
	Nations groups.

26th United Nations Climate	The 2021 COP26 was held in Glasgow in November 2021 and was attended by the countries that signed the United
Fehange Conference of the Parties	Nations Framework Convention on Climate Change (UNFCCC) - a treaty that came into force in 1994.
(COP26)	The two headline outcomes from COP26 were the signing of the Glasgow Climate Pact and agreeing the Paris Rulebook.
	 The Glasgow Climate Pact is a "series of decisions and resolutions that build on the Paris accord", setting out what needs to be done to tackle climate change. However, it doesn't stipulate what each country must do and is not legally binding.
	 The Paris Rulebook gives guidance on how the Paris Agreement is delivered. A focus of COP26 was to
	secure agreement between all the Paris signatories on how they would set out their nationally determined contributions (NDCs) to reduce emissions. The finalised Rulebook, includes agreements on:
	 An enhanced transparency framework for reporting emissions
	 Common timeframes for emissions reductions targets
	 Mechanisms and standards for international carbon markets
	In regard to health impacts of climate change, a group of 50 countries committed to develop climate-resilient and
	low-carbon health systems in response to growing evidence of the impacts of climate change on people's health.
	Initiatives under the COP26 Health Programme include:
	Building climate resilient health systems.
	Developing low carbon sustainable health systems.
	Adaptation Research for Health.
	The inclusion of health priorities in Nationally Determined Contributions.
	Raising the voice of health professionals as advocates for stronger ambition on climate change.
Alliance for Transformative for	ATACH was established to support the delivery of the COP26 commitment to develop climate-resilient and low-
Action on Climate Change and	carbon health systems in response to growing evidence of the impacts of climate change on people's health.
Health (ATACH)	It will act as a platform to bring together government institutions that have signed on to the COP26 Health
	Programme and relevant partner organizations to coordinate efforts, exchange knowledge and best practices, build
	networks and access to technical and financial support, link up existing initiatives, tackle common challenges, and monitor global progress.
	The main objectives of the alliance is to drive and sustain progress and ambition on resilient and low carbon health systems (and their supply chains).
	It aims to encourage more countries to make commitments and increase ambition; elevate the agenda in both
	health and climate spaces, promoting innovation and solutions to overcome global constraints to achieving the

and implementation.

goals of the COP26 Health Programme; and support the development and strengthening of the current and

emerging evidence and knowledge base, health arguments for climate change action to inform advocacy, planning



Australian Government

Information Brief MB22-003489 Version (1)

Date sent to MO: 28/10/2022

Department of Health and Aged Care RECEIVED

To: Minister Butler

n 7 NOV 2022

cc:

Assistant Minister Kearney

Parliamentary Section

Subject:

Department Initiated Information Brief: National Health and Climate

Strategy - Chief Medical Officer Advisory Group (CMOAG)

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Clearance	Prof Paul Kelly	Chief Medical Officer	(0:
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Key Issues:

- 1. On 29 August 2022, you agreed to an approach for developing the National Health and Climate Strategy (Strategy) including the establishment of an expert group to provide advice to the Chief Medical Officer (MS22-001064).
- 2. The Chief Medical Officer Advisory Group (CMOAG) will be established to support the development of the Strategy and to provide broader advice on health and climate issues and policies to address the health impacts of climate change. The draft Terms of Reference for the CMOAG is at Attachment A.
- 3. The proposed members of the CMOAG have been selected based on their specialised knowledge and experience across a range of key areas, and credibility with the broader health sector. We have also included a behavioural economics expert, and a senior representative from the Department of Climate Change, Energy, the Environment and Water (DCCEEW) to ensure policy alignment with the Government's broader climate change agenda. (See Attachment B for the list of individuals whom the CMO will invite to join the CMOAG).
- 4. The first meeting of the CMOAG, is expected to be held face-to-face at the department on Wednesday 23 November 2022, with the immediate priority being consideration of a draft Discussion Paper (<u>Attachment C</u>) developed to inform the Strategy. Feedback from the group will inform next steps in the development of the Strategy as well as scope and timing of consultation.

We are liaising with the National Adaptation Policy Office in DCCEEW to ensure alignment between both our policy directions and timeframes for development of the Strategy, with the broader climate change agenda.

Background:

In line with the Australian Government's commitment to making Climate Health a National Health Priority, the Department of Health and Aged Care is developing Australia's first National Health and Climate Strategy (the Strategy). The Strategy will identity priority areas for action to mitigate climate impacts on the health system and ensure that all Australians continue to access good quality health care. The Strategy will focus on three objectives:

- reducing the carbon footprint of the health sector
- > ensuring that the health sector is well prepared for the impacts of climate change
- maximising synergies between good climate policy and public health policy.

Budget/Financial Implications:

In the October Budget, the Government agreed to fund the development of Australia's first National Health and Climate Strategy and establish a National Health Sustainability and Climate Unit at a total cost of \$3.4 million over four years. (Note: \$2.4 million is coming from existing departmental resources).

Members will not be remunerated by the department for their participation of the CMOAG. The new National Health Sustainability and Climate Unit will provide secretariat and administrative support to the CMOAG.

Sensitivities:

Whilst we anticipate that the sector will support the establishment of the CMOAG, they will be keen for reassurance that the development of the Strategy will include broader consultation. Proposed consultation arrangements are outlined in Attachment C and will be discussed with the CMOAG at its first weeting.

Attachments:

- A. CMOAG Draft Terms of Reference
- B. List of CMOAG Members
- C. National Health and Climete Strategy Draft Discussion Paper

Terms of Reference

Chief Medical Officer Advisory Group

The Australian Government is supporting the establishment of a national policy framework to ensure the health sector is well prepared to manage and mitigate the impacts of climate change, reduces its emissions aligned with broader climate change policy commitments, and ultimately, is able to continue delivering health care and services to Australians into the future.

The Chief Medical Officer Advisory Group (CMOAG) will provide advice to the Chief Medical Officer on health and climate issues and key policies to address the health impacts of climate change. This will include informing the development of Australia's first National Health and Climate Strategy.

The CMOAG will initially operate for the duration of the development of the National Health and Climate Strategy. The Strategy is expected to be delivered by mid-2023, and will have a three year horizon (2023 to 2026). The role and scope of the CMOAG will be reviewed following finalisation of the Strategy.

Purpose:

The role of the CMOAG will include:

- 1. Advising on priority areas of action to prepare the health system to respond to the health threats of climate change.
- 2. Advising on actions to reduce the emissions of the Australian healthcare sector.
- 3. Identifying synergies and opportunities between environmental policy and public health policy.
- 4. Providing information on the best available evidence and expertise on known and emerging climate change-related health threats, including solutions to monitor, mitigate and respond to those threats.
- 5. Identifying key stakeholders across the health system who may be consulted on the development of the Strategy.
- 6. Identifying opportunities for improvement across the health system to ensure protection for climate vulnerable populations, including people living in rural and remote regions, children and the elderly, low-socioeconomic status, and people living with chronic health conditions that may be exacerbated by climate change.
- 7. Consideration of climate change and health actions in the context of achieving positive health outcomes for First Nations people.

Membership

The CMOAG will be chaired by the Chief Medical Officer of Australia, and will comprise no more than 18 members with expertise in the following areas:

- Healthcare sustainability
- Public health/health protection and primary healthcare
- Climate change adaptation and resilience
- Aboriginal and Torres Strait Islander healthcare
- Behavioural economics and health economics
- Low-emission infrastructure
- Industry practice

Members will not be able to nominate proxies.

Members' contributions to the CMOAG will be in kind and they will not be renumerated. Members will sign a confidentiality and non-disclosure agreement with the Department of Health and Aged Care as part of their participation and declare any perceived or actual conflicts of interest.

Meetings

It is anticipated that the CMOAG will meet approximately bi-monthly for up to half a day. The first meeting will be held face to face, with following meetings expected to be held virtually.

The Department of Health and Aged Care will provide secretariat assistance.

The Department of Health and Aged Care will seek to provide members with agenda papers one week prior to each meeting. Members will be expected to pre-read and review these materials prior to meetings and there is likely to also be some out of session work.

Chief Medical Officer Advisory Group members

	Name	Position	Organisation	Location	Brief Bio		
	Representative	Representative from DCCEEW					
National Adaptation De Policy Office an		Kathryn is the Assistant Secretary of the National Adaptation Policy Office at the Department of Climate Change, Energy, the Environment and Water. She is also an experienced and accomplished public policy economist with a special interest in climate and energy economics.					
	Key experts bas	ed in peak bodies			ESECT GED		
2	Fiona Armstrong	Strategic Projects Director	Climate and Health Alliance (CAHA)	VIC	Figure is the Strategic Projects Director and Founder of CAHA. She is a social entrepreneur, public policy expert, author and reform advocate. She is the architect of CAHA's Framework for a National Strategy on Climate, Health and Wellbeing.		
3	Dr Jacqueline Small	President	Royal Australasian College of Physicians (RACP)	NSW I	Dr small is the President of the RACP. She is also a developmental paediatrician. The RACP have led advocacy and research into the health impacts of climate change.		
4	Professor Tarun Weeramanthri	President and academic	(RACP) PHAA	WAS	Prof. Weeramanthri is the current President of PHAA and is an academic at the University of WA. He is a public health physician with previous roles serving as the Chief Health Officer in the Northern Territory and Western Australia. He also led the WA inquiry into climate and health.		
	Expertise in hea	ulthcare sustainability	THE THE DE				
5	Professor Kathryn Bowen	Professor, Deputy Director	Melbourne University	VIC	Professor Bowen is the Deputy Director of Melbourne Climate Futures and is a professor of climate, environment and global health. She focuses on the nexus of environmental change and health and governance policy issues. She was a lead author on the Intergovernmental Panel on Climate Change 6 th Assessment Report.		
6	Dr Kate Charlesworth	Public health physician and senior advisor	NSW Health	NSW	Dr Charlesworth is a senior advisor of the Climate Risk and Net Zero Unit at NSW Health. She is also a medical consultant on planetary health at North Sydney Local Health District. She has experience working with the Greener NHS program in England and holds a PhD in low-carbon healthcare. Through her		

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					various roles she is well connected with the other state units as well as the AMA, RACP, DEA and CAHA	
7	Dr Rebecca Haddock	Executive Director	Australian Healthcare and Hospitals Association (AHHA)	ACT	Dr Haddock has dual expertise as Executive Director at AHHA and as Director for the Deeble Institute for Health Policy Research within AHHA. She also co-leads the Health Systems Resilience and Sustainability theme within the Healthy Environment and Lives (HEAL) Network and has contributed to the AHHA Deeble Institute Issues Brief 'Decarbonising clinical care in Australia'. She has an academic background in neuroscience.	
8	Professor Eugenie Kayak	Professor in Sustainable healthcare (University of Melbourne), Convenor and Committee Member	Doctors for the Environment Australia (DEA), Australian Medical Association	VIC	Professor Kayak has been working as an academic and medical professional in the climate change and health space for over a decade. She is the current Enterprise Professor in Sustainable Healthcare at University of Melbourne, Convenor of Dectors for the Environment Australia's SustainHealth SIG and part of the AMA's Public Health Committee. She was the primary author of the DEA's proposal for a National Sustainable Healthcare Unit.	
9	Professor Anne Duggan	Chief Medical Officer		NSW SELECTION OF THE SE	Professor Duggan is the Chief Medical Officer at the Commission providing expert chical advice to the organisation. She is passionate about improving treatthcare services and has a significant role in identifying synergies and opportunities across the health sector. ACSQHC is an important lever to establish climate risk as a quality and safety issue, as it sets hospital and	
	Adaptation/Resilience					
11	Megan Cahill, (If unavailable, \$47F	CEO	Primary Health Network CE representative Capital Health Network ACT	ACT	Megan is the CEO of the Capital Health Network with a background in health administration.	
12	Professor Sotiris Vardoulakis	Professor	The ANU, HEAL network	ACT	Prof. Vardoulakis is the inaugural Professor of Global Environmental Health and Leader of the Environment, Climate and Health Group at the ANU National Centre for Epidemiology and Population Health. He has held senior positions across the UK in civil service, consultancy and academia. For more than 20 years, he has advised national and local governments and international organizations, such as the World Health Organization, the European Parliament, the UK Government, the Australian Department of Health, and	

FOI 4589 the Chinese Centre for Disease Control and Prevention on the health effects of climate change and air pollution, and on environmental sustainability, health impact assessment, and risk communication. He is the current Director of the HEAL Network. He is considered an adaptation-resilience expert. Indigenous Health Janine has worked in the Aboriginal Community Controlled Health sector at 13 Dr Janine Chief Executive Officer Lowitja Institute, VIC state, national and international levels, and most recently as the previous CEO Mohamad Australia at the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM). Janine is now based in Melbourne as the CEO of the Lowitja Institute. She was awarded an Atlantic Fellows for Social Equity Fellowship in 2019, and in January 2020, was awarded a Doctorate of Nursing honoris causa by Edith Cowan University. Janine was a panellist at the 2022 Better Futures Forum Future-proofing Australia's Climate Agenda and a guest speaker at the 2022 South Australian Council of Social Service Climate Conference. She is a proud Narrunga Kuarna 13 (Alternate member if Janine is unavailable) Industry 14 Elizabeth de CEO ACT Elizabeth de Somer is the CEO of Medicines Australia and is a dedicated Somer advocate and policy expert for the pharmaceutical sector. She has experience in health care and pharmaceutical policy. Catholic Healthcare Pat Garcia is the CEO of Catholic Health Australia. He is a lawyer with a CEO **NSW** 10 Pat Garcia background in public policy and political strategy and has previously worked as representative a Senior Advisor in the Department of Prime Minister and Cabinet. private sector Behavioural Insights/Behaviour Economics 15 Professor Ben Professor Deputy Head, School NSW Professor Newell is a member of BETA's academic advisory panel. He is Deputy Newell of Psychology, Head of the School of Psychology UNSW and Associate Investigator in the ARC Centre of Excellence for Climate Extremes, Professor Newell has expertise in the UNSW

	FOI 4589				Document 3
					psychology of judgment and decision making, risk communication and behavioural economics, especially regarding the impacts of climate change. He is a former ARC Future Fellow who has held multiple ARC Discovery and Linkage Project grants including one with the Department of the Environment focusing on climate change communication.
	Broader social p	policy expertise			
16	Chris Schilling	Health Economist	Australian Institute of Family Studies	VIC	Dr Chris Schilling is an accomplished health economist with more than 15 years of experience in economic modelling and research across academia, industry and consultancy. Chris worked as a Director at KPMG where he led the Health Economics practice responsible for a range of large-scale economic evaluation and modelling engagements using linked and longitudinal data. His work has influenced key policy debates around palliative care, mental health and wellbeing, productivity and low-value care.
17	Heidi Lee	CEO	Beyond Zero Emissions	NSW	Heid is the CEO of Beyond Zero Emissions working with the manufacturing section to electrify Australian factories and renewables. Heidi is an expert in sustainable buildings and urban design and brings 20 years experience in creating sustainable cities.

National Health and Climate Strategy – Discussion Paper for the Chief Medical Officers' Advisory Group

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Introduction

Climate change poses a significant threat to the health and wellbeing of Australians. Its detrimental impact on human health is already being experienced in Australia through heat stress, changing rainfall patterns and climate-related air pollution. Other identified impacts include spread of vector-borne diseases due to changed environmental factors such as increased incidences of flooding and warmer temperatures in southern latitudes, threats to mental health, weather-related threats, food and water insecurity, and spill-over effects on health services from global impacts of climate change (trade, conflict, migration).

Significant literature on these impacts as well as the Australia health system's contribution to national emissions already exists and will be used to draft a compelling introduction for the National Health and Climate Strategy. The purpose of this discussion paper however, is to focus on the core future focused components of the Strategy, including potential actions.

Rationale

The Australian Government has committed to the development of Australia's first National Health and Climate Strategy, in recognition of the detrimental impact of climate change on public health and the significant carbon footprint of the health sector.

The development of the Strategy aligns with the Government's broader climate change agenda to reduce greenhouse gas emissions by 43% below 2005 levels by 2030 and reach net zero emissions by 2050.

The Strategy will support coordination of climate change initiatives across Australia through:

 identification and agreement of principles, objectives and key priority areas, supported by a set of clear actions

- the setting of national targets and regular monitoring and reporting against these
- national co-ordination and consistency by ensuring that all stakeholders are focused on the most critical areas to achieve reform
- increased collaboration between jurisdictions and other key stakeholders including the sharing and adoption of best practice approaches and reducing duplication of effort.

The Strategy will focus on driving more efficient, consistent, measurable and effective climate and health actions across adaptation, resilience, emission reduction and improving sustainability at a national level.

The Department recognises the considerable work already undertaken in this area by a range of stakeholders including some states and territories, non-government organisations and academics/researchers. Our intention is to use this body of work to inform and fast track the development of the Strategy so that our collective focus can quickly shift towards taking direct action.

Proposed Structure

It is proposed that the first National Climate and Health Strategy be established for a period of three years. This recognises that the context is rapidly changing, and that new research, evidence and technologies are regularly emerging.

The proposed high-level structure of the Strategy is:

- Set of principles that explain how we will work together to progress the goals of the Strategy and the shared values that underpin our approach
- Objectives which articulate the specific goals to be achieved
- Key priority areas of strategic focus
- Specific actions to be undertaken under each priority are

Principles

The principles articulate how we will work together to achieve the key goals of the Strategy, and the shared values that support our collaborative effort.

Principles							
Aboriginal and Torres Strait Islander knowledge and leadership inform climate health policy and action at all levels.	A more sustainable healthcare system will improve public health outcomes.	3. All Australians have equal access to a strong and climate-resilient health system, both now and in the future.	4. Evidence underpins our strategies and actions.	5. All levels of government and stakeholders work in partnership to implement our agreed focus areas and actions.	6. A health lens is applied to climate change policy.		
Rationale: Recognises the role of First Nations people in protecting and caring for Country, that Indigenous ecological knowledge should be considered in policy development, and that First Nations' engagement will lead to better health outcomes for Aboriginal and Torres Strait Islander peoples.	Rationale: The Australian healthcare system has a direct impact on the state of the environment. There is an opportunity for the healthcare system to play a leadership role in reducing emissions. This will also have a positive impact on the health of Australians.	Rationale: We must ensure the longer-term resilience of the Australian healthcare system so that it is able to continue delivering quality services to Australians. In addition, this principle acknowledges that some peopleations, including Aboriginal and Torres Strait Islander people, rural and remote communities, elderly Australians and Australians from lower socio-economic backgrounds, are more vulnerable to poorer health outcomes from the impacts of climate change.	Rationale: The Strategy must be informed by evidence-based research into the key climate stressors on the Australian health system and their consequences. In addition, ongoing monitoring and evaluation of policies and programs is required to measure the overall impact of the Strategy and its actions.	Rationale: The capacity of the health system to respond to climate change will require strong partnerships across all levels of government, with key peak bodies, and other stakeholders.	Rationale: Health outcomes are influenced by a wide range of social, economic, political, cultural and environmental determinants. There is an opportunity to ensure that health issues are considered as part of the development of broader climate change and other relevant policies.		

Principles: Questions for consideration

- Do the principles clearly introduce and support the Strategy?
- > Are there other principles that should be included? For example, should transparency, reporting and accountability also be included as a key principle underpinning the Strategy?

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Objectives

It is proposed that the Strategy focus on the following objectives:

Objectives 1. Reduce the carbon footprint of the 3. Maximise the synergies between good climate 2. Ensure that the health sector is well-prepared healthcare sector. for the impacts of climate. policy and public health policy. Rationale: All sectors of the economy have a Rationale: Climate-related events such as Rationale: Human health depends on the health of surrounding natural ecosystems. Climate change bushfires, extreme heat, flood and coastal role to play in supporting the Government to inundation are becoming more frequent and policy is therefore intrinsically linked to public health achieve it commitments the United Nations intense. These events are already having significant Framework Convention on Climate Change. policy, and good policy development on climate and impacts on healthcare infrastructure, operations, health will require working across multiple The health system contributes approximately services and workforce demand. The health sector 7% of total national emissions, 60% of all departments and agencies to realise opportunities needs to be well prepared to ensure the continued health sector emissions are generated where policies and programs have co-benefits for delivery of safe, quality care.2 The health through clinical care versus 40% from both health and the environment.3 buildings.1 workforce can also play a significant role in driving grassroots change and communicating the health impacts of climate change at the local level.

Objectives: Questions for consideration S

> Are these the right objectives? Are there alternate or additional objectives that should be considered?

¹ Wiser Carbon Neutral, Wiserhealthcare.org.au

² RACP 2021, Climate Change and Australia's Health Systems Report

³ CAHA 2021, Healthy, Regenerative and Just Report

Key Priority Areas and Actions

The priority areas identify at a strategic level where national attention, leadership and change is required to ensure the achievement of the Strategy's objectives. The actions identify existing activities underway as well as additional required initiatives, activities and policies.

The below table sets out the proposed strategies and starts to identify key actions. It is intended that the Strategy is a 'call to arms' involving a partnership approach with a broad range of stakeholders including state and territory government, non-government organisations, the private sector, academics and experts. It is important that the key priority areas and actions are broad enough to enable stakeholders to identify specific activities they can undertake to contribute to the overarching objectives of the Strategy.

Priority Areas for Action

1. Driving health promotion through emission reduction and sustainable health care practices

Rationale: The health sector has an ethical imperative to 'First, do no harm'. However, at present, it contributes approximately 7% of total national emissions. Reducing health sector emissions will have both a health and economic benefit. For example, NSW hospitals and health services saved an estimated \$7.1 million in 2019 through reducing electricity and gas consumption by nearly 47 million kWh. 4

- 1.1 Establish a National Health Sustainability and Climate Unit in the Department of Health and Aged Care to guide the healthcare sector towards environmentally sustainable, low carbon operations and support state and territory health jurisdictions to decarbonise.
- 1.2 Undertake data collection to enable monitoring and reporting to track progress on health sector emissions, including the development of baseline data and nationally agreed targets.
- 1.3 Identify opportunities to reduce the carbon footprint of medical devices, technologies, pharmaceuticals and delivery of services through available mechanisms eg procurement, contract and supply chain management.

⁴ Climate and Health Alliance, Submission to Federal Budget Recommendations for a health-led post COVID-19 economic recovery (building on the Framework for a National Strategy on Climate, Health and Well-being for Australia) January 2021

- 1.4 Encourage the provision of healthy and sustainably produced food within hospitals.
- 1.5 Incentivise the adoption of low or zero emissions vehicles within the health sector.
- 1.6 Incorporate sustainability and climate resilience into health care facility design, construction and operation.
- 1.7 Promote the recycling and re-use of furniture and medical equipment across the health system.
- 1.8 Drive reform and explore innovative approaches for more sustainable management of hospital waste

2 Improving emergency preparedness to equip the health sector for the impacts of climate change

Rationale: The frequency and intensity of emergencies, particularly those that are weather related, are expected to increase as a result of climate change. Ensuring that risk management and mitigation considers health threats and supports the health sector to build resilience is critical.

- 2.1 Support the healthcare sector to undertake climate risk assessments and adaptation planning at all levels: national, state, regional and local.
- 2.2 Work with the National Emergency Management Agency, the Australian Climate Service and states and territories to identify opportunities for early warning systems in relation to health threats associated with extreme weather events, and to support the quick and timely provision of public health advice in times of emergency.
- 2.3 Review all response and recovery plans to ensure that the needs of Aboriginal and Torres Strait Islander communities are included.
- 2.4 Support the development of mental health programs specific to the mental health impacts following extreme weather events, that are targeted towards vulnerable communities.

3 Building the evidence base and ensuring effective translation of research into policy

Rationale: Investing in and strategic coordination of climate health research will improve the evidence base for government responses to mitigate poor health outcomes linked to climate change.

- 3.1 Establish a national forum for jurisdictions and to share information and resources about existing climate change and health initiatives and best practices.
- 3.2 Invest in research to better understand emerging risks and impacts on the health of the Australian community at a national, state, regional and local level. Particular consideration should be given to considering the impacts of people who are vulnerable due to location, access to resources or personal circumstances.
- 3.3 Work with the Australian Climate Service to better understand and limit the health threats posed by climate change.
- 3.4 Provide opportunities for researchers and academics to take a more strategic and co-ordinated approach to accessing available research funding.
- 3.5 Provide opportunities for Australian researchers to engage with their international counterparts to share information and knowledge about the health impacts of climate change.

4 Investing in communication, education, and workforce capabilities

Rationale: An educated workforce can raise awareness and understanding about the health impacts of climate change and lead innovation in reducing health system emissions. Communication and education also play an important role in empowering the wider Australian population to respond to climate-related health risks.

- 4.1 Work with medical colleges to establish communities of practice which support health professionals to care for patients and populations affected by climate change and to provide sustainable healthcare to support sector-wide emissions reduction.
- 4.2 Undertake initiatives to increase awareness and understanding of the health workforce in relation to the health risks of climate change and the benefits of adapting to and mitigating those risks, while maintaining health and wellbeing.
- 4.3 Ensure the provision of high quality and adequate mental health support for healthcare providers.
- 4.4 Invest in programs which support the expansion of the Aboriginal and Torres Strait Islander health workforce with a focus on environmental health.
- 4.5 Promote opportunities for medical professionals to gain skills and knowledge about how they can support climate change and health outcomes in the delivery of services.
- 4.6 Support the development climate change and health curricula in partnership with specialised medical colleges for all relevant undergraduate and postgraduate health, medical, and aged care courses.
- 4.7 Provide small grants for the health sector to encourage the development of innovative local solutions to climate threats and health care sustainability.

5 Ensuring climate policy considers health impacts

Rationale: In responding to climate change, other areas of public policy including infrastructure, transport, technology, agriculture, and food production can directly impact public health. Considering potential health impacts as a part of climate change policy development across government will ensure better health outcomes.

- 5.1 Identify opportunities for Australia's foreign policy platform to support climate and health action
- 5.2 Support activities to consider the long-term security of energy, water and food systems that have a critical role in health outcomes.
- 5.3 Invest in the development and promote the use of sustainable health hardware in public housing
- 5.4 Promote the adoption of active transport options in new transport infrestructure.
- 5.5 Support Caring for Country initiatives that have an explicit connection to improving health outcomes for First Nation peoples.
- 5.6 Identify opportunities to streamline building code requirements to ensure infrastructure considers potential health impacts.
- 5.7 Encourage consideration of healthier and safer fuel options.

6 Monitoring and reporting on progress

Rationale: Regular reporting on progress against the objectives of the Strategy is required to inform future decisions, drive action and hold all stakeholders accountable. The development of nationally consistent data is critical to assess the impact and progress of government policies and programs.

Potential Actions

- 6.1 Establish data tools to measure and report on the economic value of health co-benefits of climate change mitigation and adaptation.
- 6.2 Develop robust indicators which allow for the monitoring of climate change risk and vulnerability and region-specific adaptation challenges, as well as to evaluate the effectiveness of programs and services.
- 6.3 Develop KPIs and targets for each area of the Strategy.
- 6.4 Provide annual reports on progress against the objectives of the Strategy.

Questions for consideration

- Is the intent of each Area of Focus clear? If not, how can it be improved?
- Are there any gaps in the Areas of Focus? What else should be considered?
- What other potential actions should be included for consideration, including across other levels of government and non-government organisations?
- How can the Areas of Focus better balance the broad and interdisciplinary nature of climate change and health whilst remaining focused on the scope of health policy and health systems?
- Should we articulate roles and responsibilities, and timeframes in the Strategy?
- Is there enough scope for the involvement of non-government organisations, the private sector and researchers/academics in the identified priority areas and actions?

Next Steps

Consultation

The Department is committed to undertaking broad consultation in relation to the development of the Strategy to ensure it reflects existing expertise and knowledge, as well as to ensure a shared sense of ownership and commitment to implementation.

The Chief Medical Officer has established an advisory group comprising a small number of experts to provide advice on climate and health issues. This group is informing the development of the Strategy (the CMO Advisory Group).

Given the shared arrangements for funding and delivery of health services, it is critical that a partnership approach is taken between the Australian and State and Territory governments in the development and implementation of the Strategy. The Health Chief Executives Forum (HCEF) will be consulted at key stages in the development of the Strategy and asked to facilitate engagement with Health Ministers. Further engagement with states and territories will occur throughout the development of the Strategy and as part of broader consultation activities.

See Attachment A for a high-level overview of the governance and consultation arrangements.

Consultation Process and Timeframe

Outlined below are the key milestones and consultation phases.

Stakeholder and Milestone	Notes	Date (indicative)
	all on A	
Convene CMOAG to establish scope and timing	Advisory Group comprising climate and health experts.	November 2022
of the Strategy, and provide feedback on draft	000000	
principles, objectives, priority areas and actions.	15 HE DEPT	
Commonwealth consultation/s	Inter-department committee meeting and intra-departmental consultation	December 2022
	leveraging existing mechanisms to review draft Discussion Paper.	
CMOAG (out of session)	Share draft Strategy incorporating feedback and revise strategy	January 2022
Minister/s update	Share draft Strategy with Ministers and seek agreement to progress with broader consultation.	February 2023

Engagement with jurisdictions, key non-	Broad consultation with key stakeholders including states and territories, peak	February 2022 –
government stakeholders and the public	bodies, private sector health providers, academics.	April 2023
	The draft Strategy will be published on the Department's website for feedback and input from all stakeholders and members of the public.	
CMOAG meeting	Share feedback from broad consultation and agree approach for revising Strategy.	April 2023
HCEF	Share draft Strategy with HCEF for feedback	May 2023
CMOAG meeting	Finalise Strategy for clearance	May 2023
Health Ministers, HCEF and AHPPC	Seek support of revised Strategy from Health Ministers with support of HCEF	June 2023
Finalisation of the Strategy	The release of the Strategy will be accompanied by a comprehensive	Mid-2023
	communications plan.	(July 2023)

Attachment A

Guidance and Leadership

Chief

Medical

Officer's

Advisorv

Group

(CMOAG)

Lead

governance

group

driving the

Strategy.

The

Department

of Health

and Aged

Care to

support

CMOAG.

KEY:

Federal Government

State and Territory

Sector **Stakeholders**

General Public

Authorising Environment

Federal Health Minister and Climate Change Minister. Responsible for the Strategy and final sign off. Other Commonwealth Ministers will also be consulted as required.

State and Territory Health Ministers. Responsible for endorsement and support of relevant actions within the Strategy.

Health Chief Executives Forum (HCEF). Responsible for state and territory input and facilitating Ministerial endorsement of the Strategy.

Broad Consultation

Department of Health and Aged Care - Intra-departmental working group

Co-ordinate a whole-of-department approach to the Government's priorities in relation to the health impacts of climate change.

Commonwealth Agencies - Inter-departmental committee (IDC)

Coordinate cross-portfolio policy issues regarding climate and health. This will include leveraging relationships and engaging with existing governance mechanisms.

State and Territory Health Departments

All jurisdictions will be invited to provide input to the Strategy.

Academia

Contribute to the evidence base to ensure that the Strategy uses best available research and data.

Medical Colleges

Provide specific information regarding the different medical specialities and areas of the health system.

Interest Groups

Provide input on specific areas of the healthcare system.

Public

Provide general feedback on the direction and content of the Strategy.



Australian Government

Ministerial Submission - Standard MS23-000207

Version (1)

Date sent to MO: 21 February 2023

Department of Health and Aged Care

RECEIVED

To: Mark Butler

2 8 FEB 2023

cc:

Assistant Militaterakearney Section

Subject: National Health and Climate Strategy: proposed approach to timing and consultation

Critical date: 13 March 2023, consultation will need to commence within the next few

months if we are to develop a draft strategy by mid-year.

Recommendation/s	:

1.

Agree to one of the options below to deliver a draft National Health and Climate Strategy (the Strategy):

Option a (recommended): Undertake a two-phase and comprehensive approach to stakeholder and a stakeholder a stakeho Agreed/Not agreed/Please stakeholder and public consultation

Option b (not recommended) Finalise the Strategy in mid-2023 via a truncated consultation proce

b. Agreed/Not agreed/Please discuss

Signature

Date: 77/52/2023

Comments:

Contact	Helen Grinbergs	First Assistant Secretary Office	Ph
Officer:		of Health Protection	M
Clearance	Professor Paul	Chief Medical Officer	Ph
Officer:	Kelly		M

Issues:

On 29 August 2022, you agreed to the proposed approach for developing the National Health and Climate Strategy (Strategy) including close collaboration with states and territories, consultation with a broad range of key stakeholders, and the establishment of an expert group to provide advice to the Chief Medical Officer (CMOAG) (MS22-001064).

- 2. The CMOAG met for the first time on 23 November 2022 where members provided significant feedback on the Draft Discussion Paper and agreed the Strategy should be developed quickly. However, Members also suggested the department should undertake a broader public consultation process. Stakeholders not directly involved in the CMOAG also seek reassurance from the department about broader public consultation in the development of Australia's first Climate and Health Strategy.
- 3. A discussion paper shared in confidence with CMOAG in Nov 2022 anticipated the Strategy would be finalised by mid-2023 and public consultation on the Strategy undertaken with key stakeholders (Commonwealth agencies, state and territories, academia, professional health networks, peak professional bodies, and the public) between February and April 2023. However, on closer review of the timeframes, and in order to meet stakeholder expectations, we recommend a phased approach to development of the Strategy, as follows (see Attachment A for further detail).
 - a) Consultation Phase (March July 2023): The National Health, Sustainability and Climate Unit (NHSC Unit) will engage with relevant agencies across the Commonwealth as well as states and territories and the wider public. A Consultation Paper is currently being developed and will be used to facilitate public discussion and feedback. Throughout:
 - The CMOAG will continue engaging on the development of the Strategy.
 - O Public comment will be invited on the Strategy through the department's Consultation Hult towards the middle of the year for a period of 6 weeks.
 - First Nations will also be engaged in the process.
 - b) Drafting and Finalisation Stage (Aug Nov 2023) Further targeted engagement will be conducted with state and territory governments, and key stakeholders. The NHSC Unit will then finalise the Strategy and seek your final approval by November 2023.
- 4. This approach will allow the NHSC Unit more time to conduct meaningful engagement with state and territory representatives. Engagement with state and territory officials will support state and territory buy-in and ensure the Strategy accurately reflects the extensive work of the jurisdictions in climate change and health.

Background:

- 5. The Chief Medical Officer established the Chief Medical Officer's Advisory Group to provide broad advice on health and climate issues, policies to address the health impacts of climate change, as well as support the development of the Strategy.
- 6. There are 17 members on the Group, which includes people with a wide range of expertise including healthcare sustainability, adaptation and resilience, First Nations health, industry, behaviour economics and social policy.
- 7. The Group met for the first time on 23 November 2022 where a Discussion Paper was provided and discussed. Feedback called for greater consideration of population health and prevention, mental health, First Nations consultation, health equity and multi-sectoral partnership within the Strategy. Feedback also suggested the Strategy establish clearer emissions reduction targets and timeframes for achieving them.
- 8. A Consultation Paper is being developed based on this feedback and will be provided to you prior to distribution.

Attachments:

A: Draft high-level National Health and Climate Strategy Project Plan.

Election Commitments / Budget Measures:

In the October 2022 Budget, the Government agreed to fund the development of Australia's first National Health and Climate Strategy and to establish a National Health Sustainability and Climate Unit at a total cost of \$3.4 million over four years (new funding of \$1 million is to be provided over two financial years from 2022-23 and the remaining \$2.4 million is coming from existing departmental resources).

Sensitivities:

Timeframes for development of the Strategy have not been publicly announced. However, in an article in Croakey Health Media (published on 2 December 2023), a journalist appears to have used the draft discussion paper provided to the Chief Medical Officer's Advisory Group in confidence, to announce that feedback would be sought from Stakeholders and members of the public between February and April 2023 and a final Strategy would be released in July 2023.

There are high levels of interest in the development of the Strategy from key stakeholders and an expectation there will be broad consultation with an expectation to provide input into the Strategy.

The draft timeframe has been discussed with the Department of Climate Change, Energy, the Environment and Water.



National Health and Climate Strategy | 2023 Project Plan

Month	Date Responsibility Activity				
.	February: Finalise Consultation Paper				
Febru ary	HCEF and HMM Update				
ч	 HCEF noted the Project Plan and agreed to support state and territory engagement in workshops. 				
	March – July: State and territory engagement and Public Consultation				
	Chief Medical Officer Advisory Group (CMOAG) Meeting				
	Discuss Draft Consultation Paper and consultation plan				
	AHPPC and subcommittee review				
	Review and comment on Consultation Paper out of session.				
	State and territory online workshop				
<u>></u>	Online workshop with state and territory representatives, to discuss Consultation Paper.				
or -	CMOAG Review				
March - July	Provide overview of state and territory feedback received on the Consultation Paper.				
Лаг	Public Consultation				
~	A series of workshops with members from academia, interest groups, and health professional networks to be run, to				
	provide input on the Strategy. Government representatives from the jurisdictions will also be invited.				
	An online submission portal will be made available on the Department's website for open public consultation on the				
	elements of the Strategy (minimum of 6 weeks).				
	Develop Strategy				
	NHSC Unit to review and incorporate all feedback on Consultation Paper (from state and territory reps., AHPPC,				
	enHealth and other Australian Government Departments).				
	July - August: Preparation of draft strategy and review by HCEF, HMM and Minister				
	CMOAG Review Provide draft Strategy to CMOAG and request feedback: Ministerial review				
ıst	Provide draft Strategy to CMOAG and request feedback:				
ngn	Ministerial review				
July - August	Send draft Strategy to Minister for comments and input State and territory online workshop				
uly	State and territory entities werkeness				
_	Online workshops with state and territory representatives, to discuss Draft Strategy.				
	HCEF and HMM review				
	Table draft Strategy at HCEF and HMM for review and input				
	September November: Finalise National Health and Climate Strategy				
1.	CMOAG Meeting				
September – November	Provide Final Strategy for review and feedback. Fig. 1: 6:				
em	Finalise Strategy				
lov	Review feedback from public consultation and stakeholder workshops.				
Se	Draft and finalise Strategy.				
	Minister Approval Final Strategy				
HCEF/ HMM Review Final Strategy					
Publish National Health and Climate Strategy					