

Research into Northampton's Air Quality Management Area's (AQMA's) and the location of Hospitals and GP Surgeries.

By Mrs Lyn Bird.

During the Issue Specific Hearing on December 19th, 2018 Mr Brock enquired as to whether any of the local hospitals or GP surgeries were located within current AQMA's. This question was raised as a result of the discussion about The British Lung Foundation (BLF) report, published in October 2018, titled, 'Toxic air at the door of the NHS.'

(Available from

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In Great Britain there are currently,

'2,220 GP practices and 248 hospitals are in areas with average levels of fine particulate matter (PM_{2.5}), one of the most dangerous air pollutants, that are above the limit recommended by the World Health Organisation (WHO) (10µg/m³ for the annual average).' (BLF, 2018)

The report allows access to an interactive map which includes analysis of fine particulate matter (PM_{2.5}) levels in Northampton. (<https://www.blf.org.uk/air-quality>)

An online search has identified a Northampton Borough Council (NBC) proposed Town Centre AQMA (dated 20/11/2018) which includes five of the current individual urban AQMA's and extends the areas of concern to cover many of the busiest roads within the town. In order to ensure a graphical representation of the information I have taken the liberty to superimpose some of the BLF information onto the NBC map (as shown in appendix i).

For each identified site (on the map in appendix i) which experiences a PM_{2.5} level greater than The World Health Organisation's recommended level of (10 µg/m³ for the annual average) the BLF states,

'This site is in an area that has levels of fine particulate matter (PM_{2.5}) above the World Health Organisation's limit (10 µg/m³ for the annual average). The model used to work this out looks at background levels. It doesn't take into account road-side concentrations and represents an annual average. As such, this site can experience higher levels than what is indicated on the map.'

It is interesting to note that there are two significant outliers. The Crescent Medical Centre (PM_{2.5} level recorded as 13.02) and Park Avenue Medical Centre (PM_{2.5} level recorded as 12.03) are not as closely associated to the identified Town Centre AQMA as some of the other recorded sites, some of which are encircled by roads designated as part of the proposed AQMA.

This suggests that PM_{2.5} does not disperse at a significant rate, with distance and this could have implications around the proposed Northampton Gateway site if levels of the pollutant were tested in the area.

Further discussion with Northampton Borough Council may improve understanding of the current AQMA situation and their justification for proposing an amalgamated version of those five zones to include many of Northampton's busiest roads.

Given the PM_{2.5} concerns within Northampton's urban environment The Stop Roxhill Northampton Gateway (SRNG) Action Group would welcome further air quality assessment within the current

AQMA's in close proximity to the proposed SRFI site (on the M1 and A45). What are the current PM2.5 levels within the area? NBC confirmed at the Issue Specific Hearing that PM2.5 is a pollutant which has been confirmed as a public health concern. In light of this acknowledgement it would seem prudent to test for its presence in the current congested climate as well as to consider its health implications in the simulated traffic flow data if the SRFI were considered viable in the current proposed location?

It was timely to read the Editor's comments in the January 2019 edition of The Railway Magazine (please see appendix ii). This was highlighted to us by a member of the Stop Rail Central (SRC) Action Group. Within the article Chris Milner comments about the Northampton Gateway application and the limited success, as rail freight terminals, of some of the other strategic developments that have been approved by central government and subsequently built, some like the Northampton Gateway proposal, on green field sites. The editorial is thought-provoking and I would urge all interested parties to read it. Chris signs off with a powerful statement,

'It's likely within a few years these terminals will end up being road-served because it's cheaper, convenient and more flexible, completely ignoring the green credentials rail can offer.'

This is an individual viewpoint but it instils concern and reinforces the arguments against the Northampton Gateway proposal if it will be nothing more than warehousing that is serviced by a majority of road-based freight handling. More Heavy Goods Vehicles and cars on our local transport network will increase congestion and exposure of local residents to higher levels of air pollution. This is not acceptable to us.

Please read about the Health and Air Quality meeting which was organised in November in response to requests from local residents to be able to voice their concerns about their personal health and current air quality as well as how they perceive the situation may deteriorate if the Northampton Gateway proposal was approved.

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(Accessed 01/12/2018)

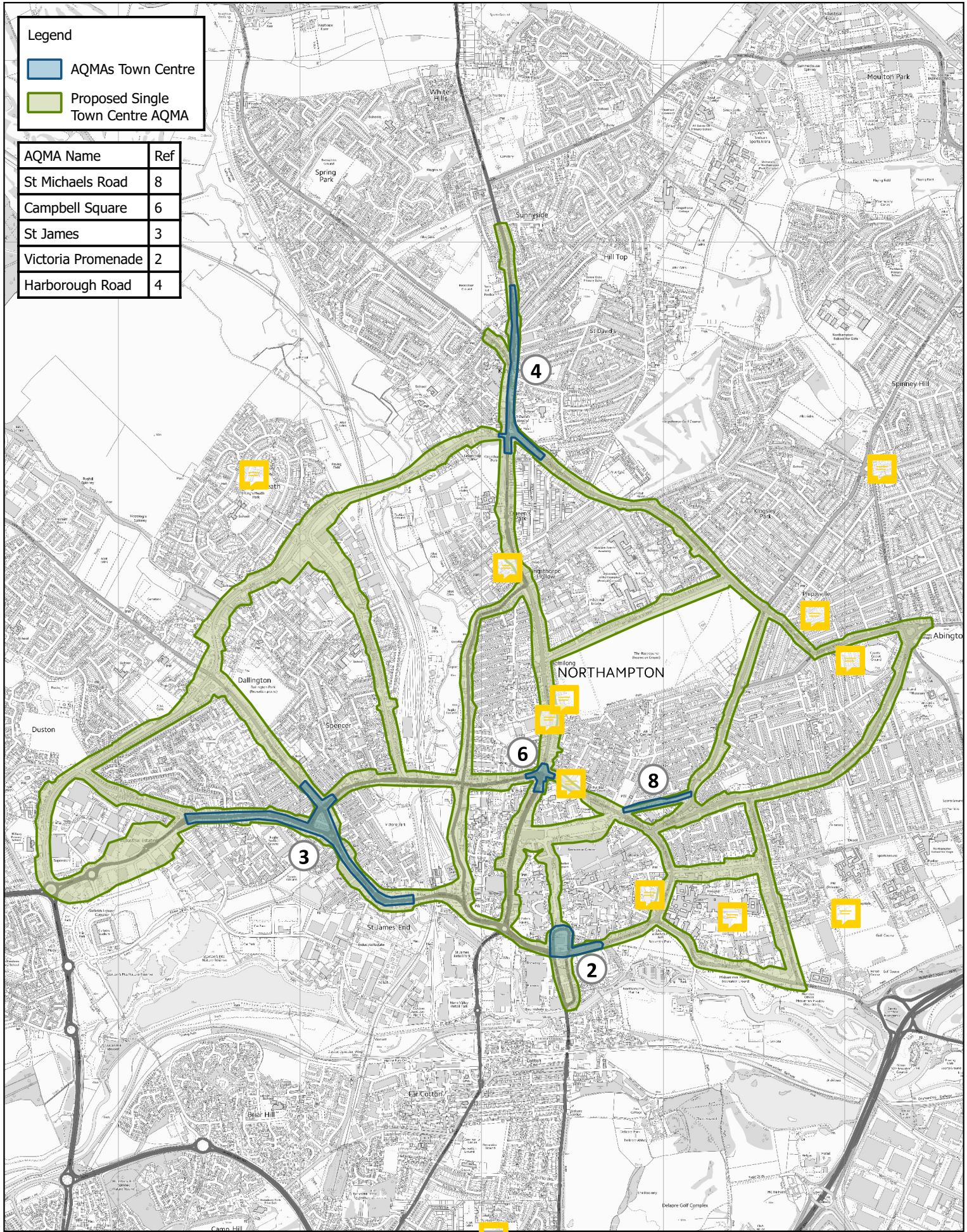
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Appendix i and ii are supplied as separate files as they could not be attached to this document.

Legend

- AQMAs Town Centre
- Proposed Single Town Centre AQMA

AQMA Name	Ref
St Michaels Road	8
Campbell Square	6
St James	3
Victoria Promenade	2
Harborough Road	4



NORTHAMPTON
BOROUGH COUNCIL

Title: Proposed Town Centre AQMA

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Date: 20-11-2018

Scale: 1:26.416

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© 2019 Mortons Media ISSN 0033-8923

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Media Centre, Morton Way, Horncastle, Lincs LN9 6JR

SUBSCRIPTION

Full subscription rates (but see page 30 for offer):
12 months 12 issues, inc post and packing - UK
£52.80. Export rates are also available - see page 113
for more details. UK subscriptions are zero-rated for
the purposes of Value Added Tax.
Enquiries: subscriptions@mortons.co.uk

PRINT AND DISTRIBUTIONS

Printed by: William Gibbons & Son, Wolverhampton
Distribution by: Marketforce UK Ltd,
5 Churchill Place, Canary Wharf, London E14 5HU
0203 787 9001

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This issue was published on January 2, 2019.
The next will be on sale on February 6, 2019.

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Total Average Circulation
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Genuine rail freight terminal or warehouses with seldom-used sidings?

HAS anyone else noticed the large number of rail freight terminals in the Midlands which are under construction or in planning stages?

At junction 15 on the M1, developers are aiming to construct five million sq ft of warehousing in what is called the Northampton Gateway Rail Freight Interchange on a wedge of land between the West Coast Main Line and the motorway.

Separately, and some may say contentiously, on the west side of the line, another developer wants to erect a similar amount of rail-connected warehousing. That's 10 million sq feet of warehouse space built either side of the same section of rail line.

If these two plans weren't enough in respect of their size and affect on the local community, there are plans on the table for another rail freight complex at Elmesthorpe, on the Leicester to Birmingham line. Here, a developer wants to build the Hinckley National Rail Freight Interchange, comprising nine million feet of warehousing – like the Northampton scheme, it's on green field land.

Furthermore, there's another new rail freight distribution park with 6,000,000sq ft of warehousing currently being built next to East Midlands Airport, called East Midlands Gateway, and connected to the Stenson Jct to Sheet Stores Jct freight-only line.

So, here are FOUR schemes totalling 24 million sq ft, but include the in-progress extension at Daventry rail freight terminal and you have 32 million sq feet of new warehousing within 50 miles of each other.

How can such vast complexes be justified, particularly as they are all so close to each other?

Before being accused of being anti-rail freight, let me add another key fact.

The developers have been smart, and by presenting each project as a "strategic rail freight interchange" and a "nationally significant infrastructure project", they are circumventing traditional local council planning controls.

Decisions on such strategic schemes come under the remit of a department of the Government's planning inspectorate, with the final decision being made by the Secretary of State for Housing, Communities & Local Government.

I suspect I am not alone in finding it rather unsavoury that four almost identical schemes, located in close proximity, are proposed by different

developers, and all designed to fall outside the remit of a local authority?

Objections to the plans by concerned local residents won't count for much and are likely to be over-ridden by the 'strategic' nature of the schemes which will be viewed to be in the 'national interest'.

Within the Midlands are a number of unsuccessful rail terminal schemes – Telford, which is lucky to see one train a week; Prologis Park, Coventry has only seen one, maybe two trains; and at Castle Donington, Marks & Spencer has a rail-linked distribution centre which – according to Network Rail – has never seen a revenue-earning incoming freight train.

Leaving aside the matter of whether there are sufficient freight paths on the WCML to serve the sites, as all are next to motorway junctions there has to be genuine concern whether rail will actually benefit because there are no guarantees nor incentives to do so.

While the developers proclaim thousands of jobs, landscaping works, ecological mitigation, footpath and cycleway links which will be nice for the people working there, exactly what constitutes a 'strategic' element? And four 'strategic' sites within 50 miles?

I have a nagging feeling the 'rail freight' aspect attached to these projects is no more than a sop to ensure the developments get through the planning process. It's a view endorsed by a fellow railway journalist, who opined: "The railway is being abused as an Aunt Sally to garner planning acceptance and funding for developers not least because rail is environmentally sustainable. It's fundamentally wrong and indeed dishonest."

It's likely within a few years these terminals will end up being road-served because it's cheaper, convenient and more flexible, completely ignoring the green credentials rail can offer.

It really would be nice to be proved wrong.



TRAIN OF THOUGHT Editor's Comment

Crossrail woes worsen

THINGS just get worse for Crossrail.

The capital's major infrastructure project now needs up to £2billion of extra money to complete the mostly-in-tunnel section from Abbey Wood to Royal Oak (Paddington). Plus, there is no firm guarantee of the line opening this year.

Crossrail's chairman has been forced to resign after the deliberate and disgraceful press leaks he was about to be sacked.

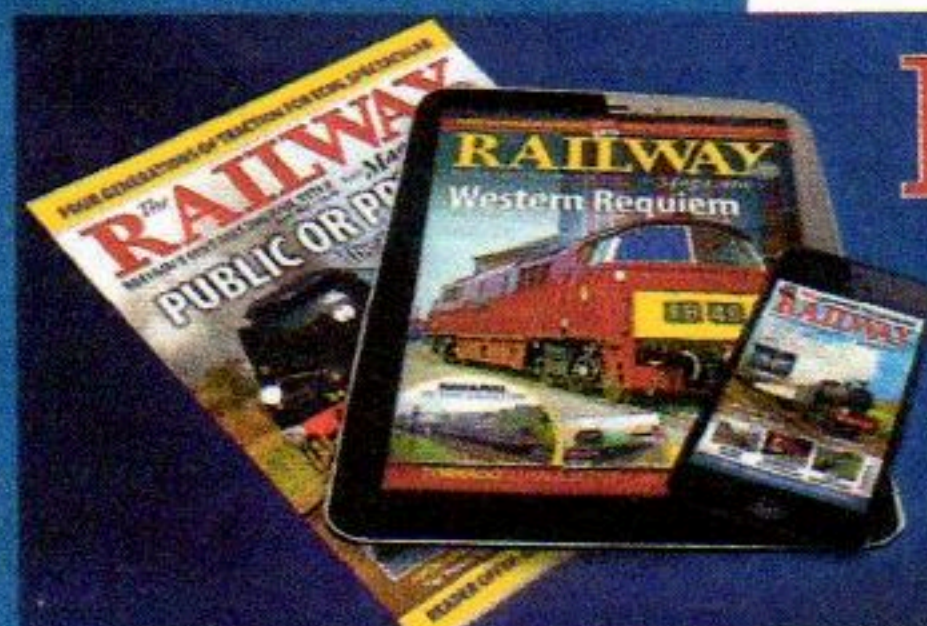
The fact the National Audit Office has launched an investigation into overspending and delays to Crossrail which should separate the 'wheat from the chaff' and

get to the bottom of where it's all gone wrong.

The delay will badly hit Transport for London financially with no fare income from Crossrail, possibly until 2020, but overall rail income for TfL has been declining. Fares have remained frozen for three years and passenger numbers have been dropping.

While the arguments simmer over who said what to whom and when as the blame game is played out, Crossrail gets added to a long list of major rail projects seriously delayed or vastly over budget for one reason or another. For a flagship project, it is so disappointing.

CHRIS MILNER, Editor



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Health and Air Quality report to support the oral presentation on December 19th, 2018

By Mrs Lyn Bird.

The UK Government has acknowledged air pollution as a public health emergency. The first World Health Organisation (WHO) Conference on Air Pollution and Health took place in Geneva at the end of October 2018 to raise global awareness and inspire commitment for change. The Climate Summit last week focused considerable attention upon improvements in air quality. Ongoing scientific evidence is mounting towards sustained concern about traffic-related air pollution and its influence upon health as well as climate change.

In the considered response, which I received by email on Friday 14th December, from the Examining Authority (ExA) they reinforced,

'that examination of the DCO application is primarily a written process, and although the ExA is happy to hear your oral representations it would be concerned if you sought to make a presentation.'

I was asked to appreciate that the ExA must consider the tests which have to be applied by the Secretary of State (SoS) in s.104 of the Planning Act 2008. The ExA also asked me to

'...be clear whether you are saying that the SoS would be in breach of the UK's international obligations by granting the DCO, and if so which international obligations.'

I have no legal expertise. I am interpreting the information which is available to me within the public domain.

On February 21st, 2018 Fiona Harvey in The Guardian Newspaper reported on the High Court ruling on remedies in Client Earth's third clean air case against the UK government.

'The high court ruled that the government's current policy on air pollution was "unlawful", and ordered changes. Air pollution has become a leading test case for environmental legal activism in the UK, as scientists have found as many as 40,000 people a year are dying from dirty air across the country.'

As a result of Wednesday's judgment, clean air in the UK will be overseen by the courts, rather than ministers, in a "wholly exceptional" ruling in which the government was roundly defeated.

Anna Heslop, lawyer with ClientEarth, the activist organisation that brought the case and which has pursued the government on the issue for several years, said: "The judge has effectively allowed us to bring this matter straight back to court without delay if the government continues to fall short of its duties. We are extremely grateful for this because it means we will be able to monitor the government's actions even more effectively and hold them to account.

Mr Justice Garnham, who heard the case, said: "The history of this litigation shows that good faith, hard work and sincere promises are not enough and it seems court must keep the pressure on to ensure compliance is actually achieved." He noted a "real risk" from air pollution, said the government's plans were "seriously flawed" and commended Client Earth as a "valuable monitor of the government's efforts".

He said the approach to tackling pollution in 45 local authority areas was "not sufficient".'

Unfortunately, Northampton Borough Council (NBC) was one of the identified local authority areas.

The High Court will have the powers to pass judgment on whether the government's actions meet its obligations on air pollution under UK and EU law. This may include and influence the Clean Air Strategy (2018) and The National Air Pollution Control Programme which is currently under consultation, due to be published in March 2019.

It would seem prudent for the examining authority to seek a legal opinion from an international environment law expert as to whether the Secretary of State (SoS) could be in breach of the UK's international obligations if the DCO were granted because of the current policy being ruled as 'unlawful'. This would ensure that his status and reputation are protected by maintaining compliance to the current regulatory terms. I am not fluent in the UK's international obligations relating to air quality and would not wish to speculate on this important subject.

The ExA also asked me to focus upon question 1.1.4 of the ExQ1 series raised to the applicant. Feedback was also requested from NBC and South Northants Council (SNC). This was:

ExQ1 – 1.1.4 Will the Applicant please justify why only PM₁₀ and NO₂ have been included in the air quality assessment even though there is a requirement in the EU Ambient Air Quality Directive and the associated UK regulations, and the Infrastructure Planning (Environmental Impact Assessment) Regulations 2017 to assess the impact from other pollutants?

The ExA specified in the email,

'In regards to the specific ExQ1 – 1.1.4, the ExA would find it helpful if you could explain why, taking into account the Applicant's response, and any other responses or comments made to that question, PM_{2.5} levels, sulphates, nitrates and black carbon need to be assessed in this case.'

Why does PM_{2.5} need to be assessed as a pollutant?

The sizes of particulate matter (either 10 microns or 2.5 microns) are chosen because of their relevance for inhalation into the human lung. Specifically, PM₁₀ corresponds to the 'thoracic convention' – the size fraction of inhaled particles that penetrate beyond the larynx, whilst PM_{2.5} corresponds to the 'high risk respirable convention' – the size fraction that penetrate, beyond the body's natural defences to the unciliated airways (essentially to the gas-exchange surfaces) and is of particular concern for high risk groups (children, the elderly and infirm). (AQEG, 2018).

Roxhill justify their stance quoting the requirements of the DEFRA Local Air Quality Management Technical Guidance (TG16). All current Air Quality Management Areas (AQMAs) across the UK are declared for one or more of Nitrogen Dioxide (NO₂), Particulate Matter (PM₁₀) and Sulphur Dioxide (SO₂). The Technical Guidance (TG16) was dated 28th February 2018. Is the DEFRA document now considered to be invalid because of the Client Earth High Court ruling?

NBC suggest that Roxhill's Air Quality Assessment could or should have looked at levels of PM_{2.5} as the pollutant represents a public health concern. We, The Stop Roxhill Northampton Gateway Action Group, agree with NBC. More information is required to identify the current baseline, to include PM_{2.5}. This is because we know that there are issues with PM_{2.5} within Northampton Borough.

In October 2018 The British Lung Foundation published the results of a study which showed that many UK hospitals including our local NHS hospital and the private facility located in close proximity are present in areas that breach WHO limits for PM_{2.5}.

The report points out that although the UK is currently meeting its own legal limits for PM_{2.5}, this is more than twice as high as the WHO recommendation. It calls on the government to adopt the WHO's limit for PM_{2.5} in the upcoming environment bill *"to guarantee the highest health standards are incorporated into future legislation"*.

Northampton Borough Council and County Council state commitment to their Low Emission Strategy (2017 – 2025) in response to the known health risks of vehicle emission impacts upon nitrogen dioxide and particulate matter levels (both PM₁₀ and PM_{2.5}) which have an adverse effect on health. They are quoted as stating,

'NO₂ and PM are invisible, leading to a perception that the air is 'clean.' However, PM is so fine that it is inhaled deep into the respiratory tract and in the case of very fine particles and NO₂...can pass into the bloodstream and be circulated around the body to key organs, including the liver and brain.'

The pollutants are linked to a range of lifelong health problems including asthma, chronic obstructive pulmonary disease, heart disease, strokes and lung cancer.

The Low Emission Strategy suggests that in 2010, across Northampton, 6.1% of people aged over 25 will die prematurely each year because of particulate air pollution which is the equivalent to 102 deaths per year.

The number of people affected by asthma and Chronic Obstructive Pulmonary Disease (COPD) in Northampton, respectively, is higher than for England as a whole (at 5.7%). Is this strategy also considered 'out-of-date' because of the 2018 Client Earth High Court ruling?

Thus far I have been unable to locate a response from SNC to the ExA's first written questions, exploring air quality and emissions, despite the request for feedback from them to 4 of the 52 questions raised on this subject. I presume that there will be an opportunity to review their written response?

I have not reviewed a response from the local Director of Public Health or the local NHS Clinical Commissioning Groups but I presume that they should have been consulted?

To conclude upon the initial question raised, PM_{2.5} should be assessed in the case of the Northampton Gateway proposal because it has greater capacity than PM₁₀ for absorption into the body and subsequent impact upon physiological systems and disease. This concern is backed up by emerging and robust scientific data. This is why The British Lung Foundation call upon the government to adopt the WHO's limit for PM_{2.5} in the upcoming environment bill "to guarantee the highest health standards are incorporated into future legislation".

Local Perception of Current Air Quality.

The philosophy of concern, related to air quality, is reflected by the response of local people, worried about the current traffic congestion issues on our roads and the levels of air pollution. The Northampton Gateway proposal is perceived to compound these issues.

In response to constructive feedback received from local residents, worried about respiratory health, I planned a meeting to offer them the opportunity to have their voices heard.

Precis of Findings – sample group of 30 (many more committed to attend but did not arrive at the venue due to poor health). I will send a full overview of the results by email to the ExA prior to the January 8th deadline.

96% lived within 2.5miles of the proposed site.

93% struggled with a chronic respiratory condition – asthma was most common but pulmonary fibrosis, COPD, a continuous cough and lung cancer were also listed.

The most common source of air contaminants was noted as vehicle fumes by 90% of participants - other sources were thought to be intensive farming, dust and heavy industry.

Roxhill's 'commitment tracker' published on November 30th, 2018 states proposed mitigation measures including:

'Developer commitment to early delivery of the Intermodal Rail Terminal – to maximise the potential for the site to take HGVs from the national road network, and to begin shifting freight to rail from the outset. It is still unclear exactly what percentage of 'shift' might be expected.'

We are mindful of the national picture but local roads are our **primary** concern. No commitment from Roxhill for the local environment has been noted. In fact, Roxhill state,

'... it is not considered that there is a need for extensive, off-setting measures associated with total emissions as the Proposed Development is anticipated to be air quality positive, in that total emissions nationwide, as a result of the Proposed Development, will be negative.'

(Paragraph 9.6.13)

The Northampton Gateway proposal would not mitigate against a shift from road to rail freight which would be noticeable in our immediate location. Ironically, it would bring more diesel engine powered HGV's onto our busy roads to feed the rail freight system. We, the local inhabitants, should not be compromised for the sake of the nation's perceived net 'greater good.'

Currently the majority of freight trains are also diesel powered, introducing additional air quality pressures.

Non-road mobile machinery such as generators, forklift trucks, cranes and construction equipment are usually fuelled by 'red diesel'. If Northampton Gateway were to proceed the construction phase would emit additional pollutants. The Government are currently reviewing the impact of non-road mobile machinery via a consultation process. Has this cumulative impact been assessed by the

applicant? Might it spark expansion of the current Air Quality Management Area (AQMA) as a result of the additional diesel-powered activity?

There are too many potential impacts upon air quality if Northampton Gateway were to proceed. We remain unsatisfied with the lack of consideration for the health of local people who struggle with current levels of air pollution. Please remember that dirty air is a danger to everyone's health.

Current action plan (I will submit a written report before January 8th, 2019 which will include feedback from today's meeting).

- I will endeavour to locate the response from SNC to the examining authority's ExQ1 queries (questions 1.1.3 ,1.1.5, 1.1.27 and 1.1.28) .
- All findings from the SRNG Action Group meeting to investigate current air quality and health will be included.
- Mr Brock enquired, at the meeting today, as to whether either of the local hospitals or the GP surgeries based in areas with known recorded PM_{2.5} levels higher than the WHO limit recommendations were situated within AQMA zones? I will investigate this query and submit it within the subsequent report.

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The answers from respondents to the Health and Air Quality Survey and Meeting stimulated by the Northampton Gateway Planning Application (November 2018) – an overview.

By Mrs Lyn Bird.

I attended the public meeting to discuss the pending Northampton Gateway (NG) SRFI proposal with Andrea Leadsom and Chris Heaton-Harris in October 2018. Many local people raised concerns over the health implications of increased vehicle movements and congestion as a result of the NG proposal. In response to this constructive feedback I planned a meeting to offer local people the opportunity to 'have their voices heard'.

Due to the time of year (cold, wet and dark) for the planned meeting there were options to complete a survey online and to speak to me via telephone. I liaised with The British Lung Foundation who forwarded useful patient information documents related to a vast array of respiratory conditions including asthma, COPD, pulmonary fibrosis and bronchiectasis which were available for participants to take home. Dr Jeffrey, Consultant Respiratory Physician, was keen to attend to share his expert knowledge but unfortunately he had commitments at the local hospital.

Before I begin to share the results of data collection I wish to clarify that, quite obviously,

'Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.' As acknowledged by The World Health Organisation Constitution in 1946. There are many factors which influence illness as well as health.

The meeting on November 22nd, 2018 allowed interactions between Stop Roxhill Northampton Gateway (SRNG) action group members and local people which invoked responses that were meaningful and culturally salient to the participants. The majority of respondent/participants struggle with a chronic respiratory disease. The event was advertised upon social media, in local post offices and parish council notice boards. For those who could not attend I gave my telephone number as an additional contact point. Confidentiality was maintained due to very limited personal identifiers being recorded – age and postcode. All written surveys were stored appropriately. 76% of surveys were submitted online. The data is split between online submissions (which include a date and time stamp) and written submissions (copied verbatim from the paper copies).

The overall response is varied to reflect personal experience and health-related issues. Several suggested finding an alternative site due to the congestion and traffic chaos already present in the local area. A minority felt that a bypass might improve the situation within Roade village but did not justify this opinion. 70% of respondents cited traffic and air pollution as significant personal concerns if the Northampton Gateway application was given consent.

One respondent based in Rochester in Kent stood out as an outlier. They suggested that the SRFI should go ahead. Their health-related issues, which are managed using inhalers, were felt to be linked to intensive farming.

Andrea Leadsom was unable to attend but she kindly wrote to me and re-iterated her stance and argument against this planning application. This, in part, is on the grounds that we need reassurance that as per the Government policy in The National Policy Statement for National Networks consent for development should be refused where the air quality impacts of a scheme will affect the ability of an Air Quality Management Area to be compliant with the UK's Air Quality Directive.

I submit an unabridged overview of feedback from the survey below. The reader may interpret the responses without the need for explanation.

Question 1 – How old are you please?

18 – 30 years - 6%

31-50 years - 13%

51-70 years - 40%

71 – 90 years - 33%

Question 2 – Please advise of your postcode?

Roade - 53%

Blisworth – 16%

Collingtree – 3%

Hartwell – 10%

Grange Park – 6%

Rochester, Kent – 3%

East Hunsbury – 3%

Wootton – 3%

Question3 – How long have you suffered from an illness which is affected by changes in air quality? Please identify the illness and duration. If you experience more than one illness which is sensitive to air quality please record the condition and duration (months / years).

Specified condition	Frequency	Duration
Asthma	7 people	Range from 2 – 65 years
Chronic Obstructive Pulmonary Disease (COPD)	4 people	Range from 1 – 10 years
Pulmonary Fibrosis	1 person	5 years.
Pneumonia and recurrent chest infections	4 people	Range from 1 – 15 years
Lung Cancer	1 person	Occurred in 2015
Rhinitis	1 person	Life-long
Heart-related breathlessness	1 person	No duration stated
No specified condition identified, only duration noted.	8 people	
No condition noted	3 people	

Question 4 – Does fluctuating air quality impact upon your ability to venture outside?

Yes – 33%

Sometimes – 33%

No – 33%

Question 5 – Does fluctuating air quality impact upon your ability to perform daily tasks while indoors?

Yes – 17%

Sometimes – 27%

No – 56%

Question 6 – How do you know when local air quality has deteriorated?

Breathing difficulties - 12/5/2018 9:07 PM

The smell in the air and a 'tickly' throat. This is very evident when traffic idles outside my house.

12/5/2018 8:59 PM

I start wheezing - 11/29/2018 8:40 PM

My asthma deteriorates. - 11/28/2018 3:44 PM

I check local forecasts daily but I will notice it as my nasal lining gets inflamed more

11/16/2018 9:57 PM

My tinnitus increases in intensity and I can lose my balance when it gets too bad.

11/16/2018 7:01 PM

Have to close the windows in the house as car fumes smells come into the house

11/16/2018 10:52 AM

Never notice any deterioration. - 11/15/2018 6:34 PM

effect on eyes and breathing - 11/15/2018 9:58 AM

breathlessness and tightening of chest - 11/15/2018 8:16 AM

I get breathless - 11/15/2018 7:43 AM

Start needing inhaler more, struggle to catch breath, feel wheezy - 11/15/2018 6:52 AM

Dont - 11/15/2018 5:28 AM

Asthma becomes worse - 11/15/2018 2:09 AM

I become breathless. My prescribed reliever often reverses the breathlessness but I later feel more tired than on a good air quality day. Having said that. In the last few years, although I feel well, my peak flow is 350. For my height and build it should be 420. My asthma nurse thinks my body has got used to functioning on 350. - 11/15/2018 12:05 AM

Fumes from vehicles - 11/14/2018 11:31 PM

Breathing difficulties made worse - 11/14/2018 10:41 PM

Reduced respiratory comfort. Greater propensity to cough. - 11/14/2018 10:28 PM

When breathing is hard - 11/14/2018 10:26 PM

I start to wheeze - 11/14/2018 9:56 PM

I GET OUT OF BREATH AND I CAN SMELL THE EXHAUST FUMES IN THE AIR - 11/14/2018 9:43 PM

Ive got an app on my phone - 11/14/2018 8:38 AM

Tightness of chest, wheezy breath. - 11/14/2018 6:03 AM

coughing and irritation of chest and throat increases - 11/13/2018 12:22 PM

I don't! - 10/30/2018 10:34 PM

Responses from paper copies of the survey – added 01/01/2019

'You can smell it and sense it'.

'At busy times there is a smell of fumes.'

'A tight and chesty cough when walking along main roads.'

'I am more breathless.'

'Tiredness.'

Question 7 – Does the weather also impact upon your condition and changes in air quality? Is it more profound during a specific season?

Yes, winter is worse - 12/5/2018 9:07 PM

No - 12/5/2018 8:59 PM

yes high humidity is a problem for me - 11/29/2018 8:40 PM

During hot humid period is bad for me. In the same weather conditions, in an area of low pollution. The effects to my health are minimal - 11/28/2018 3:44 PM

It can get more irritated, yes. More so during hay fever seasons and when there is high pressure (particularly in polluted spaces) - 11/16/2018 9:57 PM

yes, it's worse during spring as the pollen count increases. Also if it's wet/damp it makes my symptoms worse. - 11/16/2018 7:01 PM

When the weather is bad, traffic becomes bad and therefore cars and lorries are idling outside the house before moving around the roundabout - 11/16/2018 10:52 AM

No - 11/15/2018 6:34 PM

yes-all year - 11/15/2018 9:58 AM

when damp - 11/15/2018 8:16 AM

Yes, autumn is the worst - 11/15/2018 7:43 AM

Winter is more difficult as cold air also causes issues - 11/15/2018 6:52 AM

Yes - 11/15/2018 5:28 AM

Winter is worst - 11/15/2018 2:09 AM

Damp low cloud days are horrid. I feel weary. As if I'm not getting enough natural oxygen into my lungs - 11/15/2018 12:05 AM

High pollen count does also cause hay fever - 11/14/2018 11:31 PM

Yes, Summertime with hot weather and smog/fumes from traffic make it difficult for me to be outside for long, have to use my Inhaler more both day & night. Wintertime can also be hard with cold temperatures - 11/14/2018 10:41 PM

If foggy and dank. - 11/14/2018 10:28 PM

Hot dry weather and very cold - 11/14/2018 10:26 PM

Summer and dusty conditions - 11/14/2018 9:56 PM

YES THE SUMMER MONTHS ARE THE WORST WHEN IT IS DRY AND HUMID WHEN IT RAINS IT DAMPENS THE SOOT IN THE AIR - 11/14/2018 9:43 PM

Yes. - 11/14/2018 8:38 AM

Colder weather worse - 11/14/2018 6:03 AM

winter, foggy damp weather - 11/13/2018 12:22 PM

N/A - 10/30/2018 10:34 PM

Responses from paper copies of the survey – added 01/01/2019

'No' from two respondents.

'Yes – Winter.'

'Yes. During winter months when pollution hangs in the air.'

'Yes. Cold air makes things worse.'

Question 8 – What do you think is the most common source of contaminants which impact upon air quality?

Fumes from engines, smoke and dampness - 12/5/2018 9:07 PM

Fumes from car, van and HGV engines. - 12/5/2018 8:59 PM

diesel from motor vehicles - 11/29/2018 8:40 PM

Vehicle emissions - 11/28/2018 3:44 PM

Particulates from vehicle fumes (more so diesel) - 11/16/2018 9:57 PM

diesel particulates. diesel fuel fumes. - 11/16/2018 7:01 PM

Lorries(diesel) followed by cars - 11/16/2018 10:52 AM

Heavy industry. - 11/15/2018 6:34 PM

dust and exhaust fumes - 11/15/2018 9:58 AM

motor vehicle exhaust fumes - 11/15/2018 8:16 AM

Traffic - 11/15/2018 7:43 AM

Vehicle emissions - 11/15/2018 6:52 AM

intensive farming - 11/15/2018 5:28 AM

Traffic fumes - 11/15/2018 2:09 AM

Traffic pollution. I moved to Blisworth in 1994. There was less traffic coming through the village then as a result of the bypass. Air quality was better. Gradually the traffic increased. The air smells unclean. 11/15/2018 12:05 AM

Vehicle and factory business fumes - 11/14/2018 11:31 PM

Fumes from high volume of HGV's and traffic queuing from congested roads.

11/14/2018 10:41 PM

Fuel fumes - 11/14/2018 10:28 PM

Lorries

11/14/2018 10:26 PM

Dust - 11/14/2018 9:56 PM

LORRYS CARS FROM THE M1 AND ADJOINING ROADS AT JUNCTION 15 - 11/14/2018 9:43 PM

Pollution from traffic and weather where is accumulates. 11/14/2018 8:38 AM

Vehicles - 11/14/2018 6:03 AM

traffic fuel emissions - 11/13/2018 12:22 PM

Exhaust emissions - 10/30/2018 10:34 PM

Responses from paper copies of the survey – added 01/01/2019

‘Traffic levels.’

‘Diesel fumes’.

‘Diesel lorries, buses and cars. A5 and M1 closures cause an increase in vehicles through Roade and air quality is very bad.’

‘Vehicle exhaust fumes (especially diesel). Dust is also a problem.’

‘Traffic pollution.’

Question 9 - If you were given the opportunity to discuss your health challenges with The Planning Inspectorate and Roxhill, the developer of Northampton Gateway Rail Freight Interchange, what would you say to them?

Normal growth in traffic volume makes life difficult on the roads, Northampton Gateway would make it unbearable. 12/5/2018 9:07 PM

If the application goes ahead traffic will increase. The A508 will be even busier despite the promised bypass and the villages will suffer. 12/5/2018 8:59 PM

I carefully chose my home to be away from sources of pollution before I got the asthma. Now you bring it to my doorstep. I would like to see air quality monitors all across you site and outside it and penalties levied to any vehicles infringing safe limits.

11/29/2018 8:40 PM

Since moving to Collingtree Park from Cogenhoe Northamptonshire two years ago, my medication has been change to a much stronger dosage with stronger steroids. The effect of that, is my arms bruise very easily

11/28/2018 3:44 PM

I would say that this is a hapless project that goes against all environmental objectives and is only going to have negative impacts on the health of local people. Whether this is their respiratory issues or the sense of pride living in their community, it matters. This is not a case of NIMBYism, this is a call for logic and reasoning. What is the benefit of a centralised system, where goods destined for more coastal areas are diverted away to Northamptonshire on fuel guzzling lorries only to be taken back again? It makes far more sense to have smaller centres at the ports that don't have such big

localised environmental and social impacts. My health issues are not major and are manageable. This is not the case for everyone in my community. The GRFI is not wanted and is not welcome.

11/16/2018 9:57 PM

I am already struggling with health issues brought on by the increase of traffic caused by the 'smart motorway' roadworks and lorries trying to circumvent them by using the surrounding roads to continue their journey. I notice that my symptoms increase when there are roadworks on the surrounding roads too (A5/A422/A508 roundabout improvements) that causes the build up of traffic on local roads. Also the thrumming of diesel engines is sometime enough to set off another bout of ringing in my ears.

11/16/2018 7:01 PM

Give Roade a bypass, it splits the village into 2 having the 508 running through it, also the M1 is now forever at a standstill and Roade has become a rat run. 11/16/2018 10:52 AM

Please ensure that the Roade village by-pass is complete and fully open before work commences on constructing the RFE. 11/15/2018 6:34 PM

prove and justify the need other than to make money for people with more than enough

11/15/2018 9:58 AM

Why build another interchange, when there are those nearby that are not to capacity. This would impact hugely on the health and well being of ALL local residents. The bypass itself would create large areas of immobile traffic, spewing out toxic fumes, as I am sure lorries will use this, and traffic would also build up through the village, which would still be used as a rat run, at peak times, generating huge amounts of pollution. 11/15/2018 8:16 AM

Increases in pollution will put me and my children at risk of health complications. The area is already very polluted and an increase in vehicles using j15 will push that further.

11/15/2018 6:52 AM

Build build

11/15/2018 5:28 AM

Please consider moving the proposed site away from the current area. We have enough pollution from noise and traffic as it is and the road infrastructure is inadequate for the current volume of traffic, let alone the proposed increase from lorries.

11/15/2018 2:09 AM

Please don't approve these rail freight terminals. My health will deteriorate and result in a new increased cost to the NHS to treat me. My symptoms are currently mild, compared to others with breathing issues. Don't kill us off for the sake of it. Find a more appropriate place for this terminal. Here is not the right place. Northampton Town already has above the recommended pollution levels. This terminal will increase the levels even more.

11/15/2018 12:05 AM

I've located to a village environment to get away from city smog and pollution. My health has improved and this development will have an adverse impact on my health.

11/14/2018 11:31 PM

I moved from the town into the country to give myself a better quality of life. Away from high volumes of traffic, congested roads which were all contributing to my COPD getting worse and struggling at times with breathing due to poor air quality. Since moving to Hartwell I have been able to have a much better quality of life. I am now worried that if the Gateway Rail Freight goes ahead that my quality of life in the country will be the same as when I lived in town. I would end up being a prisoner in my home

11/14/2018 10:41 PM

The air and noise pollution caused by the volume of traffic passing through Road, especially when there has been an accident on the M1 and traffic is diverted on to the A508, rises to an unacceptable level and is a health and safety hazard.

11/14/2018 10:28 PM

Too many vehicles now..there will be more if this goes ahead - 11/14/2018 10:26 PM

Not sure at this stage - 11/14/2018 9:56 PM

WE ALREADY HAVE WELL ABOVE LIMITS FOR GOOD AIR QUALITY AND MORE LORRIES WILL BRING MORE CONGESTION TO ALREADY GRIDLOCKED ROADS SO EVEN MORE POLLUTANTS IN THE AIR AS A RESULT. - 11/14/2018 9:43 PM

I suffer enough with asthma without the burden of more traffic pollution. - 11/14/2018 8:38 AM

Since I moved here 11 years ago my health has improved, having moved from a urban environment where my illness was exasperated, to a rural location with much cleaner air quality my asthma is now managed, I still suffer with weather and environmental impacts however not as much as I used to. - 11/14/2018 6:03 AM

would you choose to live in such a polluted area - 11/13/2018 12:22 PM

The doubling of traffic on the A508 at J15 and channeling of over 2600 HGVs through existing AQMA areas on the M1 and A45 can only increase pollution which cannot be mitigated. - 10/30/2018 10:34 PM

Responses from paper copies of the survey – added 01/01/2019

‘The A508 already exceeds safe pollutant levels. Any further increase in traffic could lead to increased health problems for all in the area.’

‘I was allocated a bungalow in a sheltered housing area due to my health. I feel very disappointed that I may potentially be forced to live in an area which will be worse than where I previously lived due directly to this development.’

‘I would emphasise that we have too much traffic passing through our village and any increase at all is unacceptable. At certain times of day we have long delays just going about everyday tasks involving the use of our cars on local roads.’

‘Increasing traffic levels and the loss of green space is a threat to all of us.’

‘No comment noted from one respondent.’

Question 10 – Do you require additional support at home via healthcare providers or charities – for example inhalers, a nebuliser or home or mobile oxygen?

2 inhalers used twice per day. Another inhaler used as and when required.

12/5/2018 9:07 PM

No, not at the moment - 12/5/2018 8:59 PM

inhalers - 11/29/2018 8:40 PM

No - 11/28/2018 3:44 PM

Corticosteroids - 11/16/2018 9:57 PM

No but increased prescription medication, and extra family support to take & collect my child from school when my symptoms are really bad and I can't drive. - 11/16/2018 7:01 PM

None, but my husband has kidney cancer and prostate cancer, not sure if any are linked.

11/16/2018 10:52 AM

No - 11/15/2018 6:34 PM

no - 11/15/2018 9:58 AM

no - 11/15/2018 8:16 AM

Inhalers - 11/15/2018 7:43 AM

Usual nhs inhalers - 11/15/2018 6:52 AM

Inhalers - 11/15/2018 5:28 AM

Yes - 11/15/2018 2:09 AM

No thank you. I have inhalers and regular checks by my local surgery. - 11/15/2018 12:05 AM

Yes - inhalers and occasional oxygen from an ambulance service - 11/14/2018 11:31

Inhalers - 11/14/2018 10:41 PM

I have an inhaler for use in emergency. - 11/14/2018 10:28 PM

No - 11/14/2018 10:26 PM

Inhalers - 11/14/2018 9:56 PM

NO - 11/14/2018 9:43 PM

I use two types of inhaler - 11/14/2018 8:38 AM

Inhalers - 11/14/2018 6:03 AM

no - 11/13/2018 12:22 PM

No - 10/30/2018 10:34 PM

Responses from paper copies of the survey – added 01/01/2019

‘Not yet!’

‘ Mobile oxygen. My Husband is my carer.’

‘ No – from three respondents.’

The survey and meeting were organised under considerable time constraints and could be repeated to collect additional data, if this would prove useful to the examining authority.

I would like to thank Mrs Evelyn Jarvis for her help in providing refreshments to the meeting participants. I thank the SRNG action group for their attendance and unwavering support during the meeting.