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London Luton Airport Expansion

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8.107 Applicant's response to Deadline 3 Submissions - Appendix E Stop Luton Airport Expansion (REP3-136 and REP3-137)

Infrastructure Planning (Examination Procedure) Rules 2010

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The Planning Act 2008

The Infrastructure Planning (Examination Procedure) Rules 2010

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8.107 APPLICANT'S RESPONSE TO DEADLINE 3 SUBMISSIONS - APPENDIX E STOP LUTON AIRPORT EXPANSION [REP3-136 AND REP3-137]

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Table E.1 Applicant's response to submission by Stop Luton Airport Expansion at Deadline 3

I.D	Topic	Deadline 3 submission (Verbatim)	Luton Rising's Response
1	General	SLAE find that throughout the topic document LR do not state levels of statistical significance. Where LR have used qualitative data (rather than quantitative data) that should have come from those in the local neighbourhood areas and not LR's assumption of the communities' feelings. We come to the conclusion that much of what is documented is supposition.	It is assumed that the reference to 'topic document' is in reference to the Health and Community assessment undertaken and reported in Chapter 13 of the ES Health and Community Revision 1 [AS-078]. The methodology for the health and community assessment is detailed in Appendix 13.4 Methodology for Health and Community Assessment of the ES [APP-086], including data sources used (Section 5). This was agreed in consultation with local authorities and the health and community working group over a series of meetings as described in Section 13.4 of Chapter 13 of the ES. The 'communities' feelings' described (paragraph 13.9.5 of Chapter 13 of the ES) were those expressed in responses to statutory consultation as reported in the Consultation Reports [AS-048, APP-174 to APP-193].
2	Health and Community	If 'corresponding NHS and CCG data has been used to provide an overview of mental health baseline within the local neighbourhood area', it is too generic in sampling, LR have had 6 years to get mental health information from the authorities and census	For local neighbourhood baseline conditions, mental health data at ward level was not available; however, corresponding National Health Service (NHS) Clinical Commissioning Group (CCG) data has been used to provide an overview of mental health

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		information, and LR would have known that they needed this information. Why have LR not done so? Where has the corresponding NHS and CCG data come from? Ideally it should be from a local neighbourhood located next to an airport for realistic modelling, it's not data that can be used as it's not like for like.	baseline within the local neighbourhood area. This data is provided at a Local Authority level. This data has been obtained from Public Health England. Local Authority Health Profiles for NHS Luton CCG, East and North Hertfordshire CCG and Bedfordshire CCG.
3	Health and Community	Page 4, Chapter 13.8, States the effects of noise assessment in relation to noise being only quantatively assessed. However particularly in regard to health and mental illness qualitative data is equally, if not more, important in forming a fair and just decision. Why hasn't qualitative data been used?	The assessment of the effects on health resulting from long term exposure of a population to aircraft noise has been undertaken using established exposure-response relationships for specific health outcomes, published by DEFRA (the Department for the Environment, Food, and Rural Affairs) in 2010 and 2014 and WHO (World Health Organisation) in 2018. These relationships, which have been informed by reviews of available evidence between environmental noise and each specific health outcome, are described in Appendix 13.4 Methodology for Health and Community Assessment of the ES [APP-086].
			Reviews of available evidence between environmental noise and effects on quality of life, well-being and mental health outcomes have also been undertaken ^{1,2} . These reviews have included studies in which qualitative data in the form of self-reported health, quality of life and well-being measures have been collected. However, no robust exposure-response relationships have been

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			established from these studies to date from which effect of aviation noise on such health outcomes can be made.
4	Health and Community	13.9.45 The following baseline data on the relevant health outcomes has been obtained for the local authorities in the study area (see Appendix 13.4 of this ES [TR020001/APP/5.02] for details): a. annual all-cause mortality rate per hundred thousand people; There are not a hundred thousand people in Wigmore, or South Luton or Crawley Wards? Or anywhere near the airport, so why use this figure? The ONS / Council can provide population information by ward. LR have had years to gain this information, so to use this figure is laziness. Each time figures are stated as the wider the population a more diluted effect will occur. Likewise no significance is used frequently without providing the statistical levels of significance that the conclusion has been measured upon. Why not create Health contours similar to the noise contours, this would help provide clearer meaning?	Mortality rates provide comparable information on mortality across areas with different sized populations. Rate per hundred thousand is the format provided in the Office for Health Improvement and Disparities' (OHID) Fingertips data. This data is provided at local authority level. 'Significance' in the context of Environmental Impact Assessment (EIA) is an informed, expert judgement of the importance, desirability or acceptability of an effect and is not intended to indicate statistical significance. Baseline and future noise levels are based upon detailed modelling validated by measurement; this data can be displayed in the form of contour mapping. Existing health data corresponds to specified geographic areas such as Ward and Local Authority boundaries. Future health outcomes are assessed at population level. Therefore, information on existing and future health cannot be displayed as
			contour mapping.
5	Health and Community	Insufficient evidence provided by LR considering how long people have been living next to airports. The application has been going on for over five	The purpose of the EIA is to assess the effects of the Proposed Development. It is not the role of the EIA to determine the effects of the existing airport. The

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		years, so there is no excuse for not being able to determine the distribution of effects. At the very worse LR can find studies in this area at other airports, both within this country and overseas.	evidence and methodology used in the assessment, including assessment criteria for qualitative professional judgements, are set out in Appendix 13.5 Evidence Review for Health Assessment [AS-084] and Appendix 13.4 Methodology for Health and Community Assessment [APP-086] of the ES.
6	Health and Community	SLAE ask why national figures are used and not Luton's, or even local neighbourhood area figures?	Appendix 13.5 Evidence Review for Health Assessment Revision 1 of the ES [AS-084] provides an overview of scientific evidence on the health outcomes associated with changes in health determinants.
			A literature search reviewed relevant evidence published between 2014 and October 2022. To best represent the scientific consensus, secondary literature such as meta-analyses and literature reviews were reviewed.
7	Health and Community	The Health assessment does NOT specifically consider the health effect of ground instability. Yet the release of methane gases, the already identified evidence of buried wartime ordnance requiring full hazardous substance clothing when drilling the Wigmore Park ground, leads me to suspect that ground instability could cause a key detrimental effect on the health of the local neighbourhood.	Risk of injury or death from ground instability has been assessed within the Chapter 15 Major Accidents and Disasters of the ES [APP-041] (see Risk Event IDs C7 and O7 in Tables 15.12 and 15.13 respectively) which evidences the mechanisms for mitigation and management to reduce risk to 'Tolerable if As Low as Reasonably Practicable'.

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			Health effects associated with major accidents and incidents have been scoped out of Chapter 13 Health and Community Revision 1 of the ES [AS-078]. The health assessment identifies health effects resulting from the exposure of the population to the likely impacts of the Proposed Development. This does not allow for the assessment of the wideranging potential health outcomes associated with major incidents, which have a low probability of occurrence and potentially major consequences. This position was agreed with PINS through the scoping exercise, as described in paragraph 15.7.6 of Appendix 1.1 Scoping Report (Volume 1- Main Report) of the ES - [APP-166].
8	Health and Community	13.3.21 States that, there is no available method for assessing the potential health outcomes of a major accident or disaster which, while potentially wideranging and severe, are unlikely to occur. Why, when there have clearly been major pollution incidents of all kinds worldwide previously so there will be evidence that could have been drawn upon and should be in scope?	Major Accidents and Disasters have been assessed and reported in full in Chapter 15 Major Accidents and Disasters of the ES [APP-041]. The chapter identifies clearly risks of these low likelihood, high impact events occurring and the potential for serious damage, which is defined as "the potential loss of life or permanent injury and/or permanent or long-lasting damage to an environmental receptor which cannot be restored through minor clean-up and restoration efforts" as adapted from the Seveso III Directive 2012/18/EU. Health effects associated with major accidents and incidents have been scoped out of Chapter 13 Health and Community Revision 1 of the ES [AS-

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			078]. The health assessment identifies health effects resulting from the exposure of the population to the likely impacts of the Proposed Development. This does not allow for the assessment of the wideranging potential health outcomes associated with major incidents, which have a low probability of occurrence and potentially major consequences. This position was agreed with PINS through the scoping exercise, as described in paragraph 15.7.6 of Appendix 1.1 Scoping Report (Volume 1- Main Report) of the ES – [APP-166].
9	Health and Community	under 13.9.5 LR state the impacts of stress and other associated concerns. Do LR not consider flooding to cause these concerns, particularly in light of a history and recent occurrences of flooding at the airport, including both before and after the dual carriageway was put in under the taxi way? SLAE state that flooding need to be scoped in. Why do LR not think that one death due to flooding would be harmful to human health?	The risk of flooding has been assessed and presented in Chapter 20 Water Resources and Flood Risk Revision 1 of the ES [AS-031]. Risk of injury from flooding has also been assessed within the Chapter 15 Major Accidents and Disasters of the ES [APP-041] (see Risk Event IDs C1 and O1 in Tables 15.12 and 15.13 respectively) which evidences the mechanisms for mitigation and management to reduce risk to 'Tolerable if As Low as Reasonably Practicable'.
			Health effects associated with increased flooding have been scoped out of Chapter 13 Health and Community Revision 1 of the ES [AS-078]. On the basis that the Flood Risk Assessment is required to

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			demonstrate how the risk of major flood events will be managed, it is considered that there will be no residual risk of flooding that could be potentially harmful to human health. This position was agreed with PINS through the scoping exercise, as described in paragraph 15.7.5 of Appendix 1.1 Scoping Report (Volume 1- Main Report) of the ES [APP-166].
10	Health and Community	Where has the corresponding NHS and CCG data come from? Ideally it should be from a local neighbourhood located next to an airport for realistic modelling? If not then it's not data that can be used as it's not like for like. The source should be identified and imagine if it came from a peaceful village in the middle of the countryside nowhere	For local neighbourhood baseline conditions, mental health data at ward level was not available. Corresponding NHS CCG data has been used to provide an overview of mental health baseline within the local neighbourhood area. This data is provided at a Local Authority level.
		near traffic or other man made noise.	This data has been obtained from Public Health England. Local Authority Health Profiles for NHS Luton CCG, East and North Hertfordshire CCG and Bedfordshire CCG.
11	Health and Community	How is it possible to gauge that the effects of the airport expansion would only have a temporary effect on mental wellbeing. Please explain your evidence? Whilst stating that health effects have been qualitively assessed where is the detail on how this has been determined? Or is it just a value judgement made by the applicant rather than the population being asked?	The SLAE submission references para 13.6.3 Limitations. There is no specific reference to mental health effects in this paragraph. The evidence and methodology used in the assessment, including assessment criteria for qualitative professional judgements, are set out in Appendix 13.5 Evidence Review for Health Assessment [AS-084] and Appendix 13.4

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		Who is the professional making this judgement?	Methodology for Health and Community Assessment of the ES [APP-086]. Chapter 13 Health and Community Revision 1 of the ES [AS-078] includes a list of competent experts' qualifications, competencies and experience who completed the assessment on pages 123 and 124.
12	Health and Community	5 Wigmore Valley Park is partly designated as a District Urban Park in the Luton Green Space Strategy Review (2014) (Ref. 13.50. No mention of the County Wildlife Park in this section, SLAE's understanding is that a CWS has more significance than a District Urban Park.	County Wildlife Site (CWS) is a non-statutory designation for areas of land recognised for their wildlife importance. The CWS designation for Wigmore Valley Park does not affect the assessment undertaken as part of the health and community assessment seen within Chapter 13 Health and Community Revision 1 of the ES [AS-078]. Potential impacts upon Wigmore Valley Park have been assessed within Chapter 8 Biodiversity Revision 1 of the ES [AS-027].
13	Health and Community	Table 13.11. Vulnerable groups. Why are there no statistics regarding the 6 identified discrimination/social disadvantaged groups that are listed?	Paragraph 13.7.48 in Chapter 13 Health and Community Revision 1 of the ES [AS-078], states that the information on vulnerable groups and subgroups in the wider study area, as provided in Table 13.11, is 'based on the characteristics of the communities described above'. Statistics supporting that are provided in paragraphs 13.7.1 to 13.7.47 above the table.

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14	Health and Community	Future Population Projections predict that in Luton the largest group will be an increase in older people. Doesn't this have the effect of moving more people into the vulnerable group category – the people who are more likely to be adversely effected by pollution from the airports expansion.	Chapter 13 Health and Community Revision 1 of the ES [AS-078] identifies older people as a vulnerable group (Table 13.11) and notes that population forecasting models have predicted the largest increases to be in the older age groups. As such, it is recognised that the proportion of vulnerable older people will increase over time.
15	Economics and Employment	What happens to these workers once the construction has completed. SLAE suggest that LR provide each construction worker with the means to improve their employment opportunities with training during construction work, and then offer them work at the airport, within LR, LBC or LLAOL, the statement might then be considered as true.	The key purpose of the Employment and Training Strategy (ETS) [APP-215] is to ensure that, as many of the jobs and economic opportunities generated by the Proposed Development as possible, go to the residents of Luton and the "ETS Study Area". Throughout construction and operation, employees will be upskilled and trained in line with initiatives set out in the ETS. This will enable them to gain skills and experience to find onward employment after construction is completed. The ETS has a series of initiatives that will enable individuals to upskill both during construction and operation, in particular Initiative 2.1 to encourage the adoption of skills and training programmes during construction and Initiative 2.3 which is the Luton Jobs and Skills Engagement Programme implemented during construction. The ETS aims to encourage

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			those from the local area to get the required training to take up jobs during both phases of the project, this includes those working during construction wanting to take up opportunities during operation.
16	Climate Change and Greenhouse Gases	SLAE ask LR to guarantee that construction materials being supplied are climate change compliant and leaving a minimal climate change footprint, from source (i.e. ground, manufacture and supply,) until retirement.	Appendix 4.1 Code of Construction Practice (CoCP) of the ES [APP-049] specifies that the Lead Contractor will be responsible for the development and implementation of a Carbon Efficiency Plan as part of their Environmental Management Systems to manage carbon emission from construction activities and promote good practice.
			This plan would include specification of materials with lower embodied GHG emissions within lead contractor's contracts (e.g. where practical, materials with a higher recycled content and locally sourced materials will be selected), including where feasible, design for end of component reuse.
			The CoCP is secured by Requirement 8 of the Draft Development Consent Order (DCO) [REP3-003].
			Table 2.2 within the Design Principles [APP-225] , which will be secured by the DCO, includes several principles related to construction and leading the transition to carbon net zero, for example SUS.05 and SUS.23.

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17	Surface Access	SLAE ask LR to make it mandatory that workers have to use the Dart and not commute by road transport.	The Applicant will seek to encourage more staff to use sustainable modes to access the airport as part of the mode shift targets in the Framework Travel Plan. It is not practical or sustainable to make it mandatory for airport staff to use the Luton DART rather than 'road transport'. 'Road transport' would include bus services and car sharing which are sustainable modes of transport.
			For all staff to use the Luton DART; this implies that staff would have to travel to the Luton Airport Parkway station by rail or bus. This is not workable or convenient for staff that do not live in the rail or bus catchment. For some staff, it would potentially mean driving to Luton Airport Parkway Station to use the Luton DART, which may increase the driving distance compared to travelling to the staff car park at the airport.
			The Applicant would seek to encourage a range of sustainable travel options through the Travel Plan to meet the needs of staff including walking and cycling for local trips, public transport and car sharing.
			In Phases 2a and 2b, some staff car parking would be located near the Luton DART enabling a park and ride facility to operate. This would potentially reduce

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			traffic volumes around the airport and would be most beneficial where staff approach from the west/the M1, reducing the vehicle kms travelled.
18	Economics and Employment	13.9.13 There is strong evidence (see Appendix 13.5 of this ES [TR020001/APP/5.02]) to suggest that improved employment status is linked to health and wellbeing benefits ranging from improved selfesteem and mental health to physical health benefits associated with access to healthier lifestyle choices. Is this true where jobs are short term in nature or where a job involves shifts? The connotations of lifestyle used in this paragraph suggests that jobs are long term in nature.	The evidence review for the health assessment in Appendix 13.5 Evidence Review for Health Assessment of the ES [AS-084] highlights the generally positive relationship between employment and health. It acknowledges the detrimental effects of shift work. Paragraph 13.9.40 of Chapter 13 Health and Community Revision 1 of the ES [AS-078], acknowledges that those employed in shift work at the airport, particularly night-time workers, may not experience such positive health effects as those employed during standard working hours.
19	Health and Community	Recognition that until landscape matures it is not attractive to users. Why would that be termed NOT significant? This would be highly significant for park users and their ability to gain health benefits from the open space. Again no levels of statistical significance shown.	Paragraph 13.3.17 of Chapter 13 Health and Community Revision 1 of the ES [AS-078] confirms the matters scoped into the health assessment relating to open space: (a) effects on informal recreation and physical activity resulting from changes in access to open space; (b) effects on level of physical activity resulting from changes to footpaths; (c) effects on levels of physical activity resulting from changes in road traffic movements; and

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			(d) effects on health and wellbeing associated with changes in access to, or loss of, services and community facilities.
			Paragraph 13.3.17 confirms that the community assessment considers the potential for a reduction in the amenity of users by assessing the potential for incombination community effects (i.e. where there are two or more residual significant effects from air quality, noise and vibration, traffic, and transport, or visual or light effects on a community receptor). The scope of the health and community assessment
			therefore does not consider the attractiveness of the landscape as a single effect.
20	Health and Community	13.9.33 Discussions are taking place with the nursery to find a suitable site for relocation. Based on current supply and demand for nursery places, the loss of the nursery, prior to any mitigation, would represent an impact of high magnitude on a community resource with high sensitivity due to the lack of nearby comparable alternative facilities. Without mitigation, this would result in a major adverse community effect which is significant. Can LR detail how they got to this community effect?	Engagement with the nursery has been ongoing since July 2022. A potential alternative property has been identified which is controlled by the Applicant and the Applicant has committed to ensure that these alternative facilities would be available when required. An agreement is in place with the operator of the nursery so that with adequate prior notice a relocation of these services can occur prior to the existing building being required for the Proposed Development. A further assessment to confirm replacement capacity requirements will be conducted closer to the time of closure. This commitment will be secured via a section 106 agreement as described in

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			Paragraph 6.8 of the Planning Statement Revision 1 [AS-122].
			Appendix 13.4 Methodology for Health and Community Assessment of the ES [APP-086] details the assessment methodology for community effects. The assessment of Prospect House Day Nursery has been undertaken in accordance with this methodology.
			Table 13.21 of Chapter 13 Health and Community Revision 1 of the ES [AS-078] provides a summary of assessment for Prospect House Day Nursery. This table confirms that the magnitude of impact has been assessed as 'high' as the facility is permanently lost.
			The receptor sensitivity has been assessed as 'high' as the nursery is well used and there are no alternative childcare facilities within 1.5km of the existing facility. Therefore, users will find it more difficult to respond to change.
			An assessment of the nearby comparable alternative facilities is included in paragraphs 13.9.31 and 13.9.32. Based on the methodology in Appendix 13.4 Methodology for Health and Community Assessment of the ES [APP-086], an effect with a high magnitude of impact, on a receptor with high

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			sensitivity, results in a major adverse effect which is significant.
21	Health and Community	13.9.35 A significant health effect has been identified during the operation of the Proposed Development, across all assessment phases, in relation to the health determinant of 'Employment and income' (operational related employment). How can a job be seen as healthy when the majority of operational jobs require shifts, low income, travel issues getting to work at unsocial hours. Unsocialable hours is a determent as found in 13.9.7 & 13.9.40. A long commute time from staff car parks, via buses. Tedious work. SLAE were unable to find staff turnover (churn) employment figures. To justify the significant health effects on staff, staff turnover figures should be provided.	Please see response to I.D 18 above.
22	Health and Community	SLAE ask LR to create a compensation scheme for those who lose days lost due to DALYS and QALYS. If a noise compensation scheme can be put in place, why is there not a similar scheme for health? Seems to be a biased slant towards addressing noise in the DCO submissions. SLAE suggest that LR encourage the local authority (LBC) to stipulate that all planning applications or Private Landlords that have to apply to LBC to register for the airport's noise compensation scheme.	In line with standard practice and Government noise policy (Ref 3), eligibility for the noise insulation schemes is determined based on LAeq noise exposure. UK specific research from the Civil Aviation Authority (Ref 4, Ref 5) shows that there is no evidence to suggest that any noise indicators correlate better with the principal health effects from aircraft noise (daytime annoyance and night-time sleep disturbance) than the LAeq metric. and the insulation

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			scheme has been designed to avoid significant effects from noise on health and quality of life.
23	Economics and Employment	Page 109. Impact: All assessment phases (2025-2041) 15,100 direct jobs by 2043. 16,200 indirect and induced jobs in Luton by 2043 22,700 indirect and induced jobs in the Three Counties by 2043 There is no reference in any of the submissions that explains what happens if those jobs don't materialise?	The creation of the number of jobs cited is associated with growth in activity at the airport. If the number of jobs created was lower, this would be a consequence of a lower level of activity so the other impacts from the Proposed Development would also be less than assessed.
24	Health and Community	Community Summary page 114, despite maintaining access to Wigmore Park during construction it doesn't point out that it will be a much longer walk to reach the replacement open space making this a barrier to vulnerable groups and those will mobility issues. Consequently this should be recognised as a "significant adverse effect". SLAE ask why this is not recognised or covered in the document?	Section 13.9.22-13.9.30 in Chapter 13 Health and Community Revision 1 of the ES [AS-078] confirms that the Proposed Development would retain the existing main entrance into Wigmore Valley Park adjoining Wigmore Hall and Wigmore Pavilion. Appendix 13.2 Open Space Survey Results of the ES [APP-084] includes the survey results from the user surveys undertaken in Wigmore Valley Park in 2019. 91% of the 155 users surveyed lived in the postcode district LU2. This is a wide postcode area spanning Luton and including areas to the north and east in Bedfordshire and Hertfordshire. The park serves a wide catchment and will continue to be accessible to the adjoining communities it serves. Although the replacement open space may be further away for some residents, it will also mean

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			that other residents are closer to the replacement open space. The main entrance to the park would remain unchanged.
25	Replaceme nt Open Space	13.9.26 The replacement open space would focus on the establishment of natural habitats, delivering areas of meadow grassland, native shrub planting, broadleaf woodland, and mixed-species hedgerows with hedgerow trees, as well as several surfaced footpaths to upgrade connections to the surrounding rights of way network. The replacement open space would be located to be accessible to the adjoining communities it serves. SLAE ask LR to name those adjoining communities the open space serves?	The park is located on the edge of the suburban residential area of Luton known as Wigmore. Appendix 13.2 Open Space Survey Results of the ES [APP-084] includes the survey results from the user surveys undertaken in Wigmore Valley Park in 2019. 91% of the 155 users surveyed lived in the postcode district LU2. This is a wide postcode area spanning Luton and including areas to the north and east in Bedfordshire and Hertfordshire. 6% of the 155 users surveyed lived in the postcode district LU1 which spans Luton and the areas to the southwest in Bedfordshire and Hertfordshire. The remaining users surveyed were visitors to the Luton area.
26	Health and Community	5.3.1 Over the timescale of the Proposed Development's delivery, the profile of the affected communities is likely to change, influenced by wider economic and health policy, and demographic trends. SLAE ask LR to provide a report before each phase is started to determine how health and well being has / will change?	The future health baseline is described in Chapter 13 Health and Community Revision 1 of the ES [AS-078]. No further assessment or baseline data analysis is required at the project delivery phases. Proposals for proportionate monitoring in relation to health are described in section 13.13 of Chapter 13 Health and Community Revision 1 of the ES [AS-078].

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27	Air Quality	SLAE state that this depends on the activity taking place that causes dust soiling. It could be that average dust impact monitoring hides a concentrated period of high dust soiling (like fog, smog, billows of dust) etc? Is this defined anywhere?	Appendix 4.1 Code of Construction Practice (CoCP) of the ES [APP-049] provides in section 8.8.5-8.8.10, the details of the monitoring to be undertaken during the construction phases. The application of real-time continuous monitoring will provide information and alerts if there are peaks in PM ₁₀ concentrations (either from the Proposed Development), or regional dust events). The monitoring will be carried out in line with current best practice guidance (currently IAQM 2018).
28	Surface Access	a. ensure easy and reliable access for passengers; c. minimise congestion and other local impacts. The document also states that the general position for existing airports is that developers should pay the costs of upgrading or enhancing road, rail or other transport networks or services where there is a need to cope with additional passengers travelling to and from expanded or growing airports. SLAE do not believe that LR have addressed the above policy sections. A good example of how LR think that they are a 'good neighbour' but actually are not.	Pages 6 and 7 of Chapter 18 Traffic and Transportation Revision 1 of the ES [AS-030], sets out how the development proposals align with the Aviation Policy Framework. This includes the improvements to rail services that have been introduced recently, along with the opening of the Luton DART which was funded by the Applicant and connects rail services to the airport terminal, making access easier for air passengers as well as airport employees. The Proposed Development includes a comprehensive package of highway interventions as set out in Chapter 8 of the Transport Assessment-Part 2 of 4 (Chapters 5-8) Revision 1 [AS-123]. The Highway Interventions form part of the Proposed Development and will be funded by the Applicant. This complies with the general position in the

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			document that developers should pay the costs of upgrading or enhancing road, rail or other transport networks or services where there is a need to cope with additional passengers travelling to and from expanded or growing airports.
			Following the submission of the application for development consent, the Applicant has been developing proposals for a Sustainable Transport Fund (STF), to be used to fund measures identified within the Framework Travel Plan Revision 1 [AS-131].
			The STF is being developed in conjunction with the relevant highway authorities. This includes the parameters for prioritising measures to be funded by the STF and the legal mechanisms for securing the fund. The Applicant would therefore be funding improvements to sustainable transport networks in addition to the package of highway interventions, which meets with the requirements of the policy document.
29	Surface Access	When the M1 motorway is impacted by an incident (accidents (and called collisions in the application documents)), the knock on impacts to those travelling on non motorway roads in Bedfordshire, Central Beds and Hertfordshire is immense. Instead	The scope and modelling methodology as set out in the Transport Assessment was developed and agreed in conjunction with National Highways and the host authorities.

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		LR focus on fuel tanker collisions and road junctions. SLAE note that in LR's traffic and transport modelling there is no mention of motorway incident modelling on the adjoining road infrastructure, despite SLAE making LR aware of this at the Harpenden statutory consultation event.	The purpose of the Transport Assessment is to assess the impact of the proposed airport expansion on the future baseline traffic and transport network. This is based on a reasonable worst-case scenario and taking account of incidents on the M1 are not a matter for the Transport Assessment or the Applicant to address. National Highways operates and maintains the M1, which is part of the Strategic Road Network. It has incident management protocols to deal with issues and to keep traffic moving. This includes contingency planning and communications.
30	Surface Access	SLAE are sure that LR can also calculate the air pollution caused by such gridlock. SLAE can also see that LR can also calculate the driver stress caused by such incidents using similar models as evidenced in (document 000763-5.02 Environmental Statement Appendix 18.1 Traffic and Transportation Methodology) Driver Stress and Delay. SLAE ask why none of this has been done? SLAE ask why this has all been missed?	See above response to I.D 28.
31	Surface Access	Paragraph 2.2.32 in the document 000763, TR020001-000763-5.02 Environmental Statement Appendix 18.1 Traffic and Transportation Methodology, says, 'The following junctions have been assessed with regard to potential	The forecast changes in traffic flows on the M1 between junctions 9 and 10, and junctions 10 and 11 as a result of the Proposed Development in 2027, 2039 and 2043 are small relative to the future baseline traffic flows.

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		environmental effects relating to collisions and safety:' SLAE took the models shown in tables 1.1 Selected Annual Average Daily Traffic (AADT) flows, table 1.4: Flow changes on the selected links of Document 000764 TR020001-000764-5.02 Environmental Statement Appendix 18.2 Selected Traffic Flow Modelling Results. We also took the data from the construction table 18.5 construction traffic estimates found in 000941-5.01-Environmental-Statement-Chapter-18-Traffic-and-Transportation-Revision-1. We were only interested in the M1 motorway data and in most cases the data in the tables show an increase in vehicle traffic projections due to airport expansion. Therefore it is fair to state that more M1 motorway incidents will occur, more clogged up roads and more driver health issues.	Between junctions 9 and 10, with the exception of the 2039 PM peak (+4.5%), the increase in traffic flows is below 2% for the daily, AM and PM peak periods in the future years. Between junctions 10 and 11, the increases in traffic flows for all three time periods are below 1% in the future years, and in some cases a reduction. In line with the IEMA guidelines, driver stress has been considered where the change in traffic flow is ±30%, or ±10% for sensitive links. Since the flow changes are below these thresholds, the effect on driver stress can be stated to be negligible. The method for calculating driver stress is set out in paragraphs 2.2.9 to 2.2.12 of Appendix 18.1 Traffic and Transportation Methodology of the ES [APP-128]
32	Surface Access	SLAE ask that in construction traffic is halted when incidents occur on the M1 motorway, to minimise the impact on non motorway roads.	The approach to the management of construction traffic is set out in the Appendix 18.3 Outline Construction Traffic Management Plan of the ES [APP-130]. The Outline CTMP has been prepared to identify the key matters that will need to be considered by the lead contractor during the logistical planning and execution of the construction works. The CTMP will set out the arrangements and management practices that will be adopted to

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			minimise the impact of increased traffic on the local road network and must be approved in writing by the relevant planning authority prior to the commencement of the Proposed Development
			The approved CTMP will be a 'live' document that will be prepared by the lead contractor, which substantially reflects the Outline CTMP, that will be regularly reviewed and updated to allow full and upto-date consideration of any necessary changes to the planned works' programme and any comments and/or issues raised by interested parties and directed to the Applicant or the Traffic Management Working Group.
			The movement of construction vehicles will be discouraged during the normal peak traffic periods (weekday AM and PM peak) therefore reducing impacts in the event of an incident on the M1 at the busiest times.
			The greatest volumes of construction traffic would occur between 10:00 and 16:00 when the road network is generally less busy and the impact of an M1 incident would be less.
33	Surface Access	What will be the measures to stop local access routes from being used?	It is expected that the contractor will implement a monitoring and reporting system to check

I.D	Topic	Deadline 3 submission (Verbatim)	Luton Rising's Response
			compliance with the measures set out within the CTMP. This could include the need for a GPS tracking system to be fitted to HGVs to check for compliance with designated construction routes.

REFERENCES

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² Clark C, Crumpler C, Notley H (2020). Evidence for Environmental Noise Effects on Health for the United Kingdom Policy Context: A Systematic Review of the Effects of Environmental Noise on Mental Health., Wellbeing, quality of life, Cancer, Dementia, Birth, Reproductive Outcomes, and Cognition. International Journal of Environmental Research and Public Health. 2020; 17(2)393. https://doi.org/10.3390/ijerph17020393

³ Department for Transport (2017), Consultation Response on UK Airspace Policy: A framework for balanced decisions on the design and use of airspace.

⁴ Civil Aviation Authority (2021), CAP1506: Survey of Noise Attitudes 2014: Aircraft Noise and Annoyance, Second Edition

⁵ Civil Aviation Authority (2021), CAP2161: Survey of Noise Attitudes 2014: Aircraft Noise and Sleep Disturbance