



Gatwick Airport Northern Runway Project

The Applicant's Response to the Examining Authority's
Written Questions – Health and Wellbeing

Book 10

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1 Response to the Examining Authority’s Written Questions – Health and Wellbeing

The below table sets out the Applicant’s response to the Examining Authority’s Written Questions relating to Health and Wellbeing.

ExQ1	Question to:	Question:
HEALTH AND WELLBEING		
HW.1.1	The Applicant	<p>Health and Wellbeing Assessment</p> <p>Can the Applicant set out the date(s) for the baseline information used in the health and wellbeing assessments in ES Chapter 18 Health and Wellbeing [APP-043].</p> <p>Paragraph 18.5.24 of ES Chapter 18: Health and Wellbeing [APP-043] notes that population health data presents a snapshot at a particular time. Paragraph 18.5.26 confirms that for assessment purposes, the current health baseline is considered a suitable proxy of the future baseline.</p> <p>Section 18.5 Baseline Environment of ES Chapter 18: Health and Wellbeing [APP-043] summarises data from ES Appendix 18.4.1: Methods Statement for Health and Wellbeing [APP-205] and ES Appendix 18.5.2 Health and Wellbeing Baseline Data Tables [APP-207].</p> <p>Tables 3.2.3 and 3.3.4 of ES Appendix 18.4.1: Methods Statement for Health and Wellbeing [APP-205] are baseline data accessed in January 2023.</p> <p>ES Appendix 18.5.2 Health and Wellbeing Baseline Data Tables [APP-207] lists the time periods of the baseline data in the second column. This is the date that the public health indicator data was</p>

		<p>collected. The data was accessed in February 2023. The variation in dates of the data reflects the frequency with which government public health datasets are refreshed.</p> <p>Table 18.8.42: GP primary care capacity close to the airport of ES Chapter 18: Health and Wellbeing [APP-043] is the March 2023 data release.</p>
HW.1.2	The Applicant	<p>Integrated Care Board</p> <p>Can the Applicant provide an update in respect of collaboration with the West Sussex Clinical Commissioning Group (now the local Integrated Care Board) in respect of options for improving the airport workers’ access to NHS screening and clinics (paragraph 18.7.7 and Table 18.3.3 of the ES [APP-043]).</p> <p>How would improved access be secured?</p> <p>Paragraph 18.8.572 of ES Chapter 18: Health and Wellbeing [APP-043] discusses the West Sussex Integrated Care Board (ICB) Crawley Programme. Improved access, e.g. to NHS clinics and screening services, would be an enhancement measure benefiting all Gatwick employees, not just additional employees under the Project.</p> <p>A series of meetings and email exchanges took place pre-submission (October 2022) with the ICB Crawley Programme Director. The meetings explored sharing of Gatwick employee workforce data with NHS Sussex and distributing a survey to Gatwick employees on behalf of NHS Sussex. The Applicant supports the principle of collaboration on information sharing for the purposes of NHS strategic service planning. The offer remains open to the ICB and remains with them to define specific data needs, survey</p>

		<p>questions and data governance arrangements for phase 2 of their work. The Crawley Programme is an NHS Sussex led initiative¹ and does not require securing through the DCO.</p> <p>Paragraph 18.8.572 of ES Chapter 18: Health and Wellbeing [APP-043] also confirms that ongoing collaboration is planned, including on data sharing and gathering activities, as well as exploring the feasibility of on-site NHS outreach services. The Project does not rely on such activities as mitigation but notes the positive relationship as illustrative of an ongoing commitment to employee health and wellbeing.</p>
HW.1.3	The Applicant	<p>Community Initiatives</p> <p>Paragraphs 18.5.16 to 18.5.19 of the ES [APP-043] detail existing GAL community initiatives [APP-043].</p> <p>Can the Applicant confirm whether these are permanent initiatives? How are they measured in terms of their contribution to improving local health circumstances?</p> <hr/> <p>The Applicant is committed to building a sustainable future for its local communities and investing in the local community is one of the goals within its current Decade of Change Sustainability Policy. This is supported by the Applicant’s Roadmap to 2030 which sets targets for investing in community funds; supporting its charity partners and also engaging and inspiring the next generation through its education programmes. This reflects its overall approach to sustainability which integrates economic, societal and environmental issues and solutions, in which a healthy economy, sensible use of financial resources, human and technological innovation, teamwork and partnerships are all key. Sustaining good jobs and</p>

¹ [Improving Crawley lives together - Sussex Health & Care \(ics.nhs.uk\)](https://www.ics.nhs.uk)

		<p>strong employment benefits society, the environment, and the economy. The Decade of Change Sustainability Policy recognises this vital connectivity.</p> <p>Making a positive contribution to the communities around the Airport to share the benefits that the Airport generates among local people who may not directly benefit from the economic contributions that Gatwick brings to the region, is a longstanding commitment and is reflected in the Community Funding proposal as part of the Northern Runway Project secured through the Draft DCO s106 Agreement [REP2-004]. The current routes to grant funding (currently through the Gatwick Foundation Fund, Gatwick Airport Community Trust and the Vinci UK Foundation) support initiatives that fight social isolation, tackle disadvantage and provide aid to vulnerable communities. Whilst the Applicant does measure the impact of these contributions in terms of the number of beneficiaries, measurement of improved health outcomes is not practical in the majority of cases as there will be many other variables and contributing factors involved in an individual's health outcomes.</p> <p>The Applicant currently has two local charity partners and an onsite charity partner. SASH charity and Air Ambulance Kent Surrey and Sussex are the current charity partners and will be subject to change with one, at least, to be voted for by London Gatwick colleagues. Historically, the local charity partners are health based and this is likely to continue into the future.</p>
HW.1.4	The Applicant	<p>Enhancement and Mitigation Measures</p> <p>Table 18.7.1 of the ES [APP-043] details proposed mitigation and enhancement measures.</p> <p>Can the Applicant confirm whether the following measures are considered to be mitigation or enhancement:</p>

		<p>a) Healthcare for airport passengers and visitors;</p> <p>b) The promotion of health equity through benefits to local vulnerable groups; and</p> <p>c) Monitoring benefits to local vulnerable groups.</p> <p>If measures are considered to be mitigation, please confirm how they would be secured within the dDCO.</p> <hr/> <p>a) Healthcare for airport passengers and visitors, is mitigation, and will be secured through the DCO s106 Agreement. The drafting of the specific obligation is being developed and will be included in the next version of the draft DCO s106 Agreement submitted to the Examination at Deadline 5.</p> <p>b) The promotion of health equity through benefits to local vulnerable groups, is enhancement, secured in the Draft Section 106 Agreement Appendix 4 Employment Skills And Business Strategy [REP2-004],.</p> <p>c) Monitoring benefits to local vulnerable groups, is enhancement, secured in the Draft Section 106 Agreement, Appendix 4 Employment Skills And Business Strategy [REP2-004], .</p>
HW.1.5	Charlwood Parish Council	<p>Funding for Future Mitigation</p> <p>The ExA notes that Charlwood Parish Council within its WR [REP1-125] has requested GAL to provide a £5 million infrastructure fund to implement future projects that are identified as suitable mitigations to impacts caused by the airport expansion that may not yet have been identified.</p>

		<p>Can Charlwood Parish Council provide more information in respect of impacts it considers may not yet have occurred and what projects the monies are likely to be required for? Please also provide a summary of how the figure of £5 million was arrived at.</p>
		<p>N/A – this question is not directed to the Applicant.</p>
<p>HW.1.6</p>	<p>The Applicant</p>	<p>Noise Insulation Scheme</p> <p>Appendix 14.9.10 sets out the proposed noise insulation scheme [APP-180].</p> <p>The Applicant is asked to confirm what consideration has been given to effects experienced by owners/tenants in terms of their enjoyment and use of outdoor space associated with their property?</p> <p>Paragraph 14.9.199 of ES Chapter 14: Noise and Vibration [APP-039] discusses air noise effects in outdoor spaces, such as gardens or balconies, concluding that 80 properties may experience a significant moderate adverse effect. Paragraph 14.9.241 similarly discusses ground noise effects concluding that 37 properties may experience a significant moderate adverse effect as noise insulation would not fully mitigate impacts.</p> <p>Paragraph 18.8.172 of ES Chapter 18: Health and Wellbeing [APP-043] concludes there would be a minor adverse population level health effect, which reflects that the Noise Insulation Scheme would have practical limitations, including relating to outdoor activities.</p> <p>In their relevant representation the UK Health Security Agency [RR-4687] confirm that: “<i>Following our review of the submitted documentation we are satisfied that the proposed development should not result</i></p>

		<i>in any significant adverse impact on public health”.</i>
HW.1.7	The Applicant	<p>Sensitivity Testing</p> <p>The UK Health Security Agency, in its RR [RR-4687], stated that <i>“Given current uncertainties in the exposure response relationships for these two health endpoints, UKHSA recommends that sensitivity analyses are carried out for these estimates”.</i></p> <p>Can the Applicant confirm why the undertaking of such a sensitivity test is not considered proportionate and how, without the testing, has the conclusion been reached that it would not change the agreed position (Table 3.87 of [REP1-048])?</p> <hr/> <p>ES Chapter 18: Health and Wellbeing [APP-043] takes a best practice approach in providing a quantitative analysis to fulfil a specific purpose (illustrate the scale of change), without duplicating analyses undertaken in other parts of the ES. Fundamental to the quantitative analysis remaining proportionate, transparent and accessible to readers is the use of a clear and straightforward methodology. The introduction of multiple additional formulae, definitions and parameters is considered contrary to this aim.</p> <p>The health outcomes of ‘highly annoyed’ and ‘highly sleep disturbed’ were not selected for reporting in the ES Chapter 18: Health and Wellbeing [APP-043] because there are uncertainties in the CRFs for these two health endpoints, a point made by UKHSA in their relevant representation [RR-4687]. Sensitivity testing around the various CRFs and indeed around the various formulae used by Defra and WHO 2018 would only confirm the position that there are wide error margins for such a calculation. Likely variation is of two to three times effect size, which would remain the same broad scale of change</p>

		<p>relevant to a population level conclusion. The alternative noise related health outcomes reported in ES Appendix 18.8.1 Quantitative Health Assessment Results [APP-208] are considered the more robust and proportionate approach in fulfilling the role of the quantitative analysis.</p> <p>It is also noted that the modelled outcomes already have sensitivity tests (low and high CRFs in addition to the central CRF), as specifically requested by the Health Topic Working Group, see ES Appendix 18.8.1 Quantitative Health Assessment Results [APP-208].</p> <p>Any calculations of number of people ‘highly annoyed’ or ‘highly sleep disturbed’ would only be a further metric for the same role of indicating scale of change. It would not be an accurate indication of actual number of people affected, both because of the calculation’s uncertainties and because the input data from ES Chapter 14: Noise and Vibration [APP-039] does not take into account the mitigating effects of the ES Appendix 14.9.10: Noise Insulation Scheme [APP-180].</p> <p>If ES Chapter 18 Health and Wellbeing [APP-043] had instead only used ‘highly annoyed’ and ‘highly sleep disturbed’ formulae as a basis for determining the scale of the population health noise effects, then sensitivity analysis might well have been appropriate (reflecting the 2019 UKHSA research publication by Fenech and Rodgers²). However, foreseeing known concerns about such metrics, ES Chapter 18: Health and Wellbeing [APP-043] has not placed reliance on such calculations, so sensitivity testing such calculations is not proportionate.</p> <p>It is not considered proportionate or necessary to undertake any further sensitivity testing because:</p>
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² [Valuing impacts of noise on health -exposure response relationships in current UK guidance and the WHO Environmental Noise Guidelines 2018 — UK Health Security Agency \(ukhsa.gov.uk\)](#)

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| | | <ul style="list-style-type: none">• the ES Chapter 18 Health and Wellbeing [APP-043] conclusions are already validated by a range of alternative, more clinical, quantified noise related health outcomes (stroke, ischemic heart disease and depression), which fulfil the role of indicating scale of change in health outcomes due to the Project; and• the UKHSA conclusion, that the proposed development should not result in any significant adverse impact on public health [RR-4687], is not presented as contingent on sensitivity analysis being undertaken. |
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