

Public Health Recommendations				Prioritization Criteria				
Action	Status	Review Action, Revise Strategy, Remove, Keep as is	Proposed Language	Notes	Technical Feasibility (Low/med/High)	Impact (High/Low/med/None)	Cost-Effectiveness (High/Medium/Low/None)	Co-Benefits (High/Medium/Low/None)
Pathway: Support equitable adaptation to the public health impacts of climate change								
Strategy 19.a: Increase support for regional, municipal, and community partners to mitigate, prepare, and respond to climate impacts on health.								
N/A	N/A	New	Explore and implement strategies to enhance local emergency preparedness, response, and recovery capacity (e.g., increase funding and expand authority of RPS and/or county government; increase direct state funding, training, and technical assistance provided to municipalities).	RPS or county governments would likely need additional funding, staffing, and authority to better support municipalities. State support could be bolstered by dedicating additional resources to VEM Regional Coordinators and/or VEM Local Health Office Emergency Preparedness Specialist.	yes	High	med	High
N/A	N/A	New	Provide funding and technical assistance to local partners to develop community resilience hubs that can serve as places for learning, collaboration, resource access, and refuge in response to climate-related hazards and other community needs.	Potential uses could include daytime relief overnight sheltering from flooding, power outages, extreme temperatures, hazardous air quality, and other climate-related hazards.	yes	High	med	High
N/A	N/A	New	Provide funding and technical assistance to municipalities and local organizations to reduce health impacts of climate change for the disproportionately affected populations they serve, through preparedness, facility operation, and support for individuals and households.	Overburdened and underserved communities, unshoused individuals, older adults, children, people with health sensitivities, outdoor workers, and other environmental justice populations as defined in Vermont's Environmental Justice law. Supported strategies should include: 1) emergency preparedness and response planning, 2) adapting facilities (including hospitals, residential care facilities, homeless shelters, places used for emergency shelter, and other facilities housing people with health vulnerabilities) to be more resilient to climate-related hazards including flooding, extreme temperatures, power outages, and hazardous air quality, and 3) outreach and other support for disproportionately affected populations receive extra assistance.	yes	High	med	High
Strategy 19.b: Increase support for individuals and households to prepare and adapt to climate impacts on health.								
N/A	N/A	New	Review/improve existing tools and/or develop new tools to better identify and support Vermonters needing extra assistance during an emergency, including state systems such as the Climate Assistance Registry for Emergencies and its integration with the Vermont 2-4-4 system, support for local systems managed by municipal and community partners, or other programs.		yes	High	High	High
N/A	N/A	New	Provide funding for resilience equipment, supplies, and services that help reduce the health impact of climate-related hazards for income-qualified households needing extra assistance.	This would require new funding & programming. The intent is to provide financial support for resilience needs in a similar way to existing financial support for energy efficiency (e.g., through heat pump and EV rebates). Resilience equipment and strategies should address health risks related to flooding, power outages, extreme temperatures, hazardous air quality, humidity, vectorborne diseases, and other climate-related hazards, and should include trees and other vegetation shade, window treatments (shades, thermal barriers), efficient air conditioning (heat pumps), fans, air purifier, mechanical ventilation (e.g. ERVs), water intrusion and moisture mitigation & management, backup power, window screens, private drinking water testing and treatment, etc.	yes	High	med	High
N/A	N/A	New	Increase funding for state-contracted community mental health services, to provide funded partners with more capacity to address anxiety, depression, distress, and trauma caused by climate change and climate-related disasters.		yes	High	med	High
Strategy 19.c: Expand state capacity to plan, prepare, and respond to climate-related health hazards.								
N/A	N/A	New	Action: Direct state agencies to collaborate across relevant agencies to develop, maintain, and exercise state response plans and mechanisms for addressing climate-related health hazards including flooding, extreme temperatures, power loss, hazardous air quality, and infectious disease.		yes	med	High	med
N/A	N/A	New	Action: Fund increased state staff capacity and resources to better plan, prepare, and respond to climate-related health hazards, including increased support for regional, municipal, and community partners.		yes	High	med	High
Strategy 19.d: Improve tools and mechanisms for increasing awareness about climate impacts on health and potential adaptation strategies.								
N/A	N/A	New	Routinely review and update publicly-available information about the highest priority climate-related health risks for Vermont.	VEM is already doing this, but it's important to update.	yes	High	High	low
N/A	N/A	New	Communicate to the public, communities, and state partners about climate-related health risks and offer guidance about what individuals and communities can do to reduce their risks, with specific focus on disproportionately affected populations (including overburdened and underserved communities, unshoused individuals, older adults, children, people with health sensitivities, and outdoor workers).	VEM is already doing this, but this work could be expanded.	yes	High	High	med
N/A	N/A	New	Direct state agencies to develop improved tools and approaches for communicating with community partners, with people in languages other than English, and with other underserved populations (including rural, unshoused, and underserved populations).	VEM, ANH, and VDH are already working on this to some extent.	yes	High	High	High

V. Cumulative Priority Ranking

The overall priority ranking will be determined as follows: For HIGH and MEDIUM priorities (all other recommendations will be LOW or HIGH), make priorities with those forward if with an equity (ranging and consistent) as the sub-number will need to be updated to achieve a MEDIUM or LOW priority action.

ACTION	COST-EFFECTIVENESS	CO-BENEFITS	TECHNICAL FEASIBILITY	OVERALL PRIORITY RANKING
19.1a	High	High	Med	High
19.1b	High	High	Med	High
19.1c	High	High	Med	High
19.1d	High	High	Med	High
19.2a	High	High	High	High
19.2b	High	High	High	High
19.2c	High	High	High	High
19.2d	High	High	High	High
19.3a	High	High	High	High
19.3b	High	High	High	High
19.3c	High	High	High	High
19.3d	High	High	High	High
19.4a	High	High	High	High
19.4b	High	High	High	High
19.4c	High	High	High	High
19.4d	High	High	High	High

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