

Lower Thames Crossing

9.151 Draft Agreed Statement of Common Ground between (1) National Highways and (2) NHS Kent & Medway Integrated Care Board

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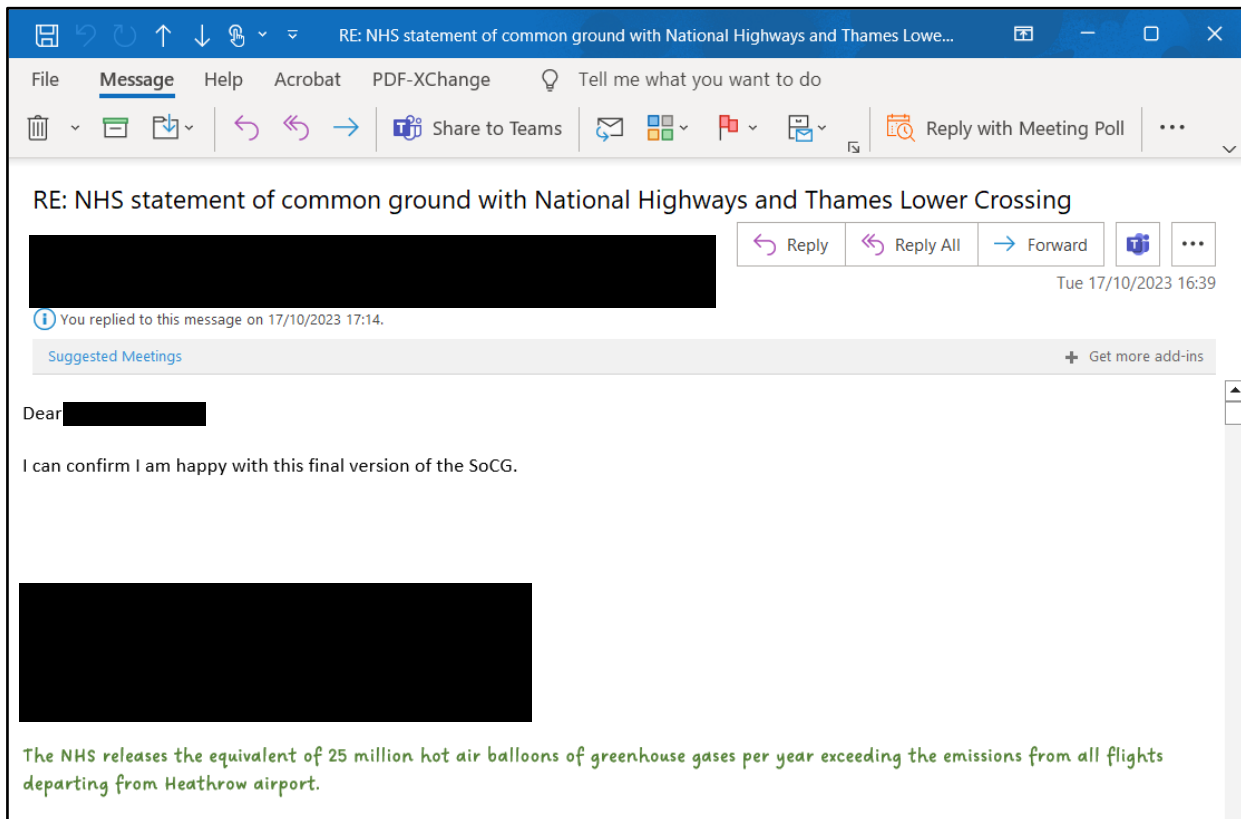
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VERSION: 1.0

Status of the Statement of Common Ground

This is an Agreed Draft Statement of Common Ground with matters outstanding.

National Highways and the NHS Kent & Medway Integrated Care Board agree that this draft Statement of Common Ground is an accurate description of the matters raised and the current status of each matter.



A high-level overview of the engagement undertaken since the DCO Application was submitted on 31 October 2022 is summarised in Table A.1.

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1 Introduction

1.1 Purpose of the Statement of Common Ground

- 1.1.1 This Statement of Common Ground (SoCG) has been prepared in respect of the Development Consent Order (DCO) application for the proposed A122 Lower Thames Crossing (the Project) made by National Highways Limited (the Applicant) to the Secretary of State for Transport (Secretary of State) under section 37 of the Planning Act 2008 on 31 October 2022.
- 1.1.2 A request for a SoCG between the Applicant and the NHS Kent and Medway Integrated Care Board was made by the Examining Authority in the notification of Preliminary Meeting (Rule 6 Letter) [[PD-013](#)].
- 1.1.3 The SoCG has been produced to confirm to the Examining Authority where agreement has been reached and where agreement has not been reached. Where matters are yet to be agreed, the parties will continue to work proactively to reach agreement and will update the SoCG to reflect areas of further agreement.
- 1.1.4 This version of the SoCG has been submitted at Examination Deadline 6.

1.2 Principal Areas of Disagreement

- 1.2.1 On 19 December 2022, the Examining Authority made some early procedural decisions to assist the Applicant, potential Interested Parties and themselves to prepare for the Examination of the application.
- 1.2.2 One such procedural decision was to use a tracker recording Principal Areas of Disagreement in Summary (PADS). This tracker is known as the PADS Tracker.
- 1.2.3 The PADS Tracker provides a record of principal matters of disagreement emerging from the SoCG and will be updated alongside the SoCG as appropriate throughout the Examination with the expectation that a revised PADS Tracker should be submitted at every Examination deadline.
- 1.2.4 The NHS Kent and Medway Integrated Care Board do not have a PADS Tracker as there are no disagreed matters at this time. All matters remain under discussion and are reflected in Table 2.1.

1.3 Terminology

- 1.3.1 In the matters table in Section 2 of this SoCG, “Matter Not Agreed” indicates agreement on the matter could not be reached following significant engagement, and “Matter Under Discussion” where these points will be the subject of ongoing discussion wherever possible to resolve, or refine, the extent of disagreement between the parties. “Matter Agreed” indicates where the issue has now been resolved.
- 1.3.2 At the time of Deadline 6, all matters are “Matters Under Discussion”.

2 Matters

2.1 Movement of outstanding matters

- 2.1.1 The outcome of discussions to date are presented in Table 2.1 which details and presents the matters which have been agreed, not agreed, or are under discussion between (1) the Applicant and (2) the NHS Kent and Medway Integrated Care Board.
- 2.1.2 In the 'Item No.' column in Table 2.1, 'Rule 6' indicates a matter entered in the SoCG as a result of a request in the Rule 6 letter, 'RRN' indicates a matter entered into the SoCG as a result of content in the Relevant Representation, 'RRE' indicates an existing SoCG matter that was also raised in the Relevant Representation and 'DLX' indicates a new matter added during examination at/around that deadline.
- 2.1.3 At Examination Deadline 6 there are six matters which all currently remain under discussion.
- 2.1.4 Subsequent versions of this SoCG will outline the changes between versions.

Table 2.1 Matters

| Topic | Item No. | NHS Kent & Medway Integrated Care Board Comment | The Applicant's Response | Application Document Reference | Status |
|---|-------------|--|---|--|-------------------------|
| Population and Human Health | | | | | |
| Construction workforce impacts on health services | 2.1.1 (DL6) | <p>The Kent & Medway Integrated Care Board (ICB) is concerned about the impact of a large construction workforce and their families on local health services and on available capacity within their services.</p> <p>The ICB requests that the Applicant considers an update to REAC Commitment PH002 'Worker healthcare' to ensure that the Integrated Care Partnerships have a consultation and approval role in agreeing the range of medical and occupational healthcare services required to meet the physical and mental health needs of the construction workforce. Should the Applicant agree to this change, this matter would be agreed.</p> | <p>The Applicant's assessment of human health aims to reduce the impacts of both construction and operation on local communities.</p> <p>Construction workforce numbers are estimated to peak at 4,514 in 2027 (total for area to the north and south of the Thames). Assumptions indicate that 35% of the workforce will live at home, meaning approximately 1,580 workers are likely to be currently registered with local GP practices. The remaining 2,934 construction workers are likely to be additional to the area and may require access to primary healthcare services.</p> <p>The Workers Accommodation Report makes assumptions regarding where workers will be accommodated – this is based on 60-minute commute time catchment areas by car and public transport.</p> <p>Welfare facilities will be in place at all main construction compounds. Comprehensive healthcare requirements are to be included in contracts for Delivery Partners.</p> <p>Contractors will be expected to provide an appropriate range of medical and occupational healthcare services to meet the physical and mental health needs of the construction workforce. The range of services will be agreed</p> | <p>Environmental Statement Chapter 13: Population and Human Health [APP-151]</p> <p>Health and Equalities Impact Assessment [APP-539]</p> <p>Workers Accommodation Report [APP-551]</p> <p>Framework Construction Travel Plan [REP5-054]</p> <p>ES Appendix 2.2: Code of Construction Practice (CoCP) [REP5-048]</p> <p>Draft Development Consent Order (DCO) [REP5-024]</p> | Matter Under Discussion |

| Topic | Item No. | NHS Kent & Medway Integrated Care Board Comment | The Applicant's Response | Application Document Reference | Status |
|--------------------------------|-------------|---|---|---|-------------------------|
| | | | <p>with the Applicant, following engagement with Integrated Care Partnerships. The Applicant will consider the ICB's request for an approval role in agreeing the range of services required and will respond at a future deadline.</p> <p>The Applicant has ensured that mitigation has been developed in order to reduce significant environmental effects wherever practicable. This mitigation (in the form of Control Plans, CoCP, Design Principles and Requirements of the DCO itself) is legally secured via the draft DCO and therefore where funding is required this is considered secured.</p> | | |
| Construction-related illnesses | 2.1.2 (DL6) | The ICB is concerned about the impact of construction related illnesses (both physical and mental) on health services across the LTC workforce whilst they are at work and where they are residing during construction. These impacts may also affect their families' health services and the existing population within Kent & Medway. | <p>The Applicant's Commitments for Emergency Preparedness are included in the Project's CoCP, relating to the provision of a range of medical and occupational healthcare services (including onsite facilities) for the construction workforce. It is noted that these will be agreed following engagement with the NHS ICBs and the highway authorities.</p> <p>Welfare facilities will be in place at all main construction compounds. Comprehensive healthcare requirements are to be included in contracts for Delivery Partners.</p> <p>Contractors will be expected to provide an appropriate range of medical and occupational healthcare services to meet the physical and mental health needs of the construction workforce. The range of services will be agreed</p> | <p>ES Appendix 2.2: Code of Construction Practice [REP5-048]</p> <p>Health and Equalities Impact Assessment [APP-539]</p> | Matter Under Discussion |

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| | | | <p>with the Applicant, following engagement with Integrated Care Partnerships. The Applicant will consider the ICB's request for an approval role in agreeing the range of services required and will respond at a future deadline.</p> <p>The Applicant recognises that the NHS is still reviewing the draft DCO in detail and has offered to continue further detailed engagement to address outstanding matters.</p> | | |
| Impact of traffic flow on air quality | 2.1.3 (DL6) | The ICB is concerned about the impact of the proposal during construction and operation on the environment and the impact on the existing infrastructure and population during construction and post completion. | <p>The Applicant has ensured that mitigation has been developed in order to reduce significant environmental effects wherever practicable. This mitigation (in the form of Control Plans, CoCP, Design Principles and Requirements of the DCO itself) is legally secured via the draft DCO and therefore where funding is required this is considered secured.</p> <p>The Applicant recognises that the NHS is still reviewing the draft DCO in detail and has offered to continue further detailed engagement to address outstanding matters.</p> | ES Appendix 2.2: Code of Construction Practice [REP5-048] Draft DCO [REP5-024] | Matter Under Discussion |
| Impact of traffic flow – noise and vibration | 2.1.4 (DL6) | The ICB is concerned about the health impacts of the new traffic flow during construction and operation. | The Health and Equalities Impact Assessment provides a Project-level assessment of environmental effects on different health determinants relating to the construction and operational effects of the Project and the proposed mitigation. The Applicant has been working with Community Impacts Public Health Advisory Group to share and develop this assessment during the pre-application stage. | Health and Equalities Impact Assessment [APP-539] ES Appendix 2.2: Code of Construction Practice [REP5-048] | Matter Under Discussion |

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|--|-------------|--|--|---|--------|
| | | | <p>The Environmental Statement notes that it has been reasonably concluded that the significant adverse impacts on health and quality of life would be avoided through the implementation of the specific mitigation measures identified above and secured through the REAC commitments.</p> <p>The Applicant recognises that the NHS is still reviewing the draft DCO in detail and has offered to continue further detailed engagement to address outstanding matters.</p> | Environmental Statement Chapter 13: Population and Human Health [APP-151] | |
| Impact of a major incident during construction | 2.1.5 (DL6) | The ICB is concerned of the impact on local acute health services in the event of a major incident during the construction of the scheme. | <p>Section 6.9 of the CoCP addresses the scope and parameters of the Emergency Preparedness Procedures. The emergency procedures will be produced with engagement with the emergency services, Kent Resilience Forum and Essex Resilience Forum, and other relevant stakeholders including relevant local highway authorities.</p> <p>In relation to emergency incidents, the Applicant will develop a multi-agency Emergency Response Plan alongside the detailed design and construction of the Project ready for testing and implementation prior to opening.</p> | Draft DCO [REP5-024] ES Appendix 2.2: Code of Construction Practice [REP5-048] | |
| Impact on health services due to easier access | 2.1.6 (DL6) | The ICB are concerned of the impact on health services as a result of Essex population having greater / easier access to north Kent services | The Health and Equalities Impact Assessment provides an assessment of the effects of the Project in relation to accessibility during the operational phase. Paragraph 7.2.28 of the document describes how accessibility by | Health and Equalities Impact Assessment [APP-539] | |

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| across the river | | (although also recognising that some north Kent residents may choose to go north to Essex). | <p>private vehicle has been measured to a range of destination types including healthcare facilities (for example hospitals and medical practices). Plate 7.3 shows changes in access to healthcare opportunities, with the darker green areas highlighting those wards which will see greatest increases in terms of access to healthcare opportunities. The plate shows that the wards to the south of the river (primarily within Gravesham, Dartford and Medway) see the greatest improvements in terms of access to healthcare.</p> <p>The assessment has also incorporated a distance decay function, i.e., the longer the distance to travel to a particular type of destination, the less likely people are to travel. Whilst some cross-river travel for healthcare purposes is possible, the analysis does not show that this is likely to be in one particular direction (south to north or north to south). As such the impact of the Project on health services as a result of cross-river travel is considered to be negligible.</p> | | |

Appendix A Engagement activity

Table A.1 Engagement activities between the Applicant and the NHS Kent and Medway Integrated Care Board

| Date | Overview of engagement activities |
|-----------------------------|--|
| 08 June 2023 – 24 July 2023 | Email correspondence to discuss the possibility of drafting a SoCG with the ICB. |
| 08 September 2023 | Introductory meeting with the ICB. |
| 13 September 2023 | Meeting to discuss SoCG matters and explain the DCO deadline process |
| 29 September 2023 | Catch-up on the issues raised in the SoCG and the Applicant's response to the points raised. |

Appendix B Glossary

| Term | Abbreviation | Explanation |
|---|--------------|---|
| Code of Construction Practice | CoCP | Contains control measures and standards to be implemented by the Project, including those to avoid or reduce environmental effects. |
| Development Consent Order | DCO | Means of obtaining permission for developments categorised as Nationally Significant Infrastructure Projects (NSIP) under the Planning Act 2008. |
| Register of Environmental Actions and Commitments | REAC | The REAC identifies the environmental commitments that would be implemented during the construction and operational phases of the Project if the Development Consent Order is granted, and forms part of the Code of Construction Practice (ES Appendix 2.2). |
| Integrated Care Board | ICB | Integrated Care Board |

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