

2nd Floor, 34 Grosvenor Gardens
London
SW1W 0DH

Sean O'Byrne
Department of Environment, Food and Rural Affairs
Nobel House
17 Smith Square
London
SW1P 3JR

Dear Mr O'Byrne,

The IAQM is the professional body for air quality professionals. The mission of the IAQM is to be the authoritative voice for air quality by maintaining, enhancing and promoting the highest standards of working practices in the field and for the professional development of those who undertake this work.

General reflections

The Government's review of LAQM is a worthwhile exercise and we believe that LAQM (Local Air Quality Management) has the potential to improve air quality and hence improve public health. LAQM provides a means to identify air quality problems and this is an essential component of air quality management. Without the evidence LAQM has produced to date, our understanding of air quality at the local level would be almost non-existent and the air quality profession would be poorly placed to take appropriate action. The exposure of people to air pollutants needs to be reduced to improve health. This underlines the importance of management of local air quality, now that public health is responsibility of local authorities at upper tier and unitary level, following the introduction of the Health and Social Care Act 2012. To improve air quality at the local level, we recommend that many elements of LAQM be retained and enhanced.

Comments on the Aims and Objectives

The consultation document sets out four aims for the review of the local air quality management system and for improving air quality management at the local level. We have considered these aims and we comment on them individually as well as setting out our recommendations for the outcomes of the consultation.

1. *Local action is focused on what is necessary to support air quality improvements to benefit public health and to work towards EU air quality standards*

Health is the primary and most important driver for improving air quality at any level. This is recognised by Defra and the Government in many documents, not least in COMEAP reports, Defra's Air Quality Strategy (2007) and the aims of its Atmosphere and Local Environment Programme. The Treasury's Green Book guidance places an economic value on health impacts and has very recently provided specific guidance on the valuation of the effect of air quality policies. Improving health was also an underpinning consideration when the EU limit values were set. The objective as it stands states the Government's desire to "*work towards EU air quality standards*". However, if improving public health is an explicit goal, then it must be recognised that improving air quality goes beyond mere compliance with EU limit values.

- 2. Local government and stakeholders are clear on their roles and responsibilities and work together to improve air quality*

The IAQM welcomes the proposal to engage stakeholders more actively and meaningfully in action planning. The statutory framework should be clear about the role of local Government and stakeholders. We believe that the statutory obligations as currently provided by LAQM are clear about the role of local authorities with respect to air quality management. Statutory obligations, as currently provided by LAQM, bring some clarity to the local authority's role in air quality management. Removing these obligations would reduce this clarity.

- 3. Local authorities have simple reporting requirements with less bureaucracy and more time to concentrate on actions to improve air quality and public health*

The current reporting arrangements provide an important evidence base on which to act and are not purely bureaucracy for its own sake. The current costs of reporting are very modest in comparison to the costs of public health disbenefit associated with poor air quality. A small cost-saving for one department (Defra) would lead to the continuation of a greater cost for another department (DoH). We cannot believe that this is an example of joined-up Government. We are not convinced that local authorities would necessarily react to the removal of a statutory requirement to report air quality by transferring these resources to the non-statutory production of an action plan or some unspecified action to improve public health.

There may be scope to reduce the reporting burden without losing any important information; if this is demonstrated convincingly, the IAQM would support this change and offer our services in helping to advise on the best way to do this.

- 4. Local authorities have access to information about evidence based measures to improve air quality including on transport and communications*

The IAQM supports the Government's intention to provide access to the wide range of information available on how LAQM improves air quality and thus public health. We recognise that the relative paucity of information on successful action planning must be addressed in order to equip local authorities with the tools to effect change. We could facilitate the co-ordination and generation of a database of such evidence through our extensive membership and the wider air quality community.

It is the IAQM's position that the available evidence demonstrates the potential for LAQM to improve air quality and public health. However, more evidence needs to be made available that will enable action planning to be more successful, along with the political drive to ensure it can be given sufficient priority. Local authorities need both access to information and the authority to act decisively and appropriately when local air quality is adversely affected.

Our Vision

The IAQM is *the* representative body for air quality professionals in the UK. Sound management requires measurement, assessment, planning action and review in a continuous cycle. For air quality management to be effective at the local level, local authorities must have the mandate and resources to measure air quality and identify problem areas, as a foundation to improving air quality through action plans. Measurement, and sometimes modelling, is an essential component of air quality management – and provides the evidence base from which local authorities can act. The current

system provides a basis for this and the IAQM believes that any future system should build upon this solid framework for diagnosing poor air quality.

It follows from this that Air Quality Management Areas (AQMAs) should be retained. They are a valuable part of the evidence base and enable local authorities to account for air quality impacts in, for example, development control. A statutory responsibility for LAQM is vital in order to preserve its status and ensure sufficient allocation of resources within local authorities.

Action plans are very important in improving air quality – these build upon the other elements of LAQM and cannot achieve effective outcomes without them.

There is well established evidence that current air quality concentrations impose a burden equivalent to nearly 29,000 deaths per year in the UK population and an associated loss of life expectancy of about 340,000 life years. On average, this equates to about six months of life expectancy. Far from reducing the existing LAQM regime, we believe that the Government should strengthen it by retaining the best elements of the current system whilst giving local authorities the power and resources to achieve better action planning.

Comments on the options

We disagree with the consultation's conclusion that Option 3 would be best placed to achieve the stated aims. As we argue above, the aims can be achieved by preserving the core elements of the current LAQM regime and building upon it, especially with regard to the implementation of effective action plans. Option 3 proposes that local authorities would no longer be required to carry out detailed assessments or to make/amend AQMAs. This would fatally undermine local authorities' abilities to improve public health.

Local authorities should be in a position to address local air quality hotspots as these are a significant source of public exposure to air pollutants and mean that the UK is not fully meeting its obligations under the Air Quality Directive. The IAQM is not fundamentally opposed to using the EU limit values instead of the current national objectives, provided that they are applied in the same way with regard to human exposure and the Data Quality Objectives (DQOs) set out in Annex 1 of the Directive are not used to reduce or eliminate local authority monitoring and modelling.

The removal of a duty to consider 1,3 butadiene concentrations, CO concentrations or 15 minute average concentrations of SO₂ may not be significant with regard to current and future air quality as it affects human health for *most* of the population. On this basis, we are not fundamentally opposed to this proposal, provided that it is demonstrated that no adverse health effects would arise. Increased local attention to concentrations of PM_{2.5} is strongly recommended and, in this respect, the current national objectives are deficient in protecting public health. LAQM should be updated to reflect current evidence on the most important pollutants with regard to health, most notably PM_{2.5}.

The IAQM calls for a new Air Quality Strategy, which would outline the strong case by which Government at all levels will reduce emissions and improve air quality continuously. This should have the stated aim of compliance with EU limit values in all locations and, where compliance is achieved, the aim to improve air quality still further to have increased positive health impacts. This would demonstrate effective leadership on the issue of air quality.

The IAQM wishes to see a local air quality management structure in place, promoted by statute, so that it has sufficient status to enable local authorities to allocate appropriate resources to deliver

better air quality. The current system would benefit from some refinement, but should not be changed radically. We believe that the proposals as they stand do not meet the objectives of the consultation and would remove the elements of LAQM that are essential for it to function effectively.

Therefore, of the options presented, Option 2 is the most closely aligned with the objectives but the IAQM maintains that it requires significant alteration in order to meet the consultation's aims. Any proposal to amend LAQM should include, as a minimum:

- a duty or incentive to monitor air quality and provide an evidence base where an action plan is required;
- the retention of AQMAs;
- a duty on local authorities to reduce exposure to PM_{2.5}, where local measures are feasible and effective;
- a duty to report on local air quality in a form that works for both the Government and the public; and
- a mechanism for aligning reporting and action plans with the public health objectives of local government and the Directors of Public Health.

We would recommend a more prolonged and considered consultation with the air quality profession and local authorities to aid you in this re-drafting.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'R. Barrowcliffe', written in a cursive style.

Roger Barrowcliffe
Chair