



# Operational Methodology

Transformation of healthcare systems and services into low-carbon, climate-resilient models

December 2025, version 1

## About this document

This Operational Methodology was designed to provide a structured, adaptable approach to guide healthcare systems in low-resource settings through the process of becoming climate-resilient and low-carbon models. This methodology is pilot tested with our partners.

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# 1. Background

Climate change and broader planetary crisis have an increasing impact on human health which results in raising pressure on healthcare systems and services which are very often already facing difficulties to cover current needs. The contribution of healthcare activities to global emissions represents 4.4% ([global footprint by HCWH and Arup](#)). Climate adaptation and mitigation are unavoidable. Healthcare must transform to respect the planetary boundaries<sup>1</sup>.

The research collaboration between the Climate Action Accelerator (The Accelerator) and the Agence Francaise de Développement (AFD) aims to **catalyse the transformation of healthcare systems and services towards climate-resilient and low-carbon models**. The Accelerator and AFD developed an operational [Climate Action Toolbox for Healthcare](#) (Toolbox) to guide healthcare systems management teams, hospital directors, and management teams of healthcare facilities and services in designing climate action plans - adaptation and mitigation comprehensively - to strengthen healthcare resilience and to lower their environmental impact.

The Climate Action Toolbox for Healthcare has been co-designed with relevant stakeholders and experts (mainly within and through the [Future of Hospitals Initiative](#)), and is pilot tested with the Accelerator and AFD partners in South Africa. Specifically, the pilot aims to empower health authorities to co-design and adopt a comprehensive Climate Action Plan covering both adaptation and mitigation measures within their health facilities.

The Accelerator position itself as a knowledge partner to enable the actions and capacity development of its counterparts. It accompanies them in the capitalisation and dissemination of lessons learned so they feed the standards of climate action in the health sector.

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<sup>1</sup> [Planetary boundaries - Stockholm Resilience Centre](#): "The planetary boundaries concept presents a set of nine planetary boundaries within which humanity can continue to develop and thrive for generations to come."

## 2. Purpose

The objective of this operational methodology is to **empower partner health authorities in operationalising comprehensive climate-resilient and low-carbon actions within their health system and facilities.**

This will be achieved through the leverage of the Accelerator's [Toolbox](#) and Operational Methodology to guide partners through a structured, contextualized, and collaborative process to design, implement, finance, monitor, and evaluate effective climate actions.

The methodology specifically targets the management teams of healthcare systems, facilities, and services – such as personnel of health authorities and hospital directors – who are responsible for planning and operation decision-making. This approach includes capacity-development sessions to enable them to embed climate resilience into routine health service planning and operations.

### 2.1. Outputs and Deliverables

The Operational Methodology has the following possible outputs and concrete deliverables which are determined with the partner:

- Comprehensive Climate Action Plan: Full document articulating adaptation and mitigation strategies, responsibilities, timelines, and budgets.
- Capacity Development Toolkit: Templates, selected tools, slides, and training materials.
- Investment Roadmap/Plan: Financing strategy with mapped funding sources, budget estimates, and partnership models.
- Pilot Plan & Engagement Strategy: Structured Gantt chart plan, resource list, and community engagement protocol ready for field testing.
- Monitoring & Evaluation Framework & Dissemination Package: Indicator dashboard template, reporting cycle calendar, case study templates, and dissemination slide deck.

The outputs are dependent on selected priority intervention areas and according to time and resources allocated.

### 3. Technical Collaboration Approach

The three phases of the technical collaboration approach are explained in detail below. For each phase the objective, methodological approach, a timeframe estimate, example of a capacity development programme, supporting tools, and possible outputs are presented. A timeline for a six-month collaboration is provided in [Figure 1](#).

*Disclaimer: the timings indicated are rough estimates and can vary extensively based on availability of the partners, and the depth and quality of the analyses.*

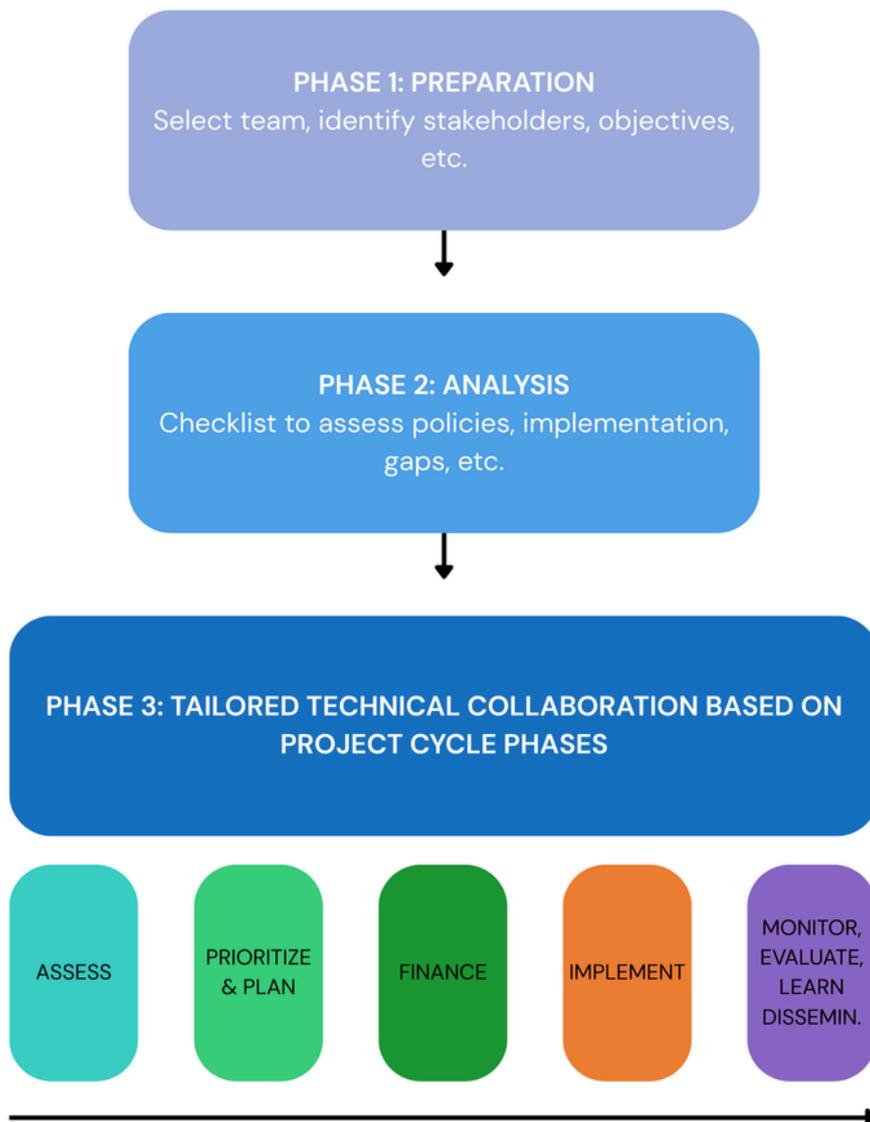


Figure 1: Technical Collaboration Approach Workflow

## Phase 1: Prepare the analysis and collaboration

**Objective:** By the end of Week 8, identify a climate and health focal point and set together the objectives of the collaboration (including defining roles, project timeline and key milestones).

This stage allows to prepare the collaboration and build a shared baseline understanding of the local context and priorities.

**Alternative:** Instead of a single focal point a small Climate-Health core team of maximum six members with defined roles (Responsible, Accountable, Consulted, and Informed (RACI) matrix) can be established.

### Methodological Approach:

- Stakeholder mapping (e.g., MoH, hospitals and clinics, local governments, civil society).
- Desk review of climate and health policies (strategies, programmes, action plans, etc.) combined with key informant interviews.
- Use of participatory methods for joint objective-setting of the collaboration, defining roles, project timeline, milestones, etc.

Timeframe: 8 weeks; week 1-8

### Capacity Development Programme:

- Workshop 1: Introduction to climate-health linkages and the [Climate Action Toolbox for Healthcare](#)

### Outputs:

- List of key stakeholders
- Contextual analysis summary
- Workshop materials (agenda, slides, attendance list)
- Analysis plan for [Phase 2](#)



Phase	Activity	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6
1. Preparation	Identify climate–health focal point/team	■	■				
	Stakeholder & policy mapping	■	■				
	Joint project objective setting	■	■				
2. Analysis	Complete Checklist			■			
	Gap analysis			■			
	Stakeholder analysis			■			
	Draft report of progress analysis			■			
3. Tailored Technical Collaboration	<b>Step A:</b> Climate vulnerability, capacity assessment, and carbon and environmental footprint (this activity might last beyond the 6month pilot timeframe)				■	■	■
	<b>Step B:</b> Prioritize & plan climate adaptation and mitigation interventions.				■	■	
	<b>Step C:</b> Finance climate adaptation and mitigation.				■		
	<b>Step D:</b> Implement climate adaptation and mitigation interventions (depending on targeted action areas).				■	■	■
	<b>Step E:</b> Monitor, evaluate, learn, disseminate.				■	■	

Table 1: Timeline for the Technical Collaboration Approach

## Phase 2: Analyse climate action in the healthcare system

**Objective:** To tailor the technical collaboration according to the status of climate-health integration within the healthcare system.

By the end of Week 12, complete a baseline assessment— review and status of policy and programme, carbon and environmental footprint, vulnerability and capacity assessment, and gap analysis—and produce a report highlighting priority intervention areas, objectives, and timelines.

### Methodological Approach:

- Checklist to examine the status of:
  - Strategic commitment and governance
  - Human and institutional capacities, skills, and competencies
  - Policy and Regulatory Alignment
  - Baseline climate information: carbon and environmental footprint & Vulnerability and Capacity Assessments
  - Financing and resource mobilization
  - Implementation of adaptation/mitigation measures
- Gap analysis
- Stakeholder analysis
- Based on identified gaps and opportunities from Phase 2, set scope, objectives, timelines and priorities for [Phase 3](#).

Timeframe: 4 weeks; week 8–12

### Capacity Development Programme:

- Workshop 2: Analysis of the healthcare system and introduction to checklist

### Tools:

- Checklist ([Annex 1](#))

### Outputs:

- Stakeholder mapping report (influence–interest matrix)
- Completed Checklist with identified gaps and starting points for technical collaboration
- Carbon and environmental footprint and climate vulnerability and capacity assessments status overview (if available)
- Report of progress analysis with results from Phase 2 and recommendations for [Phase 3](#), highlighting priority intervention areas (feasible in the allocated collaboration time)

## Phase 3: Implement the tailored technical collaboration

This phase is based on the steps of climate and health transformation inspired from [WHO guidance](#) and includes an offer of Capacity Development Programme.

**Objective:** Between Weeks 12 and 24, co-develop and validate with the partner a tailored priority plan –including investment plan and assessment plan of the carbon footprint and vulnerabilities of the healthcare system– comprising prioritized adaptation and mitigation interventions, financing strategy, implementation roadmap, and monitoring & evaluation framework.

### Methodological Approach:

Depending on the needs and expectations, partners may receive targeted support across one or more of the following climate and health transformation steps. The time needed will be agreed upon with the partners according to the ambition and corresponding effort.

### Case Study 1: Mozambique’s vulnerability and adaptation assessment

In Mozambique – a country that is highly vulnerable to the effects of climate change – natural hazards over the past 42 years have significantly impacted the health system. To assess the vulnerability and adaptation needs of Mozambique’s health sector, a six-step methodology proposed by the World Health Organization and the Intergovernmental Panel for Climate Change was conducted. The Health Vulnerability Index was calculated from 161 regions using historical climate, epidemiological, and socio-economic data, based on exposure, sensitivity, and adaptive capacity. Results show clear spatial patterns of climate exposure and differences in vulnerability across districts, with high vulnerability in some districts and lower levels in major urban centres. The findings highlight Mozambique’s climate vulnerability and the need for targeted adaptation strategies to protect livelihoods, the economy, and public health. The assessment provides a foundation for developing strategies and adaptation actions.

(Muleia, R. et al. (2024). Assessing the Vulnerability and Adaptation Needs of Mozambique’s Health Sector to Climate: A Comprehensive Study. *Int. J. Environ. Res. Public Health*, 21, 532. <https://doi.org/10.3390/ijerph21050532>)

## STEP A: Assess the carbon and environmental footprint and the climate vulnerabilities and capacities

**Learning & Planning Objective:** Co-develop plans of carbon and environmental footprint and/or climate vulnerability and capacity assessments of the health systems and facilities.

Priority action points include:

- Develop capacities to conduct or update assessments of:
  - Climate Vulnerability and Capacity Assessment / Vulnerability & Adaptation Assessment
  - Carbon and environmental footprint

Timeframe: 16 weeks (this activity might last beyond the 6-month pilot timeframe)

Capacity Development Programme:

- Workshop 3: Climate Vulnerability and Capacity Assessment
- Workshop 4: Measuring Healthcare Greenhouse Gas Emissions

Tools:

- Climate Vulnerability and Capacity Assessment / Vulnerability & Adaptation Assessment (for healthcare systems)
- Carbon footprint calculators

Outputs:

- Climate Vulnerability and Capacity training materials & protocols
- Draft Climate Vulnerability and Capacity plan
- Carbon and environmental footprint protocol

Please refer to Case studies [1](#) (above) and [2](#) (below) for concrete examples.



### Case Study 2: Nepal's Health System's Baseline Carbon Footprint Assessment

In line with its COP26 commitments to build a climate-resilient, low-carbon health system, Nepal's Ministry of Health and Population partnered with WHO to conduct its first national baseline assessment of greenhouse gas emissions from the health sector. The study, covering 2022, used the Climate Impact Checkup tool to estimate emissions across various types of healthcare facilities, using both primary and secondary data from all seven provinces and three ecological zones.

Nepal's health sector was found to emit 4.1% of the country's total emissions and 0.002% of global emissions. Most emissions came from indirect sources (58.2%), especially the supply chain (50.4%), followed by direct sources (40.8%) like fugitive emissions from cooling and fire suppression, and purchased electricity.

This study serves as a foundational step toward developing a sustainable, low-carbon health system, offering actionable recommendations such as adopting energy-efficient technologies, clean energy, greener transport, and improved waste management.

(Government of Nepal. Ministry of Health and Population. (2024). Baseline Assessment of GHG Emissions of Nepal's Health Sector. Available [here](#).)

## STEP B: Prioritize & plan climate adaptation and mitigation interventions

**Learning & Planning Objective:** Facilitate skill-development in intervention prioritization with timelines and responsibilities.

Priority action points include:

- Review key action areas of the [Climate Action Toolbox for Healthcare](#) (see [table 2](#) below)
- Prioritize CRESH categories
- Draft or update a Climate Action Plan
- Align with and implement into national health and climate strategies

Community Engagement & Health Promotion
Service Delivery (health service provision; clinical practices)
Early Warning Systems & Emergency Preparedness
Health Workforce
Infrastructure & Energy
Water, Sanitation, Hygiene, Waste (incl. Hazardous materials)
Products (supply & medical products; technology & biomedical; food & nutrition)
Health Information and Knowledge Management (baseline analysis; carbon footprint assessment; vulnerability & capacity assessment; costs; monitoring & evaluation)
Leadership & Governance
Financing

Table 2: 10 Key Action Areas for Healthcare Transformation

Timeframe: 6–8 weeks

Capacity Development Programme:

- Workshop 5: Prioritization workshop
- Workshop 6: Climate Action Plan formulation
- Workshop 7 and more: Open (based on specific needs)

Tools:

- [WHO Operational framework for building climate resilient and low carbon health systems](#)
- Others (to be identified in the [Climate Action Toolbox for Healthcare](#))

Outputs:

- Prioritization scoring matrix
- Draft of intervention plan
- Workshop outcomes report

Please refer to [Case study 3](#) (below) for a concrete example.

### Case Study 3: Health in Kenya's National Climate Change Action Plan

Kenya's National Climate Change Action Plan (NCCAP) 2023–2027 integrates the health sector into its national climate response, recognizing that climate change already affects public health through frequent droughts, floods, and disease outbreaks. To address this, Kenya launched its first Climate Change and Health Strategy (2023–2027), aligned with the NCCAP, which outlines priorities for strengthening health system resilience and reducing emissions from the sector.

The strategy focuses on protecting vulnerable populations, improving infrastructure, building preparedness for climate-related health emergencies, training for healthcare workers, and promoting sustainable healthcare practices. These actions contribute to Kenya's broader goal of reducing greenhouse gas emissions by 32 % by 2030.

Development of the plan involved broad consultations with stakeholders across sectors, ensuring that local needs and equity considerations were reflected. The Ministry of Health and the Climate Change Directorate are now working together to implement the strategy, with support from country governments and international partners.

By embedding health into its climate agenda, Kenya demonstrates how LMIC can pursue climate-resilient, inclusive development.

(Government of Kenya (2023). National Climate Change Action Plan (Kenya) 2023–2027. Ministry of Environment, Climate Change and Forestry, Nairobi, Kenya. Available [here](#).)

## STEP C: Finance climate adaptation and mitigation

**Learning & Planning Objective:** Co-conduct a finance mapping and outline an investment plan identifying key actions, funders and budget estimates (e.g., USD 500K target).

Priority action points include:

- Map existing finance sources
- Identify finance gaps
- Identify new resources for financing the climate action plan

Timeframe: 2–4 weeks (to identify funding opportunities)

Capacity Development Programme:

- Workshop 8: financing your climate action plan / develop your investment plan

Tools:

- [WHO overview of Finance for Health and Climate Change](#)

Outputs:

- Co-developed finance mapping method
- Investment plan outline

Please refer to [Case study 4](#) (below) for a concrete example.

#### Case Study 4: Lao PDR's Climate-Resilient Health System Funded by the Green Climate Fund

In October 2023, Lao PDR achieved a significant milestone by securing USD 25 million from the Green Climate Fund – along with co-financing totalling USD 3.2 million – to bolster its health system's resilience to climate risks. The Three Executing Entities are the Ministry of Health, Save the Children International Laos, and Save the Children USA. The project includes WHO as an implementing partner. Laotian provincial and district government authorities will also engage in implementation. The project targets 100 health facilities and 250 communities across 25 climate-vulnerable rural districts, benefiting more than 1.8 million people. It aims to strengthen health system governance, integrate climate data into early-warning systems, upgrade climate-resilient infrastructure, and enhance workforce capacity to manage climate-sensitive diseases such as dengue and diarrheal illnesses (among other activities).

(Green Climate Fund. (2023). Funding Proposal. SAPO30: Strengthening Climate Resilience of the Lao People's Democratic Republic (PDR) Health System. Available [here](#).)

## STEP D: Implement climate adaptation and mitigation interventions

**Learning & Planning Objective:** Guide partners in choosing and using the right implementation tools according to their priorities.

Priority action points include:

- Identify tools for implementing the Climate Action Plan
- Pilot testing solutions
- Community engagement and participatory implementation

Timeframe: can vary according to the scope of action areas targeted; 4–24 weeks

Capacity Development Programme:

- Workshop 9 and more: choosing the right implementation tools, contextualizing tools

Tools:

- The Accelerator's [Climate Action Toolbox for Healthcare](#)

Outputs:

- Draft of pilot implementation plan

Please refer to [Case study 5](#) (below) for a concrete example.

### Case Study 5: Climate Adaptation & Health Resilience in São Tomé and Príncipe

In response to rising climate threats—such as floods, sea-level rise, and extreme weather—São Tomé and Príncipe implemented a multi-sectoral project to strengthen health resilience in the coastal community of Santa Catarina. With support from the World Bank's Climate Change Adaptation Project for Coastal Areas, the country invested USD4.1million in climate risk mapping, community preparedness, and health infrastructure improvements. The project will be implemented over four years and aligns with the UNFCCC and Sendai priorities from 2015–2030.

Key interventions include a risk study and cartographic mapping of the affected areas, estimation of cost and value of implementing actions and resilience measures, new structures to be incorporated into affected areas, and mobilization of local institutions and affected communities.

(WMO & WHO. (2019). Climate change and health resilience actions in São Tomé and Príncipe. Available [here](#))

## STEP E: Monitor, evaluate, learn, disseminate

**Learning & Planning Objective:** Support partners in building a Monitoring & Evaluation framework with a list of Key performance indicators and draft a knowledge-sharing and dissemination strategy.

Priority action points include:

- Develop monitoring indicators (regarding resilience, emissions, co-benefits), evaluation planning
- Explore mixed method monitoring and evaluation (qualitative + quantitative), outcome measurement framework, cost modelling, data collection systems and reporting cycles
- Documentation and dissemination of lessons learned (workshops, case studies, conferences)

Timeframe: 4-6 weeks

Capacity Development Programme:

- Workshop 10: Outcome Measurement Framework & Cost Modelling
- Workshop 11: Knowledge sharing and feedback session
- **Strategic and technical support:** regular check-ins and on-demand support

Tools:

- Outcome Measurement Frameworks, MEAL Frameworks
- Others (to be identified)

Outputs:

- Monitoring & Evaluation framework document
- Reporting dashboard template
- Dissemination slide deck & case study template

Please refer to [Case study 6](#) (below) for a concrete example.



## Case Study 6: Monitoring Evaluation and Learning – UAE–Belém Work Programme

The UAE–Belém Work Programme, launched to operationalize the Global Goal on Adaptation, highlights the importance of robust Monitoring, Evaluation, and Learning (MEL) systems as a foundation for effective climate resilience planning—including in the health sector. A key milestone has been the development of globally relevant indicators across priority sectors, including health, to enable countries to track adaptation progress in a consistent and meaningful way.

In 2024, expert groups convened to refine these indicators and address common data and capacity challenges. The process emphasized country ownership, iterative learning, and alignment with national and global frameworks, such as the Sustainable Development Goals and the Sendai Framework for Disaster Risk Reduction. The MEL approach is designed not only to report on progress but to inform decision-making and improve outcomes over time. As part of this work, countries are encouraged to integrate these indicators into their national systems by 2030 to support transparent, evidence-based climate adaptation planning.

(IISD. (2024). How to Track Adaptation Progress: Key questions for the UAE–Belém work programme at COP 29. Available [here](#).)

## 4. Piloting the operational methodology

Piloting this operational methodology with partners serves to test, refine, and validate the approach in different healthcare systems. We aim to document case studies and advocate for broader dissemination.

At this stage, the Climate Action Accelerator focuses on providing technical guidance and knowledge transfer to enable health authorities to apply this methodology within their own system at different levels.

Piloting this operational methodology aims to build national ownership and create the foundation for future expansion across countries facing similar climate and health challenges.

	Health authority	Technical partner*	Others
<b>PHASE 1: Preparation</b>	Can lead or co-lead stakeholder engagement, define pilot scope, nominate focal point	Co-lead (visit if required); provide methodology and tools; organize workshop	Consultation of academic and technical partners
<b>PHASE 2: Analysis</b>	Complete checklist; (co)lead gap analysis; validate report	Conduct progress analysis and provide recommendations for Phase 3	
<b>PHASE 3: Tailored Technical Collaboration</b>	Lead the implementation of the identified priority action areas	Support; technical inputs	
✓ <b>Step A: Assess</b>	Lead data collection; provide access to facilities and existing data	Provide tools and training; support analysis	Partners or consultants may assist in data analysis
✓ <b>Step B: Prioritize &amp; Plan</b>	Lead prioritization workshop; draft Climate Action Plan	Strategic and technical support	Experts may provide support
✓ <b>Step C: Finance</b>	Lead identification of financing opportunities, writing proposals, integrating climate action into budget	Strategic and technical support	Collaboration with donors
✓ <b>Step D: Implement</b>	Lead implementation	Operational and technical support; capacity development	Possible co-implementation with partners
✓ <b>Step E: MEAL</b>	Lead activities	Operational and technical support	Academic partner may support

Table 3: Division of responsibilities during the project phases

\* for example, the Climate Action Accelerator

## 5. Conclusion

This operational methodology represents a structured approach to support the transformation of health systems and services towards climate-resilient and low-carbon models. It is tested in South Africa to assess its practicality, gather real-world experience and refine the process. Implementing this pilot and feedback from partners will be crucial to consolidate the results and develop an improved, adaptable methodology that can be applied in different contexts. The *Agence Française de Développement*, the Climate Action Accelerator and their partners, including the Future of Hospitals and Health Systems (FHHS) initiative, are committed to advancing these joint efforts and amplifying their impact to strengthen climate action in the health sector.

## Annex 1: Analysis – Checklist to assess healthcare system progress towards a climate-resilient and low-carbon model

To guide healthcare systems in assessing their progress towards climate-resilient and low-carbon models.

### 1. Strategic Commitment and Governance

Criteria	Not started	In progress	Achieved	Notes
Leadership commitment to climate action is documented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Climate action included in organizational mission/vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A climate and health focal point or team is appointed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Governance structure supports climate-resilient decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 2. Policy and Regulatory Alignment

Criteria	Not started	In progress	Achieved	Notes
National climate and health policies are identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Climate action plan aligns with National Determined Contributions and/or Sustainable Development Goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Internal policies integrate climate mitigation/resilience goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 3. Risk and Vulnerability Assessment

Criteria	Not started	In progress	Achieved	Notes
Climate-related hazards and health risks identified (e.g., Climate Vulnerability and Capacity Assessment / Vulnerability & Adaptation Assessment done)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health system vulnerability assessed (infrastructure, services, supply)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Community-level exposure and capacity assessed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 4. Carbon and environmental footprint Measurement

Criteria	Not started	In progress	Achieved	Notes
Carbon and environmental footprint baseline assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emissions hot spots identified (energy, transport, procurement, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reporting system in place for regular updates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 5. Climate Action Planning

Criteria	Not started	In progress	Achieved	Notes
Drafted climate action plan with defined mitigation and adaptation goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Plan includes measurable targets, timelines, and roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stakeholder consultation integrated in planning process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## 6. Financing and Resource Mobilization

Criteria	Not started	In progress	Achieved	Notes
Budget allocated for climate-related interventions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Funding sources explored (e.g., proposal submitted for fundraising)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Financial sustainability plan (business plan / return of investment) in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## 7. Implementation of Climate Solutions

Criteria	Not started	In progress	Achieved	Notes
Measures to improve climate-resilience are defined and being implemented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Actions implemented to reduce carbon and environmental footprint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Workforce training on sustainable and climate-resilient healthcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## 8. Monitoring, Evaluation, Learning, Dissemination

Criteria	Not started	In progress	Achieved	Notes
Indicators developed to track progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Internal reviews or evaluations conducted regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Learnings shared with peers or included in policy feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## Scoring and Needs (Optional)

You can assign points as follows:

**Not Started = 0 | In Progress = 1 | Achieved = 2**

**Total Score = \_\_/ 48**

Score range	Needs
0–10	Initiating
11–20	Emerging
21–30	Advancing
31–48	Leading



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