

Subject:	Update on Air Quality in Rossendale 2018	Status:	For Publication
Report to:	Cabinet	Date:	28th November 2018
Report of:	Phil Morton – Public Protection Manager	Portfolio Holder:	Operations
Key Decision:	<input type="checkbox"/> Forward Plan <input type="checkbox"/>	General Exception <input type="checkbox"/>	Special Urgency <input type="checkbox"/>
Equality Impact Assessment:	Required:	No	Attached: No
Biodiversity Impact Assessment	Required:	No	Attached: No
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1.	RECOMMENDATION
1.1	That the content of the report be noted.

2. PURPOSE OF REPORT

2.1 This report is to provide an update on air quality in the Rossendale Borough Council area for 2018.

3. CORPORATE PRIORITIES

3.1 The matters discussed in this report impact directly on the following corporate priorities:

- **A clean and green Rossendale:** our priority is to keep Rossendale clean and green for all of Rossendale's residents and visitors, and to take available opportunities to recycle and use energy from renewable sources more efficiently.
- **A proud, healthy and vibrant Rossendale:** our priority is to ensure that we are creating and maintaining a healthy and vibrant place for people to live and visit.

4. RISK ASSESSMENT IMPLICATIONS

4.1 There are no specific risk issues for members to consider arising from this report.

5. BACKGROUND AND OPTIONS

5.1 As recently as the nineties it was felt that air pollution was no longer a major health issue in the United Kingdom. Priority had been given to tackling the biggest individual sources of air pollution and legislation had made the great smogs of the fifties a thing of the past. As these major sources of emissions decreased, the relative contribution of smaller and more dispersed sources of air pollution has increased, which requires new types of action¹.

5.2 In more recent years evidence has emerged that small particles emitted to the air from various sources, such as road transport, industry, agriculture and domestic fires, are still having a considerable effect on health. This type of air pollution is so small that it can't be seen by the naked eye, but can get into our respiratory system.

5.3 Public Health England (PHE) estimates that poor air quality contributes to around 4.4% of all deaths across Lancashire. However, air pollution is likely to contribute a small amount to the deaths of a larger number of exposed individuals rather than being solely responsible for the calculated figure of attributable deaths.¹

5.4 A report by the Royal College of Physicians in February 2017 estimates that all forms of air pollution account for around 40,000 deaths annually with an associated annual social cost of £22.6 billion.¹

The annual health cost to society of the impacts of particulate matter alone in the UK is estimated to be around £16 billion.¹

5.5 Air pollution reduces life expectancy by increasing deaths from heart disease, lung disease and circulatory problems. The majority of health problems result from long-term exposure to air pollution. In addition, air pollution can reduce lung development in children, which may increase symptoms in those young people who develop conditions like asthma.

5.6 Local authorities have a central role in achieving improvements in air quality. District councils have responsibility for monitoring air quality. Where places are found that have pollution levels higher than the national air quality objectives the local authority must declare an Air Quality Management Area (AQMA) and then put together a plan to bring about improvements. In Rossendale Borough Council this work is carried out by Environmental Health staff in the Public Protection Unit. However, the work to improve air quality is the responsibility of a wide range of services, organisations and individuals.

5.7 Every year an Annual Status Report is submitted to the Department for Environment, Food and Rural Affairs (DEFRA) detailing the current position regarding air quality within the Borough. The latest report for Rossendale covering 2017 has been accepted by DEFRA and has been published on the Council's website https://www.rossendale.gov.uk/info/210197/environmental_protection/10622/report_pollution/5#

A copy is attached as Appendix 1.

5.8 In summary, air quality is monitored in 20 locations within Rossendale. There are 2 areas where pollution from vehicles has been higher than the health based objective for nitrogen dioxide (NO₂). These are:

- Manchester Road, Haslingden
- Bacup Road, Rawtenstall

As a result AQMAs were declared in 2013 and action plans have been written to deal with the pollution.

5.9 For the 4th year running the level of NO₂ at the Manchester Road, Haslingden AQMA has been within the objective. If this downward trend continues through 2018 we will be able to give consideration to revoking the AQMA.

5.10 Work completed or in progress to improve air quality includes:

- road signs have been changed in Rawtenstall to direct through-traffic away from the air quality management area on Bacup Road;
- development of the East Lancashire cycleway to provide alternative routes to travel and encourage people to cycle and walk rather than use the car;
- redevelopment of Spinning Point includes the demolition of the bus station which could remove the canyon effect and reduce the build-up of pollution;
- the potential for installation of electric vehicle charging points
- promotion of active travel including the Connect East Lancashire programme <https://www.bwdconnect.org.uk/>
- Work to develop the next Local Transport Plan (LTP4) for Lancashire, Blackpool and

Blackburn with Darwen is underway and the Lancashire County Council Public Health team has submitted an evidence base to the process. Air quality is one of the key themes of the evidence base and will be an identified priority in LTP4. Stakeholder engagement and consultation will be carried out during 2018-19.

- Sign-only 20mph areas have been introduced in residential areas to reduce accidents and encourage walking and cycling. These will have a small effect on reducing particulate emissions. The impact of sign-only 20s has been the subject of a national DfT sponsored review and the impact on air quality is one of the elements being considered. The findings of the study are yet to be shared.

5.11 The Lancashire and Cumbria Directors of Public Health identified action on air quality as a sub-regional priority and hosted a Lancashire and Cumbria Air Quality Summit on 28th February 2018 to explore ways to accelerate action. The purpose of the summit was to;

- Improve participants' understanding of air pollution, the health risks of air pollution and the scale of the problem
- Improve participants' understanding of what actions could be taken to reduce population exposure to air pollution with additional co-benefits to health, economy, sustainability
- Share good practice including national and local examples of air quality improvement work
- Strengthen participants' understanding of their own and each other's' roles in tackling air pollution
- Consider ways of improving public awareness and engagement for action on air quality
- Define the agenda for collective action to prevent air quality attributable deaths across Lancashire and Cumbria

5.12 The event was attended by Elected Members, Local Government Public Health, Planning and Transport and Environmental Health, Public Health England, special interest groups, citizen representatives and academics.

5.13 Attendees put forward ideas and suggested ways to encourage and mobilise action on air quality, which were incorporated into a collective report of the Lancashire and Cumbria Directors of Public Health entitled [Reducing deaths and ill-health caused by poor air quality in Lancashire and Cumbria](#). Attached as appendix 2.

5.14 The report was launched on 21st June 2018 to coincide with Clean Air Day which is a national drive to help people find out more about the issues surrounding air pollution and how they can make a difference.

5.15 To work through how the support of wider society could be mobilised in the challenge to improve air quality a project is being conducted with the NHS Leadership Centre to explore how to better create public health leadership outside of the health sector.

COMMENTS FROM STATUTORY OFFICERS:

6. SECTION 151 OFFICER

6.1 Financial implications are noted within the report.

7. MONITORING OFFICER

7.1 The Council must continue to work towards improvement of air quality to mitigate the risk of penalties being imposed by DEFRA although as outlined in previous years the risk of this is considered to be low.

8. POLICY IMPLICATIONS AND CONSULTATION CARRIED OUT

8.1 Consultation with statutory officers.

9. CONCLUSION

9.1 Work to identify air quality problems will continue to be a priority for the Council's Public Protection Unit. However success in improving the air that we breathe relies on action by a wide range of organisations and individuals.

REFERENCE

1. Reducing deaths and ill-health caused by poor air quality in Lancashire and Cumbria. (Attached as appendix 2).

Background Papers	
Document	Place of Inspection
No background papers	