

Schedule of Responses – Appendix H.1

Health Impact Assessment Theme

When reading this schedule, it is useful to have read the following complementary documents:

- **Chapter 5 of the Consultation Report** – the main chapter which describes how EDF Energy has analysed the consultation responses and details how the schedule of responses works
- **Schedule of Responses Framework** from Appendix H – the categorisation framework used by EDF Energy when analysing the consultation responses
- **Consultee Comment Key** from Appendix H – to allow consultees who returned a response to consultation to identify which topics contain their comments

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 332	Public	Stage 1	The risk to health from leaks, accidents etc is too great and as for keeping radio active spent fuel for 160 years, if it's so safe dump it in London by the MPs supporting it.	9020-151-3669		/		<p>Statutory consultees at Stage 2 sought a more effective demonstration of a systematic appraisal process, spanning potential impacts and their significance, mitigation measures, and residual impacts, with assumptions and uncertainties clearly stated. One consultee raised the need to allow for accompanying family members when assessing the impact of the incoming labour force on the demands on local hospital provision.</p> <p>In contrast to the Environmental Statement (ES), a single set of defined significance criteria have not been applied to the assessment protocols within the Health Impact Assessment (HIA). This is because of the inherent flaws in attempting to apply a single set of criteria to an assessment which covers a broad and diverse range of health parameters.</p> <p>Nevertheless the HIA now presented does discuss health impacts in terms of whether they have a potential beneficial or adverse implication and seeks to quantify and appraise the likelihood, magnitude and significance of outcomes (both adverse and beneficial). Where the HIA has drawn on Chapters within the ES (such as those on Air Quality and Noise and Vibration for the main and various Associated Development sites), then the corresponding statements of significance have also been drawn across. This ensures that the terminology and conclusions used in the HIA are consistent with the ES.</p> <p>Furthermore, to increase the visibility of the systematic appraisal process, Table 2.2 in the HIA, which outlines the identified health pathways, has been updated to include a column signposting the relevant section where the impact has been assessed and, if necessary, mitigated. The overall structure of the HIA is that Chapter 5 presents the assessment and results, Chapter 6 provides an overall conclusion and Chapter 7 presents the Health Action Plan (containing the mitigation measures).</p> <p>The HAP outlines the initiatives that have been put forward through the ES as well as those proposed through the HIA to maximise and support health gains. This is necessary as many of the impacts related to changes in air quality, noise, visual impacts and social capital are already addressed within each of the ES technical disciplines. The holistic approach used ensures that the full suite of initiatives associated with</p>
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.6 The main acute hospital serving the area affected by the development is Musgrove Park Hospital in Taunton. The northern edge of the Sedgemoor area also sees Weston General Hospital in Weston-Super- Mare as its local acute hospital.</p> <p>6.7 The consultation documentation references the catchment population for Musgrove Park Hospital as being 340,000 and suggest that the additional demand of 3,000 - 3,500 attracted by the development would have an approximately 1% impact on the demand for services in this area. We believe that when the additional family members are included in the calculation the impact increases the resident population by between 1.5 and 1.7% and therefore should be categorized as a moderate impact.</p>	89462-151-2615		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	While we acknowledge that operational of the plant may displace fossil-fuel based plant and contribute to the health benefits of reduced greenhouse gas emissions (and hence climate change), we consider that the beneficial health impacts inferred from the score require further justification. We also consider that long-term health benefits are not justified either.	89412-151-11357			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	A clearer analysis of each health pathway should be provided, stating the degree of certainty in the appraisal and any assumptions made.	89414-151-2483	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- The appraisal should relate back to the health pathways identified in Section 2.4. The health determinants should be more clearly described and followed by an appraisal of the health outcome including a definition of the significance of the likely health effects.	89414-151-4515	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.6.7 states that 'prior to mitigation, potential health impacts are limited to temporary and intermittent day time annoyance at properties in immediate proximity to sites'. However no information is provided on the proposed mitigation measures or the level of residual effects.	89414-151-9573			/	the project is presented.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.6.11 refers to 'moderate adverse' effects predicted in the noise appraisal. Further information is needed on the criteria used to categorise these effects as 'moderate' and whether these include specific health criteria.	89414-151-10706	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The HIA does not identify any criteria for assessing the magnitude and significance of health effects. As a result it is difficult to determine the extent and severity of the impacts identified in the appraisal or the effectiveness of proposed mitigation measures. As described above, there are instances where the significance of effects is considered to have been under estimated and where potentially significant issues have not been evaluated. However in the absence of any assessment criteria it is not possible to establish a clear response to the evaluation.	89415-151-4276		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	In the absence of the above information it is difficult to ascertain the significance of health impacts before or after mitigation.	89415-151-5449	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The conclusions of the HIA (Section 6) provide an overall summary of the effects from the construction and operation of the development. This discusses potential health effects in terms of 'risks' and 'challenges' rather than providing an assessment of the likely significant effects. This section is considered to be too brief and vague as to the overall health impacts of the proposals.	89415-151-5584			/	

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The degree of certainty of health outcomes varies widely between the different health issues. This is not a reflection of the importance of the issue or the need for mitigation; those issues which are hardest to quantify may be among the most important or of greatest concern to the local community. The HIA does not utilise consistent terminology throughout the appraisal sections to define the degree of certainty in relation to each health pathway. Such terminology should be adopted in the final assessment.	89415-151-8587			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal sections of the report would benefit from the use of sub-heading to clearly differentiate between potential impacts, mitigation and residual impacts.	89415-151-9356			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	There HIA report lacks clarity with regard to potential health impacts, mitigation and residual effects and the conclusions are poorly evidenced in many cases. There is a need for more information on the assumptions, limitations and degree of certainty.	89423-151-4740			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62325	Public	Stage 2	You (EdF) ae now proposing to spend up to two years - with or without a Bypass - doing preliminary build without any regard to the health or safety to Cannington Residents; and a further 6+ years on the main buildings. All this on roads which have been almost unchanged for 100 years - but with vastly increased traffic.	10009-153-456		/		Statutory consultees at Stage 2 called for clearer communication of in-combination impacts, including those due to other unrelated developments, and with specific focus on local communities closest to the development. One noted the potential impact on residents' well-being of the extended working week now proposed. Individual consultees raised concerns on the implications for health of the limited road infrastructure, especially during any emergency requiring evacuation.
Tractivity 62352	Dual - Consultee with an Interest in Land and Public	Stage 2	I am opposed to the construction of further nuclear power stations because of the unacceptable associated risks. There is an established link between the high incidence of breast cancer in communities that are in close proximity to nuclear power stations and there is also the inherent danger linked with the waste products and the continuing dilemma as to what to do with them. This said, I do believe that, where the nuclear industry is concerned, the French are more competent in this field and I am impressed by the candid replies you have given when interviewed on the subject by (Personal details removed) of CH4 News.	10029-153-4097			/	Volume 11 of the Environmental Statement (ES) now contains an assessment of Cumulative Effects, outlining the cumulative impact from both the proposed site and existing and consented development. Also, the Health Impact Assessment (HIA) has been updated following the Stage 2 consultation to include a review of future housing need as identified through the Joint Structure Plan. This is supplemented with information relating to the healthcare demands from both consented and provisional housing developments.
Tractivity 62578	Public	Stage 2	You state very clearly in your Masterplan that the C182 (Rodway) will be the main access to Hinkley Point C, but it's a "C" road, not even an "A" or "B" road - it's a country lane that passes through rural countryside and which was last upgraded in 1957 when Hinkley A was built!! How on earth will this road, not to mention Bridgwater town centre sustain all this additional traffic? Where is your risk assessment with regard to how the emergency services will cope with all these additional people in the area? And what about when (not if) there's an accident at the power station? Where is your evacuation programme for these 5000 workers and neighbouring residents?	10129-153-4412	/			Within the HIA the assessment of well-being considers the cumulative impact of environmental parameters such as air quality, noise and transport movements on local communities. Although the HIA does not include a sub chapter specifically addressing residual effects, the Health Action Plan (HAP) does include a summary of the mitigation measures outlined in the ES which address many of the residual impacts relating to air quality, noise and transport.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Health: The HIA does not consider the cumulative health effects on individual communities that will experience a variety of different impacts. The local villages close to the development (e.g. Shurton, Burton, and Stolford) will be affected by increased traffic, construction noise and dust, the presence of the temporary construction workforce on site, together with long-term visual impacts, severance and stress arising from concerns about on-site operations. Whilst individually these issues may not give rise to measurable health effects, the anxiety and overall reduction in quality of life arising from these cumulative effects could have potential health implications that should be appraised. It is recognised that the assessment of these combined effects may be qualitative or speculative in nature.	89409-153-16810	/			Following the Stage 2 consultation process the shift patterns have been revised to allow for a more efficient construction program. This change has been reflected through the updated chapters within the ES and captured within the HIA. A series of key performance indicators are included in the HAP to monitor the impact of the proposal, feed back into reviews, and update targets. This iterative process allows for the identification and moderation of residual impacts.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Proposed population growth through residential developments in the area and proposed improvements to healthcare facilities are referred to in the health needs assessment. However the HIA does not state whether there are any other developments that could give rise to cumulative health impacts.	89415-153-9550	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The HIA does not consider the cumulative health effects on individual communities that will experience a variety of different impacts. The local villages close to the development (e.g. Shurton, Burton, and Stolford) will be affected by increased traffic, construction noise and dust, the presence of the temporary construction workforce on site, together with long-term visual impacts, severance and stress arising from concerns about on-site operations. Whilst individually these issues may not give rise to measurable health effects, the anxiety and overall reduction in quality of life arising from these cumulative effects could have potential health implications that should be appraised. It is recognised that the assessment of these combined effects may be qualitative or speculative in nature.	89415-153-9847	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Individual health effects are considered separately, with no evaluation of the cumulative impacts on the communities that will be most affected.	89423-153-5922	/			
NHS Somerset	Non-statutory consultee	Stage 2 Update	<p>Construction Working Hours</p> <p>The revised proposals include an earlier adoption of double shift working and possibly night shift working as well in order to comply with the original timetable for completion of the project.</p> <p>They also now propose Saturday afternoon and Sunday working every other week, as opposed to no such working previously. Such a working pattern would not normally be acceptable on grounds of reasonable expectations of residents for peace and quiet. Working hours on construction sites can be controlled both by planning conditions and by the Control of Pollution Act section 61, enforced by the District Council environmental health service. There may be grounds for allowing such working patterns when there is an unavoidable construction need, for example continuous concrete pouring.</p> <p>In general, we would expect that for major building works that are likely to disturb local residents, noisy works would only be permitted between:</p> <p>Monday to Friday 8am-6pm</p> <p>Saturday 8am-1pm</p> <p>Sunday and Bank Holidays are not allowed</p> <p>The proposed double shift working on this site will result in working hours much beyond these norms on weekdays. The loss of a quiet day in addition every other week may have deleterious effects on wellbeing for residents.</p>	89773-153-4212		/		

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WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	During discussions with EDFE, the Councils have requested on a number of occasions that an assessment is undertaken of the combined effects (such as noise, traffic, visual impacts in combination) on the quality of life of local residents and on community well-being, and that this should be illustrated in a spatial manner. EDFE are urged to agree an approach to presenting impacts in a holistic manner that will be more accessible and easily understood by local communities and provide a sound basis for ongoing negotiations.	89890-153-9017	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	However the appraisal does not include any summary or interpretation of this evidence to support the conclusions of the appraisal. Such information is needed in order for the reader to understand the reasoning behind the conclusions reached.	89414-157-2241		/		<p>A statutory consultee criticised the lack of explicit interpretation of the evidence provided to support the conclusions drawn.</p> <p>Chapter 5 of the Health Impact Assessment (HIA) investigates each of the health pathways identified in the project profile. Each assessment protocol applies an appropriately referenced evidence base. To maintain brevity this has not been further supplemented with a full evaluation of the evidence within the main text. However additional information – particularly that relating to radiological exposure – has been provided instead in the appendices.</p>

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Sedgemoor District Council	Dual - Local Authority and Consultee with an Interest in Land	Stage 1	Response - Health Impact assessment important Waste containment at Hinkley C needs to be z. Health Impact Assessment - decommissioning - effects not fully understood, leakage? Stray radiation.	88900-152-12841		/		Statutory consultees at Stage 2 sought increased focus on impacts on – and health inequalities within – the communities closest to the development sites, including Junction 24, and on health pathways not yet fully addressed. Other consultees raised concerns on links with cancer, particularly leukaemia and those affecting children. Increased effort was advocated on epidemiological research.
Tractivity 874	Public	Stage 2	There is an increased incidence of cancer in this area. The statement the authorities have found no link between nuclear and cancer is inadequate. Until conclusively proven otherwise, that link mst remain a possibility. I feel more research and information should be provided.	9632-152-8481			/	The Health Impact Appraisal submitted in support of the Stage 2 consultation process identified and assessed a number of potential health pathways associated with the Hinkley Point C (HPC) Project. These health pathways which set the initial scope of the HIA were defined through consultation with key stakeholders including Somerset County Council, Sedgemoor District Council, West Somerset Council, Taunton Deane Borough Council, the Strategic Health Authority and Somerset Primary Care Trust. Their feedback enabled health issues to be prioritised and grouped.
Tractivity 1213	Public	Stage 2	1. Any other ideas or comments? It is insulting to my intelligence, concerns and questions to ask me about your landscaping ideas of a proposed nuclear power station. I want to know how you will store radioactive waste and ensure its safety for 100+ years? ALL research so far has been into so called ?legacy? waste - with no mention of new generation waste. I want to know it wont leak into groundwater. I want to know and believe that youre telling me the truth and I wont ever get breast cancer because i live near to a power station. I want to know that if i have children that they too will be safe. That you thought of them and their children when you drew up your proposals ans estimated your bank balance. I want you to look me in the eye and with your heart of hearts truely tell me it is safe, no matter what new evidence there is to tell me that the ICRP predictions are right. That youv?e allowed for human error, earthquakes and arrogance and accidents.	9971-152-129			/	Following the Stage 2 consultation process, the health pathways were further updated and refined to more effectively address key stakeholder and community concerns. In addition, a third discrete stage of consultation has been implemented with local hamlets to further investigate local circumstance, needs and concerns. This information has been applied to inform the final assessment. The impact of the HPC Project on access to green space, recreational facilities and public rights of way has been assessed and mitigated through the Environmental Statement (ES). The initiatives which have been put forward in this way are reflected in the Health Action Plan (chapter 7 of the HIA). To ensure clarity, Table 2.2 in the HIA has also been updated to include a column signposting the relevant section where the impact has been assessed and, if necessary, mitigated.
Tractivity 1228	Public	Stage 2 Update	You really must act in the interests of the community and resist pressure from EDF etc who are trying to persuade you that building new EPR reactors at Hinkley would bring any benefits at all to Somerset. These reactors are intrinsically unsafe as they are designed to release poisonous gases from the reactor cores every 18 months. The spent fuel would not be sent off site as it is now but stored on site for 160 years. You need to study all the reports on the ?health detriment? these reactors would bring and understand that if the EPRs are ever built it will be a disaster for the local community, not least because the tourism industry on which Somerset depends would be totally destroyed.	89494-152-1061			/	EDF Energy has entered into a service agreement with a private occupational healthcare provider

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Tractivity 388	Public	Stage 1	6. Please give comments on your preferences and any suggestions about the future use of these facilities. An influx of huge numbers of workers from all over Europe and Asia is not an option in a small community. We were told years ago that cases of leukaemia were possibly due to a virus being introduced to the population, when Hinkley A and B were built, leading to a cluster of cases in this area. Now that we are so much better informed, compensation for any such cases would certainly be sought.	9073-152-2506			/	responsible for the on-site healthcare facilities and screening, promotion and prevention initiatives for the workforce. To address any potential residual impact on local healthcare services a healthcare planning contribution has been outlined through the Health Action Plan and is expected to be covered under the Section 106 Agreement. In relation to the park and ride at Junction 24 of the M5, the proposed site is a recent amendment to the proposed development. The amendment responds to ongoing consultation and an iterative review of alternative options to best incorporate local community concerns and priorities within the planning process. As with all aspects of the proposed development, the site will be appropriately assessed through the regulatory assessment process to protect environment and community health. It will also be further assessed through the voluntarily commissioned Health Impact Assessment to address community concerns through a dedicated Health Action Plan.
Tractivity 441	Public	Stage 1	be proactive and include both a health centre (run by local GPs) and a centre for ongoing epidemiological research & monitoring. Include the effects of traffic (moving fuel in and low-level waste out) as well as the station itself.	9120-152-5129		/		
Tractivity 62128	Public	Stage 1	(h) no plans are in being to assess the eventual health risks to the local population in terms of future radioactive discharges and their health consequences (e.g. breast cancer and/or leukaemia analysis);	9415-152-4266			/	
Tractivity 62508	Public	Stage 2	No account has been taken of the Health and Wellbeing of the people living closest to the construction site, and how the development will affect them.	10098-152-6882	/			
Health Protection Agency	Statutory Consultee	Stage 2	It may be worth including consideration of the potential transport of contaminated material off the work site and what would happen if receptors come into contact with any contaminated material off-site. To do this you should determine the exact chemical composition and concentration of pollutants at the HPC site and then conduct a toxicological risk assessment.	89166-152-15878		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	The magnitude and variety of potential impacts on local communities from this project are such that more detailed analysis of the potential harms and benefits is required for communities directly affected to ensure that the harms are mitigated and community benefits realised. In particular NHS Somerset consider that more detail on the health inequalities should be included within this section of the HIA for the communities affected by the development.	89459-152-6191	/			

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>4.1 The assessment chapter of the HIA provides an overview of the health impact of selected factors. It is noted that the structure of the chapter does not correspond directly with the health pathway components identified in the stakeholder engagement section. Specifically the following appear not to be addressed:</p> <ul style="list-style-type: none"> - communicable disease risk - impact on green space and recreational facilities - loss of cycle routes and rights of way - possible social impacts of temporary workforce such as increase in unplanned pregnancy 	89460-152-16	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	6.5 We believe it would be appropriate for an assessment of the secondary impacts of the development to be undertaken as this has both significant benefits to the local economy and increased pressures to the service areas such as health.	89462-152-2334			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	However we consider that the possible health effects extend beyond those identified, for instance from increased traffic accidents and changes in air quality.	89412-152-10000			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>17 Health Impact Assessment</p> <p>17.1 Baseline</p> <p>The Health Impact Assessment (HIA) baseline comprises a Community Profile, which describes the existing health and socio-economic status of the communities affected by the proposed development. There is also an evidence base comprising information from published research and guidance documents on which the conclusions of the HIA are based.</p> <p>17.1.1 Community profile</p> <p>The Community Profile is considered to be comprehensive in terms of the range of health and socio-economic indicators presented. However a number of issues are identified in relation to the presentation and use of the information provided in this section:</p> <ul style="list-style-type: none"> - The Community Profile covers a wide area of West Somerset, Sedgemoor 	89414-152-0	/			

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			<p>and Taunton Dean, with the level of detail dictated by data availability. Whilst it is acknowledged that not all data is available at the local level, the appraisal would benefit from a more focussed evaluation of the characteristics of those communities that are most affected (e.g. the local villages and Bridgwater) where possible.</p> <p>- Maps included within the Health Impact Assessment do not identify the location of off- site works. As such it is not possible to ascertain the characteristics of the communities affected by these works.</p> <p>- It is not clear whether the information contained in the Community Profile has been used to inform the appraisal. The methodology (para 1.5.5) makes a general statement that 'a community profile not only forms the basis to exposure response modelling but also allows an insight as to how potential health pathways may act disproportionately upon certain communities.' However the appraisal (Section 5) makes little or no reference to the characteristics of the affected communities and how these characteristics affect the way communities will experience health effects. Paragraph 3.8.5 states that 'the HIA will consider the highest burdens of poor health to ensure a conservative approach and the assessment of a worst case scenario'; again this approach is not evident within the appraisal sections.</p> <p>17.1.2 Evidence base</p>					
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The health pathways listed in Table 2.2 do not fully reflect the health issues identified in stakeholder consultations as described in Section 4. Health pathways raised by stakeholders and not listed in Table 2.2 include:</p> <ul style="list-style-type: none"> - Health promotion - impacts on / enhancement of green space; - Visual impacts - amenity value and use; and - Community severance, access and accessibility - loss of any pedestrian or cycle routes, impact on access to areas of green space, amenities, facilities and social networks. 	89414-152-6040			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The Health Action Plan (7.5.12) states that there will be a need for periodic maintenance during operation of the facility, generating the requirement for around 1,000 maintenance workers. This impact is not assessed in Section 5.7.</p>	89414-152-13440			/	

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Stop Hinkley	Non-statutory consultee	Stage 2 Update	Any temporary local benefits during construction must be set against the fact that, if allowed to start operation, Hinkley C would be an ongoing hazard to health and safety with a dangerous legacy of radioactive waste.	89770-152-2446			/	
Sedgemoor and West Somerset District Council's	Dual - Local authority and consultee with an interest in land (Sedgemoor)	M5 J24 and Bridgwater Highway Improvements	- No information has been provided in respect of the likely environmental or health impacts on adjacent occupiers to the 'Somersfield' site notably the Travelodge Hotel at the motorway services, residential dwellings, the Bridgwater Brainwave Centre or users of the proposed Induction Centre.	89959-152-16531	/			

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Tractivity 799	Public	Stage 2	<p>5. Any other ideas or comments?</p> <p>Move the freight logistics facilities and park and rides to the hinkley point C site, which should be expanded to the west to allow for these. We as residents do not trust your company should you build them because you may move nuclear waste to these sites past our homes and store it there, which will effect our health. Also we were here first and don't want our house prices dropped. If you do go ahead will you pay compensation? Also the capacity of taunton road IS NOT sufficient for another 120 lorries every 24 hours, We live here and we know our area the best, it is already congested.</p>	9557-154-3292		/		<p>Statutory consultee responses at Stage 2 centred on the expected impact on healthcare provision and the need for commitment to a resourced Health Action Plan to address these. This should recognise the physical, mental and social dimensions, requiring mitigation to span the range from support for local GP services to leisure facilities for local communities through to support for workers following an off-site nuclear emergency. Some comments were received on the lack of apparent linkage between the conclusion that significant unmitigated effects would be effectively mitigated, and the form of mitigation that would achieve this.</p>
Tractivity 846	Dual - Consultee with an Interest in Land and Public	Stage 2	<p>13. Please let us have your overall views on our proposals and any other general comments in the box below</p> <p>Leave Benhole lane alone. You don't own it and have no right to change it in any way. So keep out. Hope p. permission is refused for everything!</p> <p>1) individual compensation for residents of Shurton for the stress and anxiety already caused by this long drawn out consultation.</p>	9604-154-6991	/			<p>The Health Action Plan (HAP) now provided in the Health Impact Assessment (HIA) outlines both mitigation measures and community support initiatives intended to build on and complement the measures contained in the Environmental Statement (ES). Chapter Two of the HIA identifies a range of health pathways relating to site preparation, construction and operation and signposts to where in the HIA these have been assessed, and where in the HAP appropriate mitigation has been put forward.</p>
Tractivity 1093	Public	Stage 2	<p>13. Please let us have your overall views on our proposals and any other general comments in the box below</p> <p>The cost of a serious nuclear accident or incident - Chernobyl style - will not be underwritten by EDF but the community - indeed the European Community has spent many hundreds of millions on the Chernobyl disaster which was not even within the EC borders. EDF will not pay for the full cost of dealing with nuclear waste - the likely bill for dealing with nuclear waste is far more than the cost of building and running the site through its life - this again is not an acceptable arrangement. EDF will be making profits over a 30 year period and after this far higher costs will be incurred by the community, and in the event of a disaster the community carry the full cost. It is also unacceptable that nuclear sites cannot control radiation risks - as shown by serious health risks to employees and ?hot spots? for cancers near nuclear sites; nuclear industry has managed to deny such links in the same sort of ways the tobacco industry did.</p>	9851-154-6085			/	<p>The HAP has been structured to provide an overview of mitigation measures that are to be implemented through the ES. This not only demonstrates the overall suite of health benefits associated with the proposed development but avoids duplication and maintains brevity. Specific socio-economic information including the distribution of the workforce is provided through Chapter 9, Volume 2 of the ES. This has informed development of the HAP.</p> <p>Following the Stage 2 consultation process the HAP has been updated to reflect the initiatives which help to address the potential change in quality of life and</p>

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Tractivity 62531	Public	Stage 2	<p>Comments on EDF Stage 2 Proposals for Hinkley Point "C"</p> <p>I have lived in Nether Stowey for over 30 years and was actively involved in opposition to the last proposal for a new nuclear power station at Hinkley Point in the late 1980s. Fortunately economic good sense prevailed and the newly privatised electricity companies did not want to invest in a risky venture. Hinkley C stayed on the drawing board.</p> <p>The proposal by EdF, 20 years later, to revive the Hinkley C plan is a retrograde step. The world has moved on and it is now possible to clearly see a future energy supply which does not rely on either fossil fuels or uranium. My fundamental objections to EdF's revived Hinkley C are:</p> <ol style="list-style-type: none"> 1. It carries safety risks, from the health effects of radiation through to the possibility of a catastrophic accident, unlike any other means of generating electricity. The storage of radioactive waste at Hinkley for 100 years after electricity generation has ceased is an example of these risks. 2. Its economics are still unreliable, including an entirely new reactor design with no operating track record and steadily rising capital costs. If the venture fails then the government/British taxpayer will be left to pick up the pieces, as happened for example with a near-bankrupt British Energy, now a subsidiary of EdF, in 2003. 3. There are viable alternatives to a nuclear route, as evidenced for example by research carried out for the No Need for Nuclear campaign (www.noneedfornuclear.org.uk) and by the government's own projections to 2050 ("2050 Pathways" at www.decc.gov.uk). Both of these show nuclear being retired from the UK energy mix soon after 2030, with no new build. <p>These are my specific comments on the Stage 2 documentation:</p> <ol style="list-style-type: none"> 1. National Policy <p>EdF refers extensively in the introduction to its Preferred Proposals to government policy on energy and nuclear power ("Preferred Proposals: Explanation and Assessment, July 2010"), and in particular the draft National Policy Statements which were issued in 2009. The new coalition government has since announced that these NPS's will be re-issued in a revised form and a new national consultation will be held. EdF can therefore no longer confidently rely on the statements of government policy it quotes in support of nuclear power and the Hinkley C proposal in particular.</p> <ol style="list-style-type: none"> 2. Radioactive Waste Storage 	10104-154-0	/		/	<p>community well-being. The terminology used in the HIA surrounding mitigation has also been updated to provide additional clarity on the responsibility for delivery of such initiatives.</p> <p>As regards practical implementation, subsequent to the Stage 2 consultation process an occupational healthcare provider has been appointed, and their service provision has been outlined in the HAP. This covers risk prevention and health promotion campaigns and health surveillance programs for the construction workforce, reducing the burden on NHS services. Pre employment health checks would include both drug and alcohol screening which would be taken forward through the construction phase, further reducing the potential impact on specialist local services. The residual impact on healthcare services has been assessed and a financial contribution put forward to support local services.</p> <p>The methodology for calculating the financial support for the residual impact on healthcare services within Somerset has been determined through consultation with Somerset PCT. Financial contributions would be fixed through the draft Section 106 Agreement. The 'Main Site Neighbourhood Support Scheme' also puts forward a Property Price Support and Noise Insulation Scheme for residents of local hamlets in closest proximity to the site, an overview of these schemes is included in the HAP.</p> <p>Contingency plans would be put in place in response to a range of scenarios in order to protect the health and safety of both the workforce and the adjacent community. These contingency plans are not outlined in detail within the HIA but would be further developed following a formal decision from the Infrastructure Planning Commission.</p> <p>The overall community investment of £100 million is intended to improve the quality of life for people in Somerset and invest in infrastructure to provide a lasting benefit for the area. The Community Impact Fund offered by EDF Energy is bespoke for Somerset.</p>
South West Strategic Health Authority	Statutory Consultee	Stage 2	<p>The health impact assessment notes the potential for an increase in communicable diseases, though does not offer any further dialogue over steps that would be taken to help mitigate a potential rise in infection rates. I would therefore ask that consideration be given to the inclusion of the management of communicable diseases as part of the development of a wider Health Action Plan and that EDF Energy continue to work with NHS Somerset to develop and help support a program of public health activity to help control any potential rise in communicable diseases.</p>	10182-154-1423	/			
South West Strategic Health Authority	Statutory Consultee	Stage 2	<p>I would ask that consideration be given to the provision of additional financial support to the local health economy to mitigate and compensate for the additional healthcare activity burden attributable to the accommodation of the temporary workers in the Somerset area for the ten year build period.</p>	10182-154-2465	/			

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Burnham-on-Sea & Highbridge Town Council	Statutory Consultee	Stage 2	Community issues - Hospital capacity (major incident plans - from small injury incident to a major accident on the A39 (the major route to the Hinkley C), minor injuries facilities for workers' dependants, maternity services and other general hospital services)	10220-154-2456			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	Low level intervention such as bicycle routes and country walks in and around the new developments and their road networks should be encouraged as adding value for little or no cost.	10271-154-12982	/			
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	The construction of a new nuclear reactor at Hinkley Point will undoubtedly be decided at Ministerial level and already has pan Government support. It is hoped that the thoughts of the Federation of Bridgwater Practices may help to inform those decision makers of the reality of health care provision in the area surrounding the development, as well as illustrate how this opportunity could make a real difference to the people of Sedgemoor. This responsibility lies not just with EDF, but also NHS Somerset and our locally elected officials, who must drive forward, what is after all, a once in a life time opportunity to create a lasting legacy for our small piece of Somerset.	10271-154-24023			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We recommend: - New Community Hospital/GP walk in Centre with extended/OOH capacity on the Innovia Site - The proposed funding from EDF is allocated for use in local community services and practices, including a new Community Hospital. - Increased funding for on-costs relating to NHS provision - Leisure facilities to include a pool with public access - Accommodation to be handed over for social housing post development - The CBRN action plan be reviewed in light of proposed developments - EDF consult with the wider health providers as well as NHS Somerset to ensure a seamless transition post PCTs In a nutshell we feel there is a real opportunity for different organisations, private and public, to pool thinking and resources to create real change for the better, which is above and beyond the ability of any single organisation on its own. We would like to thank you for taking the time to read our response to the preferred proposals for Hinkley Point C.	10271-154-26668	/			
Stogursey Parish Council	Statutory Consultee	Stage 2	2.10. Health Impact Appraisal [2.4.1] During construction all local health pathways are adverse. This aligns with the view of SPC that there are potentially serious health concerns relating to both physical issues and mental health arising from the stress of the noise, light pollution affecting sleep, traffic, and the behaviour of workers from the camp, if this goes ahead. What are EDF planning to do to mitigate these purely local health risks?	89293-154-9396	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 63240	Consultee with an Interest in Land	Stage 2	15.21 As with the Health Care contribution, the impact of the preliminary works application must also be mitigated and the Estate will expect to see provision for this cost in connection with that application.	89446-154-8864			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Whilst it is acknowledged that the impact of the project on most communicable disease is likely to be limited, consideration should be given to the potential for increase in sexually transmitted disease associated with the temporary workforce. The magnitude of impact will be influenced by the socio demographic constituents of the workforce but the impact should be minimised by promoting appropriate preventive strategies through the occupational health service linked to the public health promotion activities in NHS Somerset and local GP federations.	89460-154-9307	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	6.13 The impact of the development on the Bridgwater health demand clearly falls within the major category and therefore we believe should be mitigated through the contribution of funding towards meeting the additional demand caused.	89462-154-5020	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	8.1 The health action plan section of the HIA provides a summary of the proposed topic areas to be addressed. There is insufficient detail regarding the mitigation measures proposed to be able to assess their adequacy. It is not clear whether the action plan represents a commitment by EDF to implement the actions or whether it represents a range of possible benefits some of which will be included within Environmental Management and Monitoring Plan and others whose status is less clear. We recommend a detailed and resourced health action plan will be required if the project is to proceed.	89463-154-3794	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9 CONCLUSIONS 9.1 NHS Somerset welcomes the approach adopted by EDF to include a separate HIA but emphasises the need to ensure that all actions and recommendations identified within the HIA are followed through to the supporting detailed planning documents and include adequate mitigation measures to offset the health impact of this major project.	89463-154-4392			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.5 EDF should address the resources required maintain an independent surveillance role through NHS structures and make adequate allowance within the any mitigation agreement. (4.24)	89463-154-6110		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.6 The current level of funding suggested in the proposed planning requirements and obligations consultation document is insufficient to meet expected pressures on primary care and hospital services (5.1; 6.15)	89463-154-6298	/			

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.7 Further work and clarity is need from EDF on how they plan to provide financial support and care for its workforce during an off-site nuclear emergency, both in the short and long term. (7.9)	89463-154-6515	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.8 These issues should be addressed in a detailed and resourced health action plan. (8.1)	89463-154-6716			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	More detailed mitigation and enhancement measures are needed to address issues such as the impacts of worker accommodation, and quality of life impacts resulting from community- specific cumulative effects. Further information on delivery mechanisms should also be provided within the Health Action Plan.	89313-154-2443	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- No specific mitigation measures are proposed in relation to managing any effects on admission rates related to specific services like alcohol advisory services.	89339-154-9990			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Mitigation measures are proposed for health impacts including contributions towards the costs of affected General Practitioners based on retrospective proof of effect and generalized contribution towards Primary Care Trust costs. - Recommendation: PCT/ other health practitioners to review adequacy of level of contribution proposed.	89340-154-12333			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	'Soft' health issues are potentially significant and should be taken into account when considering the scheme impacts and the need for mitigation.	89414-154-4305			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- There is a tendency throughout the appraisal to refer to potentially significant 'unmitigated' impacts, and to then go on to conclude that the impacts will not be significant, without identifying what mitigation has been assumed and how this will be implemented.	89414-154-4995	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Mitigation measures are not described in detail within the evaluation text; mitigation and enhancement measures are contained within the Health Action Plan (Section 7), which sets out a range of recommendations geared towards reducing health impacts and encouraging health benefits. Cross referencing between the appraisal sections and the Health Action Plan is very poor and generally absent. This leads to a lack of clarity as to how each health pathway appraised in the HIA will be mitigated.	89415-154-6521	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	As discussed earlier, there is a tendency throughout the appraisal to refer to potentially significant 'unmitigated' impacts, and to then go on to conclude that the impacts will not be significant, without stating what mitigation has been assumed. Mitigation measures should be described fully in the appraisal or reference made to specific measures in the Health Action Plan, to support robust conclusions about the residual health effects.	89415-154-7020	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The Health Action Plan relies on the Environmental Management and Monitoring Plan (EMMP), which is currently under development, to address many of the environmental, community and economic issues that contribute to the health pathways appraised in the HIA. It is assumed that the final HIA report will make reference to the specific measures included in the final EMMP in relation to each health pathway, so that pre-mitigation and residual health impacts can be fully assessed.	89415-154-7465	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Fears and concerns associated with health impacts and perceived risks of accidents or emergency incidents associated with nuclear facilities and nuclear waste storage and how this could impact on business decisions and property transactions within the wider area.	89418-154-2423			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The authorities consider that the health and welfare obligations should respond to the conclusions and recommendations of the Health Impact Assessment (HIA). The relationship of the obligations to the findings of the HIA have not been set out in this section.	89420-154-8598	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The local authorities do not believe that a contribution of £894,240, as set out in paragraph 12.9 is sufficient to mitigation and compensate for the health and well-being effects of the projects, as described above.	89420-154-11856			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The local authorities will require a suitable level of compensation to address the whole range of health and welfare effects of the development,	89420-154-12288			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<ul style="list-style-type: none"> - Measure to make on-site medical facilities easily accessible to the local community / or commensurate improvements to the existing medical facilities within the Parish of Stogursey - Contributions to local medical facilities and services (GPs & clinics) that will be subject to increased demand from existing residents (that will be affected by the project) and from home based workers - Sufficient funding for improvement to the services offered by those hospitals that will be used by the Hinkley C construction workers - Support for pathway to work initiatives related to health - Commitment to provide health facilities within buildings that allow for adaptation and conversion to a medical use <p>In addition the local authorities require:</p> <ul style="list-style-type: none"> - that the health mitigation and compensation measures are discussed and agreed with the PCTs and the local authorities. - monitoring mechanisms with key performance indicators, which include the monitoring of health needs and healthcare provision, should be agreed with the PCT and the local authorities. - Separate Construction and Operational Health Action Plans should be prepared and agreed with the PCT and local authorities. 	89420-154-12448			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The proposals for the management and storage of high level radioactive waste, which could remain on site for up to 160 years, are in their own right a significant concern for the local authorities and the communities that will have to live with the real and perceived risks of the storage facility for several generations. The local authorities believe that the waste storage facility in combination with the power plants puts at risk the confidence of the community in its long term future and has a chilling effect on economic and social vitality. It is widely recognised in the UK and internationally that the development of radioactive waste storage facilities can result in significant impacts and concerns about real as well as perceived risks. These concerns can include the actual and perceived impacts on public health and the environment and on local infrastructure and the economy. The authorities would expect to see these impacts and concerns addressed through appropriate compensation, in scale and kind, to the level of real and perceived risk, as part of the obligations.	89421-154-13557	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Mitigation measures should be linked directly to the effects identified, and commentary provided on the effectiveness of mitigation to enable the likely residual effects to be understood.	89423-154-4994	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	In many instances potentially significant impacts are said to be non-significant following mitigation, without a clear description of what mitigation has been assumed or how this will be delivered.	89423-154-5182	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- In the HIA there is a tendency throughout the appraisal to refer to potentially significant 'unmitigated' impacts, and to then go on to conclude that the impacts will not be significant, without identifying what mitigation has been assumed and how this will be implemented. For example: - the appraisal of social impacts from the introduction of a temporary non-home-based construction workforce comprises a brief, commentary-level appraisal of each accommodation type and location. This section is difficult to follow, with conclusions 'buried' within the text and no clear criteria for defining the magnitude and significance of impacts. The appraisal contains a number of unsubstantiated conclusions, and refers repeatedly to significant 'unmitigated' effects on communities before concluding, without specifying what mitigation measures are assumed, that there will be no significant effects.	89430-154-8933	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62955	Public	Stage 2 Update	We want personal, individual compensation, not double glazing and blinds. We want to be compensated for loss of property values, loss of lifestyle, stress, adverse effects on health. If we have to move because we can no longer stand to live here, we want our expenses to be paid.	89683-154-663	/			
Tractivity 62955	Public	Stage 2 Update	Furthermore, none of you have a clue, neither do you care about us human beings, our mental and physical health, our financial situation, our way of life, freedom, human rights, our right to enjoy our homes and gardens, which we have all worked very hard during our lives to attain. Local residents are very very upset, very worried, and very angry because our lives will be ruined. We feel that EDF do not care about us because there are few of us.	89683-154-2426			/	
Stop Hinkley	Non-statutory consultee	Stage 2 Update	Any temporary local benefits during construction must be set against the fact that, if allowed to start operation, Hinkley C would be an ongoing hazard to health and safety with a dangerous legacy of radioactive waste.	89770-154-2446			/	
NHS Somerset	Non-statutory consultee	Stage 2 Update	Mitigation Measures The project is now expected to have a peak workforce of 5600, an increase from the originally projected 5000. The non-home based workforce is expected to peak at 3700, slightly higher than the figures used for NHS Somerset's Stage 2 response. The Health Task Finish Group is considering the health service pressures consequent to the development with the objective of ensuring appropriate mitigation is included within the health action plan. These changes to the numbers make no difference to the principles on which these discussions are taking place, but will have a bearing on the impact of the project on the NHS. This stage of the Health Task Finish Group's work is nearing completion, and we anticipate that this will be submitted to EDF at the end of April, together with the NHS view of the appropriate mitigation response.	89773-154-2952	/			
NHS Somerset	Non-statutory consultee	Stage 2 Update	Community Fund We note the proposed increase in the overall Community Fund, and would welcome further information on the comparability of this with similar projects elsewhere. In terms of beneficiaries, we recognise that discussion of the detail is ongoing, and are keen to work with yourselves and our local authority colleagues to ensure that key health projects are considered appropriately	89773-154-3809			/	
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	29. The concentration of the workforce within designated campuses will have an effect upon the area in which they are located. Any negative impact is likely to be felt acutely within the local schools and the Social Care teams. We require additional information which assesses the likely numbers of school age children and the indicative distribution of families at peak construction. This highlights the need for further discussions between the Council and EDF about the level of mitigation that will be required.	89844-154-12971			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	it should also deal with healthy living and the physical and mental health needs of the surrounding communities. This will require significant levels of extra support by public and voluntary agencies and will need to be addressed in the mitigation measures that the developer proposes. In particular, we would expect that sufficient resources are made available to ensure full implementation of the proposed Health Action Plan to address local circumstance and support community wellbeing..	89853-154-167	/			
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	The plan does address how safe working practices will be ensured. The Council needs to be reassured that local communities will be adequately protected from health and safety related incidents, and that there will be no additional burden placed upon local public services.	89863-154-2903	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	Health & Wellbeing The Councils support the preparation of a Health Impact Assessment and Health Action Plan by EDFE in consultation with key stakeholders. It is emphasised that payments to support local GP services should form only one part of a holistic approach to community health and well-being, including preventative and responsive measures to improve the environment, provide opportunities for a healthy lifestyle and support delivery of high quality health care provision.	89874-154-6766	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	The Councils are disappointed that this section of the document is concerned only with contributions proposed to support local GP services. As set out in the draft HPC Project SPD (section 10) the Councils will also require contributions that allows for a holistic approach to community health and well-being, including preventative and responsive measures to improve the environment, provide opportunities for a healthy lifestyle and support delivery of high quality health care provision.	89890-154-5591			/	
Tractivity 1362	Public	Stage 2 Update	Your healthcare plans for the workforce do not appear to be finalised or available for comments which is of great concern at this stage in the planning.	89628-374-0	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council, West Somerset Council and Somerset County Council Joint Councils Response	Dual - local authority, statutory consultee (Somerset) and consultee with an interest in land (Somerset and Sedgemoor)	Stage 2	In addition to the strategies, we would like to see 'delivery plans' for each strategy and key actions which will give clarity on how the outcomes, key performance targets and indicators will be funded and delivered over what timeframe.	10275-156-4137	/			<p>Statutory and non-statutory consultees at Stage 2 reiterated the need for resourced, timed delivery plans for the mitigations, and for ongoing surveillance of public health indicators, as currently undertaken by the South West Public Health Observatory.</p> <p>A series of key performance indicators (KPIs) have been put forward to monitor the progress of the initiatives outlined in the Health Action Plan (HAP). The KPIs have evolved throughout the consultation process reflecting the changes made to the HAP. In addition the monitoring program includes engagement with key health stakeholders and seeks to build upon their regular health monitoring data to impartially address community concerns.</p>
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Ongoing health surveillance will be critical to ensure that the public health service is equipped to address potential health concerns and identify any actual impact. This role is best serviced at present by the South West Public Health Observatory (SWPHO) who already collect and analyse regional public health data.	89459-156-3539			/	<p>Complementary mitigation measures address the more intangible aspects important to good health and well-being. Previous consultation identified concern amongst local communities relating to the stress and anxiety generated through the planning process. In addition to continued communication the monitoring of complaint data has been set as a KPI to identify and appropriately address key stressors. A programme of governance will support delivery of the initiatives set out through the HAP.</p>
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	1.7 It should be recognised that the requirement for health monitoring associated with this programme should be enhanced over the construction and operational phase to enable a proactive and authoritative response to health concerns. The resources required to enable this should not be underestimated. Whilst some data will be routinely collected and readily available, there will be other health dimensions which bear further investigation which are neither routinely or easily collected, such as measuring the mental health impact of the development on the surrounding community. It is recommended that a dedicated health impact surveillance programme is supported by EDF Energy as part of the development project.	89459-156-3860			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The Health Action Plan (7.5 f) sets out EDF Energy's legal requirements in relation to the monitoring and reporting of emissions with the potential to harm health, and recommends engagement with the PCT to monitor wider health indicators. The Community Profile (Section 3) presents health indicators which relate to the health pathways assessed, including:</p> <p>Table 17.1: EDF Energy Summary Indicators and Health Pathways</p> <p>Indicator: Life expectancy and mortality</p> <p>Health pathways: Indicators of general health</p> <p>Indicators: Cancer rates</p> <p>Health pathways: Radiological and electromagnetic exposure</p> <p>Indicators: Cardiovascular disease</p> <p>Health pathways: Noise exposure</p> <p>Indicators: Respiratory disease</p> <p>Health pathways: Air emissions - construction, transport, generators</p>	89415-156-10667			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The Somerset Local Area Agreement (37) also includes a wide range of health and socioeconomic indicators which are monitored by the Somerset Strategic Partnership. EDF Energy should work alongside the Strategic Partnership to monitor and report of relevant indicators across the affected populations.	89415-156-12439	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Stop Hinkley	Non-Statutory Consultee	Stage 1	Our group strongly objects to the building of a new nuclear power station at Hinkley Point, or elsewhere, on several important grounds: - health risk to the local population; - health risk to a much wider population in the event of a serious accident or act of terrorism; - that dangerous nuclear waste from the reactors will be stored on site for at least 160 years and having at present no ultimate repository site to be sent to; - and on the basis that these risks do not need to be faced as there is no need for nuclear power.	88940-155-98			/	Statutory consultee responses at Stage 2 sought greater clarity on the linkage between specific health pathways and impacts, the relevant mitigation measures, and the basis for confidence that these will be delivered. To avoid duplication the Health Action Plan (HAP) summarises and provides signposts to the mitigation measures outlined in the Environmental Statement (ES) and also signposts to the draft Section 106 Agreement. This includes the initiatives in place to avoid and/or mitigate potential impacts and enhancing the benefits associated with the Hinkley Point C Project. This is necessary as many of the residual impacts related to changes in air quality, noise, visual and socio-economics are already addressed within the ES. A summary therefore provides a foundation on which the HAP can both build and complement.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The residual health effects are extremely poorly described and evidenced throughout the HIA. This issue is closely linked to the lack of clarity around mitigation measures relating to the specific health pathways and impacts. The appraisal sections of the report would benefit from the use of sub-heading to clearly differentiate between potential impacts, mitigation and residual impacts.	89415-155-9130			/	Following the Stage 2 consultation process an occupational healthcare provider has been appointed. This is reflected in the Health Impact Assessment (HIA) and HAP which outlines the agreed service provision, further helping to identify residual healthcare requirements. Somerset Primary Care Trust have been consulted throughout the preparation of the HIA and involved with the determination of the healthcare planning contribution. In addition, to aid the reader the HIA has been updated to clearly signpost to where a health pathway has been assessed and where necessary mitigated, and where identified ambiguous terminology has been removed from the assessment.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Mitigation measures should be linked directly to the effects identified, and commentary provided on the effectiveness of mitigation to enable the likely residual effects to be understood. In many instances potentially significant impacts are said to be non-significant following mitigation, without a clear description of what mitigation has been assumed or how this will be delivered.	89423-155-4994	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	Action: Review operational scenarios for modelling Issue: No consideration has been made of exposure of persons on the neighbouring power stations. Action: Hinkley Point A and B should be considered as receptors.	89071-171-3170			/	A number of statutory consultee responses at Stage 2 centred on construction dust, particularly the risks due to fine dust not settling within 100m and to impacts on those with pre-existing respiratory conditions, and the need to apply best available techniques to control these risks. Concerns were also raised on the impact of additional traffic on NOx in Bridgwater and on the strategic road network. One response was concerned about CO in Cannington.
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	Comment: We have raised some points about the air quality assessments in our comments earlier. These issues need to be addressed before we can make further comment on the Health Impact Assessment for the operational emissions.	89078-171-9737	/			The Health Impact Assessment (HIA) applies the data from the finalised Air Quality Chapter Chapter 12, Volume 2 of the Environmental Statement and the current scientific evidence base to determine the potential health outcome from construction, operation and transport emissions attributable to the development. However in order to maintain brevity the HIA does not present all of the modelled data and assumptions; these are outlined in the relevant section of the ES. Thus the HIA considers community exposure, while further information regarding the selection of receptor sites is outlined in the ES.
Highways Agency	Statutory Consultee	Stage 2	3.99 An Air Quality Assessment (AQA) is provided; of interest to the Agency are changes in air quality caused by vehicular emissions from additional traffic using the SRN associated with the proposed development.	89174-171-1570			/	The assessment of potential health outcomes includes assessment of PM10 (dust) during construction and consideration of the back-up diesel generators. Any predicted change in air quality has been assessed against national and international guidelines set to protect health.
Tractivity 63240	Consultee with an Interest in Land	Stage 2	2.18 The Estate has assumed (but would like confirmation) that the potential health impact of dust has been fully covered by the Health Impact Assessment that forms part of the Environmental Appraisal and will rely on the responses presented by statutory consultees in terms of their requirements for information.	89440-171-7951			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	We would expect the assessment to cover the safe management of potential emissions to air and water and safe storage of waste and that best available techniques would be used to ensure the risk posed to the public was negligible.	89459-171-1960			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>Air Quality</p> <p>4.5 Assessment of the adequacy of the air quality section of the HIA is primarily a matter for the local authority Environmental Health Officers. The fact that those officers have been involved in the process of agreeing the assessment approach is reassuring. From a public health perspective the approach adopted appears generally sound, using appropriate standards, data and modelling techniques. The absence of operational stage traffic emission impacts is noted, but it is accepted that those impacts will be substantially lower than those that arise in the construction phase.</p> <p>4.6 The conclusions of the air quality section of the HIA are largely accepted. However, there are a few points to address.</p>	89460-171-3161			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>Dust</p> <p>4.7 Prediction and modelling of dust emissions is an inexact art to say the least, and this is acknowledged in the report, with a list of typical dust prevention measures given. It will be critical to ensure that comprehensive dust control measures are in place from the earliest stages of development of the site, in order to avoid dust nuisance. While dust will not generally cause a population level health risk, individuals with poor respiratory health in local communities and properties may suffer more than most from excessive wind-blown dust. Considerable reliance is placed on particles settling out within 100 metres of the dust source, but fine and very fine particles are likely to stay airborne much longer. Failure to ensure effective dust control would be expected to produce a significant number of complaints of nuisance from local communities. It may be appropriate to consider avoiding activities that will generate significant dust, despite controls, when weather conditions are particularly adverse, for example, high northerly winds, prolonged dry conditions, with deposition likely in Shurton.</p>	89460-171-3888			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>Air Pollutants</p> <p>4.8 There are parts of Bridgwater that have borderline acceptable air quality for NO2 levels arising from traffic emissions. The modelling has acknowledged limitations, but the conclusions reached appear sound. Nevertheless the developer may wish to consider specifying the use of low emission vehicles where appropriate, for example, park and ride buses for the Bridgwater campus.</p> <p>4.9 The commitment to schedule testing of diesel generators when weather conditions will maximise dispersal of emissions away from local communities is welcome.</p>	89460-171-5016			/	

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The appraisal of construction impacts (5.4 b-e) should present the relevant air quality model predictions and/or cross-reference the appropriate sections of the air quality appraisal to enable the evaluation of health risks to be fully understood and verified.</p> <p>There is no assessment of construction dust. Whilst not strongly linked to health outcomes such as respiratory disorders, construction dust can cause irritation to the eyes, nose and throat, limit the use and enjoyment of outdoor areas, and cause nuisance associated with dust deposition including internal areas when windows are opened. These issues can adversely affect quality of life and cause anxiety.</p>	89414-171-7664	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The summary of operational effects appears to conclude that there will be no adverse effects following the completion of the construction phase, on the grounds that radiological emissions and air emissions will not pose a significant risk to health.	89415-171-5976			/	
Tractivity 62998	Public	Stage 2 Update	Noise impacts and carbon monoxide poisoning without any road infrastructure in place, will be severely detrimental to Cannington. Cannington is full of young people re the Primary School and College.	89692-171-2634			/	

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17	Comments received under the EIR from the IPC	Stage 2	<p>1Hinkely C Site</p> <p>Satisfactory Totally Unsatisfactory No Opinion Don't know</p> <p>- I find it impossible to believe that a civilised human being imagined this development on this site.</p> <p>- What deluded model of social interaction persuades the company that siting a 700 bed- hostel with buildings three-storeys high, recreational facilities indoors and out and on-site parking for residents' cars and service personnel, on high ground above the nearest community - a hamlet centuries old with several listed buildings lying a mere 300 yards distant - represents the actions of the 'good neighbour' which EdF claims that it wishes to be?</p> <p>- The company itself admits that it will have difficulty reducing light pollution from the proposed campus. It has not acknowledged that there will also be noise nuisance, visual intrusion and evening and weekend recreational nuisance which will affect all local traffic and the private lives of the local hamlet residents. There will be no benefit to the local communities during operation and no legacy use,</p> <p>- Psychologically there will be no escape from sight or sound of the development. EdF might just as well bulldoze the hamlet and have done with the difficulty.</p>	89806-171-9767			/	
Stogursey Parish Council	Statutory Consultee	Stage 2	[5.4.4] 'Community exposure to PM10 particulates is not of an order to quantify any meaningful change in life expectancy.' But what about the lower level effects on such things as Asthma and breathing for those who struggle in clean air? Will EDF say what they plan to do to mitigate these lower level risks?	89293-173-10275	/			

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Sedgemoor and West Somerset District Council's	Dual - Local authority and consultee with an interest in land (Sedgemoor)	M5 J24 and Bridgwater Highway Improvements	<p>- D9 Sustainable Transport and Movement - Travel management schemes and development proposals that reduce congestion and encourage and improved and integrated transport network and allow for a wide choice of modes of transport as a means of access to jobs, homes, leisure and recreation, services and facilities will be encouraged and supported. Proposals will: support the travel improvements identified in the Somerset Future Transport Plan and Infrastructure and Delivery Study; provide, where necessary, improvements to infrastructure to enable development to proceed; and contribute to reducing adverse environmental issues, including air, light and noise pollution; develop innovative and adaptable approaches that deliver higher quality and accessible public transport options; and encourage efficient, safe and sustainable freight transport.</p> <p>- D10 Managing the Transport Impacts of Development - Development proposals that have a significant transport assessment should: be supported by appropriate transport, air quality, noise and vibration and assessments; and include an appropriate Travel Plan outlining how the development will manage transport impacts and encourage more sustainable modes of travel.</p>	89960-171-4764			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 1262	Public	Stage 2 Update	Q4 Do you have any comments on our working hours proposals? If working hours are increased it will be difficult to relax (sleep) particularly as I live on downwind side of Hinkley C resulting in reduced quality of life.	89528-170-747	/			<p>A substantial number of responses to the Stage 2 Update consultation expressed concern on the detrimental impact on mental and physical health of the proposed increase in working hours, particularly on residents close to the development site and transport routes. Some identified the potential mitigation provided by good neighbour actions such as prior warning of particularly noisy activities. Others sought clearer and more detailed appraisal of impacts, including reference to accepted guidelines such as those by WHO.</p> <p>Following the Stage 2 consultation process the shift patterns have been revised to allow for a more efficient construction program. This change has been outlined in full in the Construction Management Strategy. The noise assessment has taken account of the changes in noise exposure resulting from the change in shift patterns, and this is reflected through the Health Impact Assessment (HIA) now presented.</p> <p>The health impact from noise during both construction and operation has been assessed through the HIA. This takes account of non-audible health effects such as annoyance and sleep disturbance. In particular, the parameter used in the noise modelling is LAeq, which represents the total sound energy measured over a specified period. This responds to short term, high energy noise. As such the modelling data on which mitigation measures are based does take account of high noise events.</p> <p>The Noise and Vibration Assessment in Chapter 11, Volume 2 of the Environmental Statement conducted noise modelling for a range of sensitive receptor sites including community dwellings. The results of this have shown that the relative changes in community noise exposure are typically temporary, transient and not of a level sufficient to cause any manifest health disorder. Nevertheless it does recognise that the duration of the project and the relative change in noise in largely rural communities may have a greater influence on the more intangible aspects of health and well-being. Against this background it sets out the mitigating actions taken to minimise noise impacts, including creation of a screening bund and restrictions on the nature of night-time work and on HGV movement routes and timings.</p> <p>Following feedback from the Stage 2 consultation process, the structure of the paragraphs outlining the assessment for operational noise and transport noise</p>
Tractivity 1297	Dual - Consultee with an Interest in Land and Public	Stage 2 Update	I live on the lane in Shurton and will not be able to have windows open in the warmer months as the noise from the continuous working and traffic will prevent me from sleeping. I feel that the change from silence at night to constant traffic and machinery flouts basic human rights, as it will seem like a form of torture being unable to rest at night or spend time in our gardens at weekends.	89563-170-2523	/			
Tractivity 1332	Public	Stage 2 Update	Q4 Do you have any comments on our working hours proposals? Minimise disturbance so that we can sleep the night	89598-170-943	/			
Tractivity 1333	Public	Stage 2 Update	Weekends are classed as family time when local residents will wish to use their homes and gardens and may not be able to enjoy this time. This will have a knock on effect to the overall health and well being of the local population.	89599-170-1318	/			
Tractivity 1334	Public	Stage 2 Update	To work 24 hours a day for 7 days a week is abhorrent and would affect the local residents to such a degree that their lives would be ruined. There should be absolutely no work carried out during the night, to allow peace to nearby residents, from onsite noise due to building works, from buses delivering workers for the shift patterns and also from the necessary light sources which would be required to provide light for workers. There must not be a shift from 8.30pm- 6am.	89600-170-2527		/		
Tractivity 1344	Dual - Consultee with an Interest in Land and Public	Stage 2 Update	I live in the silence of of a village due to health issues. I cannot tolerate noise. A lot of people live here because they work a night shift. i love my garden but it is too noisy to us now. I work from home as a volunteer, but need silence to concentrate. We are in despair. We are OAPs and cannot afford to move. We feel as if we do not exist.	89610-170-1001	/			
Tractivity 1361	Public	Stage 2 Update	I believe that working 24/7 is detrimental to the local residents health and well-being. Everyone deserves a right to some peace and quiet.	89627-170-381	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 1362	Public	Stage 2 Update	Yes. Your proposal to have two daytime shifts as well as night shifts will have a huge negative impact on the traffic volume on the A39, be a danger to residents and cause increased noise and light pollution. In addition to this, your proposed weekend working means that the local residents will have no peace at all.	89628-170-865	/			have been reviewed to help improve the flow of the section.
Tractivity 1371	Dual - Consultee with an Interest in Land and Public	Stage 2 Update	Please have in mind that many of us locally are retired or work regular daytime hours and do like to sleep at night and enjoy our gardens at weekdms etc.	89637-170-1014	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.12 The commitment to inform neighbours of particularly noisy activities is welcome, as much of the annoyance factor associated with noise arises from unpredictability of events and their duration. Good neighbour policies have the potential to substantially mitigate such short term impacts on mental health.	89460-170-6682	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal of community noise impacts does not present data on current and predicted noise levels at receptors or make reference to indicative values for the onset of health effects from noise exposure, such as the WHO Guidelines for Community Noise (36) (which provides guidance on the levels at which impacts such as sleep disturbance, impacts on schools and annoyance in outdoor areas are likely to occur). As such the appraisal is very high-level and lacking in specific information to enable the reader to understand and verify the conclusions drawn.	89414-170-9011	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.6.8 states that 'some construction activities will be undertaken during night-time hours'. This issue will be a source of concern to local communities, and more information should be presented, including an explanation of the need for night-time working and the types of activities that will be undertaken. The appraisal then states that 'given the distance to local receptors, potential noise impacts are not expected to generate internal noise levels of a level to cause sleep disturbance'. This statement should be evidenced with reference to the predicted night-time noise levels at the nearest receptors, and by comparison to appropriate thresholds such as those in the WHO Guidelines. In addition, consideration should be given to the potential impacts on sleep patterns for shift workers sleeping during daytime hours.	89414-170-9865	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>Paragraphs 5.6.11 and 5.6.12 appear contradictory. 5.6.11 refers to temporary adverse effects from construction traffic, and paragraph 5.6.12 then concludes that there will be temporary annoyance caused during operation. The whole of section c) should be rewritten as this section mixes up information on operational on-site noise sources, operational traffic and construction traffic, and is difficult to follow.</p> <p>Overall, it is considered that the community noise appraisal fails to clearly describe the magnitude and significance of community noise impacts in terms of the nature of potential health effects and degree of population exposure.</p>	89414-170-10942	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Additional residual impacts may also occur from the activities associated with the workers accommodation, such as car parks and noise from bar, restaurants, sports facilities, and the general addition of noise from a large scale addition to existing communities.	89423-170-6542			/	
Tractivity 62949	Public	Stage 2 Update	The extension to the working hours results in, effectively, 24 hour working. This not acceptable, UNLESS the noise and light pollution are severely curtailed, especially during the hours of darkness. Noise and light over extended periods will not only destroy the conditions that local people enjoy, but constitute an infringement of human rights.	89680-170-1448	/			
Tractivity 62949	Public	Stage 2 Update	Because this is a rural area, the noise levels at night are very low. Any increase, especially intermittent noises, will disturb the sleep patterns and inevitably affect our health and wellbeing. This is in addition to the existing stress level because of worry about the whole project.	89680-170-1826	/			
Tractivity 62953	Public	Stage 2 Update	Your proposals on working hours, which would be 24/7 including 'maintenance tasks' on a Sunday, are tantamount to torture. When are local residents supposed to sleep? Sleep deprivation can be highly deleterious to health, as can constant noise from site work and traffic. Light pollution will mean an end to our dark skies and stars. Our health and well-being are not being considered and we will suffer accordingly.	89682-170-1635	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62955	Public	Stage 2 Update	I would like to know how you intend to handle legal actions from local people who are unable to sleep at night because of all the noise, light and dust that 24/7 working will create. This is against our human rights. Have you considered the adverse effect on our health that this will cause? Does EDF care about the health of the people of Shurton; I would like an answer to these questions. I don't want to live for next 7 to 10 years with all my doors and windows shut - my family and I enjoy being OUTSIDE.	89683-170-1624			/	
Tractivity 62972	Public	Stage 2 Update	Additional shift hours will add to negative impact on health and wellbeing of local residents: unrelenting noise from the site; increase in road congestion. EDF's desire to complete asap needs to be weighed against the human rights of local residents to peace and quiet if they have chosen to live in a rural location.	89687-170-181			/	
South West Strategic Health Authority	statutory consultee	Stage 2 Update	- I note the significant potential change in hours of construction and consider that it is important to ensure a period of each week free of the consequences of construction site activity (such as noise impact), to protect the health and well-being of residents in the surrounding area. This should be the adopted normal construction process and activity every day/night should be significantly restricted to only essential or emergency work requirements;	89707-170-2003	/			
Sedgemoor District Council	Dual - local authority and consultee with an interest in land	Stage 2 Update	the impact of extended working hours on communities closest to the main HPC site and those directly located to the transport corridors, is considered unacceptable, due to effects on residential amenity and health.	89735-170-10181			/	
West Hinkley Action Group	Non-statutory consultee	Stage 2 Update	The proposals to increase the length of working hours even further has compounded this anxiety. The proximity of the development to family homes will result in sleepless nights as a result of noise nuisance and light pollution for the whole construction period.	89771-170-945	/			

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NHS Somerset	Non-statutory consultee	Stage 2 Update	<p>Construction Working Hours</p> <p>The revised proposals include an earlier adoption of double shift working and possibly night shift working as well in order to comply with the original timetable for completion of the project.</p> <p>They also now propose Saturday afternoon and Sunday working every other week, as opposed to no such working previously. Such a working pattern would not normally be acceptable on grounds of reasonable expectations of residents for peace and quiet. Working hours on construction sites can be controlled both by planning conditions and by the Control of Pollution Act section 61, enforced by the District Council environmental health service. There may be grounds for allowing such working patterns when there is an unavoidable construction need, for example continuous concrete pouring.</p> <p>In general, we would expect that for major building works that are likely to disturb local residents, noisy works would only be permitted between:</p> <p>Monday to Friday 8am-6pm</p> <p>Saturday 8am-1pm</p> <p>Sunday and Bank Holidays are not allowed</p> <p>The proposed double shift working on this site will result in working hours much beyond these norms on weekdays. The loss of a quiet day in addition every other week may have deleterious effects on wellbeing for residents.</p>	89773-170-4212			/	

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17	Comments received under the EIR from the IPC	Stage 2	<p>1Hinkely C Site</p> <p>Satisfactory Totally Unsatisfactory No Opinion Don't know</p> <p>- I find it impossible to believe that a civilised human being imagined this development on this site.</p> <p>- What deluded model of social interaction persuades the company that siting a 700 bed- hostel with buildings three-storeys high, recreational facilities indoors and out and on-site parking for residents' cars and service personnel, on high ground above the nearest community - a hamlet centuries old with several listed buildings lying a mere 300 yards distant - represents the actions of the 'good neighbour' which EdF claims that it wishes to be?</p> <p>- The company itself admits that it will have difficulty reducing light pollution from the proposed campus. It has not acknowledged that there will also be noise nuisance, visual intrusion and evening and weekend recreational nuisance which will affect all local traffic and the private lives of the local hamlet residents. There will be no benefit to the local communities during operation and no legacy use,</p> <p>- Psychologically there will be no escape from sight or sound of the development. EdF might just as well bulldoze the hamlet and have done with the difficulty.</p>	89806-170-9767			/	
25	Comments received under the EIR from the IPC	Stage 2	<p>I totally agree with our local parish council that these plans should not be passed because it will affect everybody's lives in the village, the wharf will be noisy night and day off-loading barges and moving traffic along the road into the proposed fabrication site this will make peoples lives intolerable with noise pollution and lack of sleep.</p>	89814-170-131			/	
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	<p>27. The Council has significant concerns about the effects upon the local environment and quality of life as a direct consequence of the proposed extension in operating hours and possible night time working. This requires further assessment to quantify the impact. Significant extra mitigation and compensation measures may be needed to address in particular noise, disturbance and traffic impacts both close to site and along transport corridors.</p>	89844-170-11892	/			
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	<p>Under the revised proposals, the Council is concerned that future construction noise from the main site and Combwich Wharf may lead to sleep disturbance due to a significant increase over existing noise levels which will be detrimental to the rural locality.</p>	89859-170-351	/			

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Stogursey Parish Council	statutory consultee	Stage 2 Update	The negative health impacts of this for residents close to the site are incalculable. It is not possible to mitigate against this, given the peace and quiet that exists at the moment. The extension of the hours for two-shift working and their much earlier implementation in the schedule are entirely unacceptable.	89871-170-2021			/	
Stogursey Parish Council	statutory consultee	Stage 2 Update	Now it is planned that work will be carried out around the clock from the start of the project for all but a few days of the month, and even on these supposedly quiet days it appears there will be activity. Residents who live within sight and/or earshot of the site will be unable to sleep due to the construction noise and light. The physical and mental health impacts of this are very serious.	89871-170-6112	/			
Stogursey Parish Council	statutory consultee	Stage 2 Update	The nature of construction is that there are sudden noises which will be enough to wake people. Average noise measurements are therefore not an adequate tool for assessing the effect of the noise. Parishioners have already contacted SPC to say they are having trouble sleeping, just thinking about how bad it will be. Several are now receiving medical treatment for the effects of stress brought on by these new proposals.	89871-170-6731	/			
Stogursey Parish Council	statutory consultee	Stage 2 Update	Night time working, other than for a few specific tasks over specified short timescales, is entirely unacceptable due to the seriously negative effects on local residents and wildlife. The proposed extended two-shift working hours and weekend working are entirely unacceptable, due to the disturbance for residents at shift change times which are now during the night, rather than early morning and late evening.	89871-170-15499			/	
Stogursey Parish Council	statutory consultee	Stage 2 Update	2.4.3 [5.1.3] These extended hours are totally unacceptable as they will lead to noise and disruption for local residents from 5:30am to 12:30am. This will lead to low level aggravation at best and sleep deprivation and subsequent serious health problems at worst. SPC is utterly opposed to these hours, which are all about allowing EDF to start generating a profit as soon as possible, and hang the health consequences to the local population.	89872-170-15727			/	
Stogursey Parish Council	statutory consultee	Stage 2 Update	Local residents are entitled to at least some time to allow peaceful enjoyment of their property - as enshrined in the Human Rights Act. SPC will fight these unacceptable hours with every means at their disposal.	89872-170-17234			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	he impact of 24 hour / 7 day a week working on communities closest to the site is considered unacceptable - in terms of residential amenity and potentially in terms of residents on-going health. .	89874-170-14616	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	- Effects on Amenity - Effects of the proposed changes in working hours and shift patterns have the greatest potential effect in terms of disturbance to local people and in terms of loss of local amenity. In many cases the restriction of working hours will be a principle mechanism for mitigating significant effects on human health and amenity.	89874-170-15364	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	In this regard, the impact of extended working hours on communities closest to the main HPC site and those directly located to the transport corridors, is considered unacceptable, due to effects on residential amenity and health.	89876-170-8974			/	
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	- Effects on Amenity - Effects of the proposed changes in working hours and shift patterns have the greatest potential effect in terms of disturbance to local people and in terms of loss of local amenity. In many cases the restriction of working hours will be a principle mechanism for mitigating significant effects on human health and amenity.	89874-266-15364	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Wembdon Parish Council	Statutory Consultee	M5 J24 and Bridgwater Highway Improvements	The increased traffic through Wembdon, Perry Green and Chilton Trinity will put the safety of our residents at significantly increased risk especially the older members of the community and our children. Whilst the country lanes are unsuitable for additional traffic, the pavements in Wembdon are either very narrow or nonexistent and barely accommodate mobility scooters, double buggies and so forth necessitating a degree of pedestrian usage directly on the road. Notably there is no safe or controlled road crossing point anywhere along the B3339. This, combined with inadequate off-road parking throughout the village for residents accessing their homes and essential local amenities, results in any additional traffic and unsuitable vehicles posing a significant safety hazard to all residents. Particular attention is drawn to the facts that Wembdon has an infant / junior school which the majority of children access from the B3339; a busy shop and post office accessed directly off the B3339 with no allocated parking; an active church, community rooms, play group, and children's playing fields - all of which the majority of the village access either from the B3339 or the BNDR. A vehemently expressed concern of local residents as a consequence of additional traffic is a marked increase in noise and environmental pollution which this council perceives as detrimental to rural village life. Whilst we note EDF's intention to schedule their traffic outside the recognised normal rush hours, it is our view that this only serves to broaden the hours of traffic noise and creates noise pollution at unsociable hours, which is not conducive to rural village life, thus adversely impacting on our quality of life.	89921-170-1903	/			
Sedgemoor and West Somerset District Council's	Dual - Local authority and consultee with an interest in land (Sedgemoor)	M5 J24 and Bridgwater Highway Improvements	<p>- D9 Sustainable Transport and Movement - Travel management schemes and development proposals that reduce congestion and encourage and improved and integrated transport network and allow for a wide choice of modes of transport as a means of access to jobs, homes, leisure and recreation, services and facilities will be encouraged and supported. Proposals will: support the travel improvements identified in the Somerset Future Transport Plan and Infrastructure and Delivery Study; provide, where necessary, improvements to infrastructure to enable development to proceed; and contribute to reducing adverse environmental issues, including air, light and noise pollution; develop innovative and adaptable approaches that deliver higher quality and accessible public transport options; and encourage efficient, safe and sustainable freight transport.</p> <p>- D10 Managing the Transport Impacts of Development - Development proposals that have a significant transport assessment should: be supported by appropriate transport, air quality, noise and vibration and assessments; and include an appropriate Travel Plan outlining how the development will manage transport impacts and encourage more sustainable modes of travel.</p>	89960-170-4764			/	

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Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>In 1982 the then National Radiological Protection Board (NRPB but now part of the Health Protection Agency) published the results of its comprehensive analysis into a radiological incident at the proposed Sizewell B pressurised water reactor (PWR) nuclear power station. For this analysis it was assumed that a severely damaging incident would rupture the reactor containment dome (containment failure) giving rise to a very significant release of radioactivity into the environment, yielding a maximum of 2,600 (130 probabilistic expected value) or so deaths in the short term and around 31,000 (3,300 expected) deaths in the longer term.</p> <p>This projection of health detriment assumed that countermeasures would be judiciously implemented, including the speedy evacuation of about 300,000 (24,000 expected) members of public from the locality around the Sizewell site. However, for its mortality and morbidity projections the NRPB relied upon the then ICRP 26 standard that is now superseded by the universally adopted ICRP 60 recommending a x4 increase in the causal effect of radiation exposure, so much so that the 1982 analysis is now considered to be an under-estimate of the potential consequences of such a release.</p> <p>The next projection for the radiological consequences of a PWR reactor accident carried out in the UK was in 1988 for the PWR nuclear plant proposed at Hinkley Point in Somerset. For this study, obviously in account of the Chernobyl disaster two years earlier, the damage and worse case incident considered to be credible comprised a very limited release of radioactivity with the reactor containment remaining intact throughout and following the incident, thereby constraining the radioactive release to a containment bypass for which no early or longer-term deaths were projected.</p>	88960-174-18382			/	<p>Statutory and non-statutory consultees at Stage 2 sought clarification of the practical and financial arrangements for care of HPC staff and visitors in the event of an Off-Site Nuclear Emergency at the existing nuclear power stations, avoiding an additional burden on local public services. One consultee advocated an extension of the radius for pre-distribution of potassium iodate tablets from the current 3.4km to 100 miles.</p> <p>Emergency arrangements have been in place around Hinkley Point for many years as required initially for Hinkley Point A and subsequently Hinkley Point B. These cover both the operators and external agencies including the emergency services, safety and environmental regulators and the relevant local authorities. The arrangements are designed to protect the public, workers and the environment and to bring affected plant under control, terminating any radiological release. They are regularly exercised and periodically witnessed by the Office for Nuclear Regulation. While the arrangements are defined in detail for a defined area around the Hinkley Point site, for example for pre-distribution of potassium iodate tablets, they are designed to be extendible if this should be required.</p> <p>Although the arrangements are designed around a nuclear emergency, they would also be implemented as required in the event of any other incident occurring at the Hinkley Point site.</p>
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>Based on EDF's undertaking that two EPRs, will be commissioned at Hinkley Point, the radiological health consequences of these larger nuclear plants will be analysed taking into account upwards revisions to the causal factors linking radiation dose to health detriment, the larger core mass of nuclear fuel, the increased irradiation or burn-up of uranium fuel rendering it more radiotoxic, and the impact of MOX (plutonium) fuelling, all in account of the lessons learnt from Chernobyl.</p> <p>The modelling and analysis will draw upon the outcome of highly confidential terrorist attack exercises carried out on nuclear plants in the United States, it will assume the same capabilities of the terrorist to penetrate the security at Hinkley Point, seek out the vulnerabilities of the nuclear plant, and to contrive effective means by which a radioactive release will take place; and for the radioactive dispersion and consequences the European standard COSYMA software has been deployed, together with NOAA satellite data to provide real time imaging of the dispersion and radioactive fall-out in the aftermath of the release.</p> <p>The analysis and projections for Hinkley Point will be expressed in terms of the risk of any one individual sustaining health harm in the aftermath of a radioactive release and, related to the increased health risk from the larger EPR plant operating with a greater extent of irradiation (burn-up) and/or with a plutonium based fuel core, the need to extend both the range and</p>	88960-174-21341			/	<p>The probability of an accident requiring off-site countermeasures, and the scale of countermeasures required, are substantially lower for the UK EPR than for early reactor designs. Thus the scale of the emergency arrangements necessary for HPC is not expected to exceed that already in place. The emergency plan for HPC is not detailed within the Health Impact Assessment but would be developed in accord with the relevant condition of the Nuclear Site Licence.</p>

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			<p>resources allocated to the local authority off-site plan (under the Radiation (Emergency Preparedness and Public Information) Regulations 2000)</p> <p>LARGE & ASSOCIATES CONSULTING ENGINEERS, LONDON http://www.largeassociates.com</p> <p>http://www.largeassociates.com/Hinkley/Hinkley%20-%20October-final-summary.pdf</p> <p>Summary</p> <p>In view of the serious questions posed by this report and the presentation that came with it, we strongly contend that no reactors should be constructed at Hinkley. Should a decision be made to go ahead with the project, then we feel that emergency arrangements must be enhanced to allow better public protection. For example the current practice of pre-distributing potassium iodate tablets just within the 3.4 kilometre radius around Hinkley should be enhanced to take account of the fast pace that weather patterns can deliver radiation to locations much further away. As the Isle of Wight is about eighty miles from Hinkley we suggest the iodate tablets should be pre-distributed to all homes, schools, offices and factories within 100 miles.</p> <p>We are concerned generally that emergency measures would break down. At Three Mile Island ninety percent of medical staff left their posts after the accident.</p> <p>A police report to the Nuclear Industry Association at Oldbury power station in 2002 said that protective breathing gear had a life limit of just twenty minutes in a contaminated environment. Police officers would in any case be advised to voluntarily abandon their kit as it would panic the local population. We were also told that police officers had a smaller maximum dose in such circumstances than ambulance men and even council officers.</p>					
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	With regards to the Hinkley Point C construction site and the Hinkley Point onsite accommodation, the proposals do not identify the arrangements to be taken to protect Hinkley C staff and visitors in the event of an "off-site nuclear emergency" being declared at either Hinkley Point A or Hinkley Point B.	89243-174-197		/		

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>9.2.7 Further work and clarity is need from EDF on how they plan to provide financial support and care for its workforce during an off-site nuclear emergency, both in the short and long term. (7.9)</p> <p>9.2.8 These issues should be addressed in a detailed and resourced health action plan. (8.1)</p>	89463-174-6515		/		
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	The plan does address how safe working practices will be ensured. The Council needs to be reassured that local communities will be adequately protected from health and safety related incidents, and that there will be no additional burden placed upon local public services.	89863-174-2903		/		

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisals of radiological exposure and EMF exposure have not reviewed in detail, as these sections will be subject to a specialist technical review. The general comments above are applicable to these sections.	89414-175-7407			/	A statutory consultee at Stage 2 sought a clear assessment of the extent of compliance with guidance by the International Commission on Non-Ionizing Radiation Protection (ICNIRP), HPA advice and Government policy. Following the Stage 2 consultation process the Health Impact Assessment (HIA) has been supplemented with a full EMF assessment of the electricity transmission infrastructure linking Hinkley Point C to the national grid. This has been provided as an appendix to the HIA and has been reviewed by National Grid. The assessment has adopted the ICNIRP guidelines, in accord with the terms of the 1999 EC recommendation.
Health Protection Agency	Statutory Consultee	Stage 2	The HPA considers that the onus is on the applicant to conduct the assessment of compliance with the above advice and policy, and to gather and present the information clearly, leaving no additional analysis necessary on the part of the HPA. The assessment should be clearly laid out, either as an identified section of a report which can be read in isolation or as a separate report. Compliance with the ICNIRP guidelines should be highlighted. If it is considered not practicable for compliance to be achieved at all locations accessible to the public, the report should provide a clear justification for this. The report should include an appropriate risk assessment showing that consideration has been given to mitigation measures for acute risks. In relation to possible long-term health effects and precaution, the report should include a summary of compliance with HPA advice and Government policy.	89166-152-10556	/			

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Sedgemoor District Council & West Somerset Council Joint Council Response	Dual - Local Authority and Consultee with an Interest in Land (Sedgemoor only)	Stage 1	Consideration of non-radioactive and radioactive waste needs to be addressed and the long term impact on human health and the environment as a result of such proposals. The future studies setting out this evaluation should be included within this section.	88130-173-704	/			<p>Statutory and non-statutory consultees recognised this as an area of high potential public concern, with one statutory consultee warning against language that over-stated the significance of radiation doses lower than natural background. A large number of responses questioned the use of the International Commission on Radiation Protection (ICRP) model to assess the risk from radiation exposure, with some seeking further information and ongoing surveillance of discharges and health impacts around any HPC. A number cited in particular the German KiKK study on childhood leukaemia incidence around nuclear facilities.</p> <p>The risk factors used by the ICRP form the basis for those used by the UN, EC and international regulatory bodies. The review from the Committee Examining Radiation Risks of Internal Emitters (CERRIE) investigated a number of biological mechanisms including genomic instability. As stated in Chapter 21, Volume 2 of the Environment Statement (ES) there was disagreement as to whether the available data was sufficient to draw firm conclusions on the implications for radiation-induced health effects.</p> <p>The review of risk from radiation has been based on a number of independent scientific reports from the Committee on Medical Aspects of Radiation in the Environment (COMARE), the Health Protection Agency (HPA) and the South West Public Health Observatory.</p> <p>COMARE is an independent expert advisory committee which offers advice to government departments and devolved authorities on the health effects from natural and man-made radiation. Following the stage 2 consultation process COMARE has published its 14th report which reviews international studies including the KIKK study. The KiKK study investigated the risk of childhood leukaemia for children living in close proximity to nuclear power plants based on German data. The paper from COMARE conducted a systematic review of the evidence base on this issue both from international studies, including KiKK, and from evidence from Great Britain. Its conclusions were in keeping with previous reports by COMARE, which found that “there is no evidence to support the view that there is an increased risk of childhood leukaemia and other cancers in the vicinity of Nuclear Power</p>
Stop Hinkley	Non-Statutory Consultee	Stage 1	Health risks to local people The following commentary by (Personal details removed) from the Low Level Radiation campaign puts clearly the case that there is a serious flaw at the heart of the advice on the health effects of radiation.	88940-173-703		/		
Stop Hinkley	Non-Statutory Consultee	Stage 1	Having our own doubts about the ICRP model, discussed above, Stop Hinkley decided in 1999 to commission a local cancer mortality study. The Office of National Statistics were able to provide figures of cancer deaths for all the Somerset wards and we asked (Personal details removed) to examine the figures and see if they correlated with radioactive discharges from Hinkley Point.	88950-173-472		/		
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>The health officials at South West Public Health Observatory argued that children were safe near the power station but in later 'replicating' the Green Audit study they added one electoral ward and removed another from the study population. We believe this 'tampering' affected their results.</p> <p>In the same year a very large childhood cancer study was undertaken in Germany:</p> <p>"Leukaemia in young children living in the vicinity of German nuclear plants", Kaatsch, 2008 International Journal of Cancer (KiKK report). A very large German Government study showed more than doubling of leukaemia in children living within 5 kilometres of nuclear power stations with an effect as far away as 50 kms. Created a public outcry and many pregnant women moved away from nuclear plants.</p> <p>The above studies seem to confirm what a lot of local people suspect: that living near Hinkley Point, especially in coastal and estuary areas downwind of the plant carries a health risk. We have had reports that patients in oncology departments in Bristol have discovered that others in the waiting room came from Burnham or nearby, against all statistical expectations.</p> <p>It should be pointed out that the 1988 Somerset Area Health Authority report above, which was never challenged, only covered upwind areas of West Somerset and Bridgwater. Their catchment area did not include Burnham-on-Sea which was part of the Weston-super-Mare catchment at the time. Had the study covered the downwind towns, we suspect the figures would have been even more disturbing.</p>	88950-173-7255		/		

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Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>The difficulty with the conventional approach to radiation risk is that the model does not allow sufficiently for internalised radioactive particles. The International Commission on Radiological Protection who advise on this, base their predictions on Hiroshima survivors but a single blast of radiation should be treated differently from long term exposure to inhaled particles. So experts predict low, statistically insignificant health effects. When these turn out to be higher than expected in epidemiological studies, they wrongly say it cannot be connected to the radiation. This is an unscientific approach, based on expected outcomes not on real outcomes.</p> <p>The Committee Examining Risks from Internal Emitters (CERRIE, 2004) reported that radioactive 'dose' is now irrelevant, so radioactive discharges in millisieverts will not accurately predict whether individuals will be harmed. They also recommended that regulators should recognise that children are particularly vulnerable.</p>	88950-173-8813		/		<p>Plants in Great Britain".</p> <p>In addition COMARE has reviewed studies conducted by the Green Audit regarding cancer incidence in Burnham. COMARE noted that the methodology used is so flawed that it cannot provide any reliable information or conclusions and as such the report should be withdrawn.</p> <p>Against this background, the Health Impact Assessment considers the relationship between dose and health effect and considers both gaseous emissions and marine discharges over two pathways of exposure (ingestion and inhalation) for two critical groups, farming families and fishing families – chosen to represent the most exposed groups. The Radiological Assessment within the ES (Volume 2, Chapter 21) includes an assessment of cumulative risk from Hinkley A, B and C. The cumulative dose is shown to be below the relevant limits and constraints for all age groups. Likewise, Volume 2, Chapter 7 of the ES provides an assessment of radiation exposure from the transportation and storage of nuclear waste.</p> <p>The significance criteria used in the HIA for radiation are based on the UK dose limits derived from European and International regulations. The context for the use of these dose limits has been provided within the supporting text of the HIA.</p>
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>We submit that two very large nuclear reactors pouring radioactive articles into the Bristol Channel will result in continued excesses of cancers in the area. We support Sedgemoor District Council's request for EdF to conduct a Health Assessment of the vicinity. We would be very prepared to assist with the design of such a study, for example basing it on data on a post-code basis which would furnish more information than much broader electoral ward data.</p> <p>Nonetheless we believe there is sufficient information to reverse the proposals to construct two or even one nuclear power stations at Hinkley.</p>	88950-173-9808		/		
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>The analysis and projections for Hinkley Point will be expressed in terms of the risk of any one individual sustaining health harm in the aftermath of a radioactive release and, related to the increased health risk from the larger EPR plant operating with a greater extent of irradiation (burn-up) and/or with a plutonium based fuel core, the need to extend both the range and resources allocated to the local authority off-site plan (under the Radiation (Emergency Preparedness and Public Information) Regulations 2000)</p>	88960-173-22468		/		
Tractivity 874	Public	Stage 2	<p>There is an increased incidence of cancer in this area. The statement the authorities have found no link between nuclear and cancer is inadequate. Until conclusively proven otherwise, that link mst remain a possibility. I feel more research and information should be provided.</p>	9632-173-8481		/		
Tractivity 1228	Public	Stage 2 Update	<p>Q3 Do you have any comments on our proposed community mitigation and benefits?</p> <p>How are you going to mitigate the inevitable deaths which would result from building the EPR reactors? How are you going to compensate parents whose children die from leukaemia? How are you going to compensate families where the father dies from prostate cancer, a stroke or a heart attack, leaving them penniless? You need to understand the appalling health damage done to Somerset communities by the existing nuclear discharges into the atmosphere and their effects on every part of the human body as they cross the lungs into the lymph system and then cause a wide variety of fatal illnesses. There is a huge amount of evidence of this in the UK, Europe and the US</p>	89494-173-0		/		

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Tractivity 1228	Public	Stage 2 Update	These reactors are intrinsically unsafe as they are designed to release poisonous gases from the reactor cores every 18 months.	89494-173-1266		/		
Tractivity 1342	Public	Stage 2 Update	Dear Sir/Madam, I live in Glastonbury and we get the prevailing South West winds! No one here wants another Nuclear power plant. In 2000 a friend of mine rang me in great panic and told me her Geiger counter was screaming beyond limits. She brought it down to me and demonstrated the fact.. She had had it recently balanced! There are 10,000 people who live downwind of your power station and I don?t know anyone who wants another one near them. Why can?t the energy industry use wave and wind energy? They only seem to ignore the people who don?t want nuclear power. We are at a time when working in harmony with the earth is what is required not blatantly flying in the face of that requirement for greed!! And by the way this is the first time I?ve heard about this new plant!	89608-173-118		/		
Tractivity 547	Public	Stage 1	12. Do you have any other comments about EDF Energy's initial proposals for the development of a new nuclear power station at Hinkley Point? Concerns about health risks. Risk of leaks, accidents and terrorism. What happens to nuclear was	9216-173-4731	/			
Tractivity 50899	Public	Stage 1	1. I am concerned about health risks from radioactive emissions. Local health studies show excess breast cancer mortality (90% over 4 years,Green Audit 2000) in Burnham North; excess breast cancer incidence (30% over 10 years 1990-99, SW Cancer Intelligence Service and 20% over 13 years Green Audit 2002) and three-fold higher infant deaths along the downwind coast from Hinkley(Green Audit 2007). Last year a German Government study found a doubling of childhood leukemia within 5 kilometres of all 15 nuclear power station sites (KiKK 2008).	9396-173-126	/			
Tractivity 62128	Public	Stage 1	(h) no plans are in being to assess the eventual health risks to the local population in terms of future radioactive discharges and their health consequences (e.g. breast cancer and/or leukaemia analysis);	9415-173-4266	/			

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Tractivity 62172	Public	Stage 1	<p>It is the radionuclide that causes the harm. However, generally speaking (33) radionuclides do not 'travel solo' but exist in combination with other chemical elements to form chemical compounds.</p> <p>The behaviour of these chemical compounds depends on:</p> <ul style="list-style-type: none"> - the chemical elements included - how they are joined together - the temperature - the amount of electrically charged ('ionic') particles near-by - whether the surroundings are watery or oily - or solid or gas - whether the surroundings are simple or complicated (ie. is the compound just one amongst a 'smorgasbord' of others - or is the chemical system quite simple) - the surrounding pressure <p>These chemical effects can result in extraordinary degrees of variation in predicted radionuclide behaviour.</p>	89481-173-1282			/	
Tractivity 62172	Public	Stage 1	<p>The 'Committee Examining Radiation Risks of Internal Emitters' (CERRIE) was an independent Committee established by the Government in 2001, following concerns about the dangers to health associated with radionuclides once they were inside the body.</p> <p>In October 2004, the Committee produced a final report and a Press Release.(34)</p> <p>In the Press Release(35), the Chairman of the Committee, Professor Dudley Goodhead (OBE)(36) said:</p> <p>"The main finding of the Committee's Report is that we have to be particularly careful in judging the risks of radioactive sources inside the body. The uncertainties in these internal radiation risks can be large"</p>	89481-173-2149			/	
Tractivity 62172	Public	Stage 1	<p>The aim of this report is to provide an updated, comprehensive review of the data available for assessing the risk of radiation-induced cancer for radiation protection purposes. Particular emphasis is placed on assessing risks at low doses and low dose rates. The review brings together the results of epidemiological investigations and fundamental studies on the molecular and cellular mechanisms involved in radiation damage. Additionally, this information is supplemented by studies with experimental animals which provide further guidance on the form of the dose-response relationship for cancer induction, as well as on the effect of dose rate on the tumour yield. The emphasis of the report is on cancer induction resulting from exposure to radiations with a low linear energy transfer (LET). The work was performed under contract for the Institut de Protection et de Surete Nucleaire, Fontenay-aux-Roses, Paris, France, whose agreement to publish is gratefully acknowledged. It extends the advice on radiation risks given in Documents of the NRPB, 4, No. 4 (1993).</p>	89482-173-6085			/	

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Tractivity 62172	Public	Stage 1	<p>Two classes of tumour-associated genes have been identified. Proto-oncogenes are subject to gain-of-function mutations which result in overexpression or more subtle functional changes in respect of the synthesis in cells of a range of proteins essential for cellular growth and development. The changes in DNA which bring this about range from single DNA base-pair changes to more complex chromosomal damage. Tumour suppressor genes act as negative regulators of cellular processes that mediate cell division and development. It is loss, rather than gain, of function of these genes that contributes to the development of neoplasia. This loss of function may result from single DNA base changes, deletions of small regions of DNA, or the loss of whole chromosome segments. The first phase of radiation tumorigenesis in vivo can be viewed as the induction of a broad range of gene damage in the cell population in a tissue. If damage to a specific subset of proto-oncogenes and/or tumour suppressor genes is not repaired correctly, this can generate gene mutations which create the potential for neoplastic development. Such mutation will not be unique to radiation damage, but will simply add to the 'pool' of mutations in target cells, arising either spontaneously or as a consequence of other environmental agents.</p> <p>Although in principle, radiation-induced mutation may influence all stages of the neoplastic process, it is argued that neoplastic initiation is the key stage that is primarily targeted by low doses of radiation. It is also argued, on the basis of evidence from biochemical, cytogenetic and molecular studies on both haemopoietic and solid tumours, that, with very few exceptions, tumours arise from single cells and, by implication, develop from a gene-specific mutation in a single cell in the originating tissue. The growth of a sub-population of cells from this original mutated cell by division then provides preferential targets for full neoplastic change. On this basis, a single mutational event in a critical gene in a single target cell in vivo can create the potential for neoplastic development. Thus, a single radiation track (the lowest dose and dose rate possible) traversing the nucleus of an appropriate target cell has a finite probability, albeit very low, of generating the specific damage to DNA that results in a tumour initiating mutation. Following this, and again at a low probability, these initiated cells can develop by multistage processes into an overt malignancy. As a consequence, at the level of DNA damage there is no basis for the assumption that there is likely to be a dose threshold below which the risk of tumour induction would be zero. For radiation protection purposes, it is appropriate therefore to assume a progressive increase in risk with increasing dose, with no threshold.</p> <p>There is some evidence that low dose radiation may induce, or activate, cellular DNA repair functions, the so-called adaptive response. The majority of effects seen to date have been essentially short-term and the current consensus is that knowledge of their relevance to neoplastic processes is insufficiently developed and understood to influence current judgements on tumorigenic responses at low doses and low dose rates.</p>	89482-173-18809			/	

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Tractivity 62172	Public	Stage 1	<p>Conclusions</p> <p>It is concluded, therefore, that data relating to the role of gene mutations in tumorigenesis, the monoclonal origin of tumours, and the relationship between DNA damage repair, gene/chromosomal mutation and neoplasia are well established and broadly consistent with the thesis that, *at low doses and dose rates, the risk of(58) induced neoplasia rises as a simple function of dose and does not have a DNA damage or DNA repair related threshold*-like component. Whilst adaptive responses or other protective mechanisms may influence the risk of tumour development, they do not provide a sound basis for judgement that tumorigenic response at low doses and low dose rates of radiation is likely to have a non-linear component which might result in a dose threshold below which the risk may approach zero. These mechanistic studies, in addition to the epidemiological information, indicate that for radiation protection purposes there is little basis for arguing that low radiation doses (about 10 mGy) would have no associated cancer risk and that, in the present state of knowledge, it is appropriate to assume an increasing risk with increasing dose.</p>	89482-173-23376			/	
Tractivity 62206	Public	Stage 1	<p>I object to proposals for the largest UK nuclear power station due to my concerns over:</p> <p>1) Health risks from radioactive emissions</p>	9428-173-37			/	
Tractivity 62239	Public	Stage 1	<p>I object to proposals for the largest UK nuclear power station due to my concerns over:</p> <p>- Health risks from radioactive emissions</p>	9438-173-34		/		
Tractivity 62240	Public	Stage 1	<p>object to proposals for the largest UK nuclear power station due to my concerns over:</p> <p>- Health risks from radioactive emissions</p>	9439-173-34		/		
Tractivity 62352	Dual - Consultee with an Interest in Land and Public	Stage 2	<p>I am opposed to the construction of further nuclear power stations because of the unacceptable associated risks. There is an established link between the high incidence of breast cancer in communities that are in close proximity to nuclear power stations and there is also the inherent danger linked with the waste products and the continuing dilemma as to what to do with them. This said, I do believe that, where the nuclear industry is concerned, the French are more competent in this field and I am impressed by the candid replies you have given when interviewed on the subject by personal details removed of CH4 News.</p>	10029-173-4097		/		

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62504	Public	Stage 2	One of the main concerns about nuclear power, is the containment of the products of nuclear reactions inside the core structure. This is important, because, despite their invisibility, radioactive nuclear particles (radiation) are extremely toxic and carcinogenic to virtually all life forms on which human existence depends and are easily absorbed and spread throughout agricultural and natural ecological systems. The provision within the proposals to allow routine discharges of radioactive nuclear material to air and water is extremely dangerous and irresponsible. Furthermore, neither Ed F or the regulatory authorities can quantify or identify the ratio of differing radioactive emissions to be released; an exercise where the competency in pollution control is absolved to such a degree, that it beggars belief. Recent studies in Germany, where increased incidence of cancers within the locality of nuclear installations has been identified, foretell of a similar affliction that would have serious implications for the health of local people and the organisations that serve them. The Ed F Health Assessment does not touch on the central tenet of radiological effects, that the ICRP model has been extensively challenged, e.g. by the ECRR, the European Committee on Radiation Risk, http://www.euradcom.org/	10097-173-3070		/		
Tractivity 62938	Public	Stage 2	Nuclear power creates environmental poisons (deadly radiation)	10177-173-8494			/	
Tractivity 62938	Public	Stage 2	The incidences of childhood leukaemia and breast cancer in the area are above average.	10177-173-8854			/	
Tractivity 62469	Public	Stage 2	a) More people will die and fall ill from radiation exposure. The detrimental health impacts are serious already from routine emissions, unauthorised emissions and decommissioning of the existing nuclear installations. It is madness to build new nuclear power stations right next to the old ones. The compounded cumulative impact can only intensify the negative effect. More detail needs to be provided in this area to reassure myself and the rest of the general public.	89469-173-5274	/			
Tractivity 62469	Public	Stage 2	Wherever you look, you come across the same tired reliance on the archaic, discredited ICRP model to assess risk based on dose, which is inapplicable to the internal biological responses to novel anthropogenic radioactive substances. There is nothing in your own proposals that indicate you have kept up with the times. You demonstrate a dinosaur mentality in your documents that scares, not reassures me that you really understand the concept of protecting the public's health and the role you, yourselves, play in that.	89471-173-8518			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62469	Public	Stage 2	No further nuclear build should be considered until up-to-date proper epidemiological studies are conducted and over an area that includes Bridgwater, not just focused on Burnham, encompassing the whole range of radiologically-induced diseases including non-fatal ones as well as cancers. Everyone should also be screened for internal contamination by inhalation and ingestion of the emissions from Hinkley. Medicine and technology has moved on that facilitates this. You should fund these studies. You have a moral duty to protect our health.	89472-173-1466		/		
Tractivity 62469	Public	Stage 2	My health will be increasingly compromised.	89472-173-7944			/	
Tractivity 62486	Public	Stage 2	- the recent evidence that babies and children who live near to nuclear power stations more than double their risk of leukaemia.	89473-173-4413			/	
Tractivity 62486	Public	Stage 2	<p>A recent German epidemiological study (the so-called KiKK Study(26) has shown that if families live near to a nuclear power station, their children are more likely to get cancer.(27) This study indicates that operational release of radionuclides from reactors may be harmful to children.</p> <p>The EdF 'Stage Two' Health Impact Assessment (28) indicates [para A.C3.13 - A.C3.14 - page 148] that the findings of the German study prompted a similar investigation in the UK. EdF report that although this study found an increase in leukaemias near nuclear reactors, this increase may possibly be due to chance. Another explanation could be that the increase is due to the larger amount of radioactivity that children would take into their bodies if they lived near to a reactor. Radionuclides are known to be carcinogens. (29) (Personal details removed), for example, has proposed a mechanism based on the contamination of the baby in the womb. (30)</p> <p>The COMARE (31) report(32) cited by EdF was published in 2008. However, in November 2009 the Department of Health asked COMARE to look in more detail at the KiKK study. (33)</p> <p>COMARE's findings have not yet been published.</p> <p>(Personal details removed), who oversaw the KiKK study, stated (also in November 2009) that his advice to COMARE would be:</p> <p>"There is evidence of an increase in childhood leukaemias, the issue has been the subject of much research and another ten years are required to establish the cause(s) at the cost of a million euros. " (34)</p> <p>In January 2010, (Personal details removed), a long standing radiation expert (35), submitted evidence to the House of Commons Energy and Climate Change Committee. (36) He stated that:</p> <p>"It is clearly important that we get to grips with the KiKK evidence before decisions are made on building more nuclear power stations... radiation exposures are clearly implicated... Whatever the explanation(s), the recent epidemiological evidence provides strong evidence that living near nuclear reactors carries grave health risks for babies and children—more than doubling their risk of leukaemia."</p>	89476-173-21			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62486	Public	Stage 2	The recent evidence clearly shows that babies and children who live near to nuclear power stations more than double their risk of leukaemia.	89476-173-2097			/	
Tractivity 62486	Public	Stage 2	(b) Family and Friends near to Hinkley Although I live in London, I have family in Somerset, and a number of close friends who live close to Hinkley. In line with the findings of the German 'KiKK' study (see below), the Health Protection Agency have reported a correlation between families living near to nuclear reactors and their children contracting cancer. (48) One of the most important motivators for me to draft this submission is my concern over the future safety of my family and friends.	89478-173-1742			/	
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	Issue: We have reviewed section 5.2 of the HIA, "Potential Health Risks from Radiological Exposure" and consider it to be generally acceptable.	89078-173-7459			/	
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	Issue: The significance categories for radiological impact are not helpful or proportionate to impact (as noted above).	89078-173-8902		/		
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	Comment: We consider it is not helpful to describe doses of 150 to 500 microSv pa are of moderate significance or that doses of 500 to 1000 microSv pa are of major significance in table 5.1. Doses of 0.5 to 1 mSv/y might have "major" significance in term of UK public dose limits, but in a Health Impact Assessment this might be misinterpreted a dose which giving rise to major adverse impacts. The discussion in the text after this table in terms of risk seem to be much more helpful. Action: review the significance levels for radiological impacts and the levels at which they have been set.	89078-173-9025		/		
Stop Hinkley	Non-Statutory Consultee	Stage 2	The health issue will not go away just because EdF wants it to, and eventually radioactive particles will be considered the 'new asbestos' and generally agreed to be too dangerous to expose to public communities.	89450-173-4461			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	We would expect the assessment to cover the safe management of potential emissions to air and water and safe storage of waste and that best available techniques would be used to ensure the risk posed to the public was negligible.	89459-173-1960	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	1.6 Finally, we would reiterate the potential for public concerns over negative health impacts associated with the operational phase. Previous experience demonstrates that concerns will be raised over safety and potential impacts linked to cancer rates and possibly other health conditions where a plausible link will be argued between the use of nuclear power and illness in the local community.	89459-173-3142			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Potential Health Risk From Radiological Exposure 4.2 This section provides a clear overview of the potential harms from radiological exposure. Evidence is presented that the doses to individuals with well within International determined guideline levels. We would seek reassurance from the Environment Agency and the national Radiologic Protection Board arm of the HPA that these estimates are realistic and achievable with appropriate margins of safety; it is outwith the NHS Somerset area of expertise to comment further on these assessments.	89460-173-557			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.24 The HIA provides a section on risk comparing likelihood of adverse health outcomes from radiological exposure with other non radiological adverse events. Whilst recognising difficulty of accurately determining risk of rare events it is a useful section to put the risks of nuclear power in a broader context. It is likely, however, that members of the public will continue to be concerned over health risks associated with a nuclear power installation. NHS Somerset and associated Public Health bodies takes this issue very seriously and will need to ensure that they have the capacity to monitor the health impact of the development and respond to concerns raised by the public in a comprehensive and authoritative fashion. EDF should address the resources required maintain an independent surveillance role through NHS structures and make adequate allowance within the any mitigation agreement.	89460-173-14085	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Authorities position December 2009: Consideration of non-radioactive and radioactive waste and the long term impact on human health Update September 2010: A Health Impact Appraisal has been prepared	89326-173-4801			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisals of radiological exposure and EMF exposure have not reviewed in detail, as these sections will be subject to a specialist technical review. The general comments above are applicable to these sections.	89414-173-7407			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The summary of operational effects appears to conclude that there will be no adverse effects following the completion of the construction phase, on the grounds that radiological emissions and air emissions will not pose a significant risk to health.	89415-173-5976			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Fears and concerns associated with health impacts and perceived risks of accidents or emergency incidents associated with nuclear facilities and nuclear waste storage and how this could impact on business decisions and property transactions within the wider area.	89418-173-2423			/	
Tractivity 63013	Public	Stage 2 Update	Anything with the potential of being a health hazard should not be considered at any cost!	89697-173-2905			/	
Tractivity 63014	Public	Stage 2 Update	I have lived on the east coast, not far from Bradwell Power Station, currently being dismantled and whilst there did a survey - we were 2 miles by water from Bradwell. A high proportion of fishermen died from cancer. A middle aged couple living in what seemed an idyllic setting in the Blackwater estuary but nearest to Bradwell both died of cancer within a year of each other & for the size of the village I lived in, there was a higher than normal incidence of children with leukemia.	89698-173-138			/	
Tractivity 63014	Public	Stage 2 Update	Animals feel more subtly than do human beings - this is a fact & when I lived on the east coast fisherman caught shrimps from the Blackwater estuary. My two cats loved frozen prawns from the purer Norwegian & Icelandic waters but refused Blackwater shrimps. This said it all for me.	89698-173-1275			/	
Tractivity 63146	Public	M5 J24 and Bridgwater Highway Improvements	In general I consider that the already burdensome quantities of radioactive waste will be added to, thereby causing a problem of some magnitude. In the interim, exposure of people, especially children, to low level doses of radiation has not yet been proven to be safe, even when the processes involved are well regulated and a number of leakages have been documented, one at least being discovered entirely fortuitously, by a laundryman, demonstrating that some are not well regulated.	90075-173-193			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 799	Public	Stage 2	5. Any other ideas or comments? Move the freight logistics facilities and park and rides to the hinkley point C site, which should be expanded to the west to allow for these. We as residents do not trust your company should you build them because you may move nuclear waste to these sites past our homes and store it there, which will effect our health. Also we were here first and don't want our house prices dropped. If you do go ahead will you pay compensation? Also the capacity of taunton road IS NOT sufficient for another 120 lorries every 24 hours, We live there and we know our area the best, it is already congested.	9557-172-3292		/		A statutory consultee at Stage 2 identified the risk of increased road accidents, but noted that the assessment methodology had used worst case assumptions and sought evidence on the actual level of risk and mitigation. Other consultees were concerned at the potential health impact of the transport of radioactive waste. The Health Impact Assessment considers the additional risk of road accident and injury associated with Hinkley Point C. The Road Safety Study determines the impact on road safety for each route used by construction traffic through comparing the average accident rate in 2009 with the predicted accident rate in 2016. The study highlights that most of the accidents on the key routes to the site occur at junctions. Therefore the road safety measures and highway improvements target these areas.
Tractivity 799	Public	Stage 2	11. Any other ideas or comments? The site poses health risks to the local residents because we don't trust you not to move nuclear waste in the area. also the park and ride is not required if all accommodation is on site. The roads in the area are already congested enough, especially in the summer and wet and cold winter days. If you have to build the facilities, build them the other side of the motorway.	9557-172-8040		/		Further information on highway improvements, travel plans and the freight management plan is available through the Transport Assessment in Chapter 10, Volume 2 of the Environmental Statement.
Tractivity 969	Dual - Consultee with an Interest in Land and Public	Stage 2	13. Please let us have your overall views on our proposals and any other general comments in the box below I moved here from Birmingham for the beautiful countryside and views. I do not want to live by all this heavy construction traffic and pollution. My daughter is at nursery age - traffic too close to a new school on development.	9727-172-6057			/	In accord with Government policy, the proposals for HPC include provision for storage of the lifetime arisings of spent fuel and all but low level radioactive waste within the HPC site, pending availability of a national Geological Disposal Facility.
Health Protection Agency	Statutory Consultee	Stage 2	It may be worth including consideration of the potential transport of contaminated material off the work site and what would happen if receptors come into contact with any contaminated material off-site. To do this you should determine the exact chemical composition and concentration of pollutants at the HPC site and then conduct a toxicological risk assessment.	89166-172-15878		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	we consider that while the scheme may satisfy the objective in terms of largely avoiding direct impacts on physical health, there will remain a risk of increased accidents.	89412-172-10724		/		

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The assessment of the impacts of construction traffic on accident rates (5.5.9 and 5.5.10) is unclear. The assessment uses 'worst-case' assumptions to predict that the proposed development may contribute to seven accidents per year, 0.8 of which may be serious and 0.08 fatal. It then goes on to conclude that there will be no significant impacts on the basis of mitigation measures that are not described, and the fact that the methodology 'inherently over-estimates' the potential risks. Further information should be provided on the likely level of risk and how this will be mitigated.	89414-172-8380	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	The community profile does not attempt to identify specific characteristics of the neighbouring areas that may increase vulnerability to potential health impacts from the development. This is a missed opportunity.	89459-158-5780			/	Statutory and non-statutory consultee responses at Stage 2 sought a greater focus on the most affected communities (with greater clarity on where these are located), health inequalities, and differential impacts on vulnerable groups.
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	More detail on health inequalities should be included within the HIA for the communities affected by the development. (2.2).	89463-158-5088	/			The community profile establishes existing circumstance utilising data at the national, regional, county and district level, providing a baseline for the Health Impact Assessment (HIA). Following the Stage 2 consultation exercise the community profile has been refined providing a local level overview covering the Hinkley Point C Project. To add additional clarity, a map highlighting the location of the associated developments has been added to the HIA.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The Community Profile is considered to be comprehensive in terms of the range of health and socio-economic indicators presented. However a number of issues are identified in relation to the presentation and use of the information provided in this section:</p> <ul style="list-style-type: none"> - The Community Profile covers a wide area of West Somerset, Sedgemoor and Taunton Dean, with the level of detail dictated by data availability. Whilst it is acknowledged that not all data is available at the local level, the appraisal would benefit from a more focussed evaluation of the characteristics of those communities that are most affected (e.g. the local villages and Bridgwater) where possible. - Maps included within the Health Impact Assessment do not identify the location of off- site works. As such it is not possible to ascertain the characteristics of the communities affected by these works. - It is not clear whether the information contained in the Community Profile has been used to inform the appraisal. The methodology (para 1.5.5) makes a general statement that 'a community profile not only forms the basis to exposure response modelling but also allows an insight as to how potential health pathways may act disproportionately upon certain communities.' However the appraisal (Section 5) makes little or no reference to the characteristics of the affected communities and how these characteristics affect the way communities will experience health effects. Paragraph 3.8.5 states that 'the HIA will consider the highest burdens of poor health to ensure a conservative approach and the assessment of a worst case scenario'; again this approach is not evident within the appraisal sections. 	89414-158-421	/			<p>Due to a small population size, data below the ward level is limited, but it is included where available. The community profile contains data from the index of multiple deprivation which ranks lower super output areas (sub ward), identifying local level circumstance and need.</p> <p>The information collated through the community profile has fed in to the assessment section of Chapter 5 of the HIA, particularly the sections reviewing community well-being and the socio-economic health benefits of employment. This leads in to the mitigation measures outlined in the Health Action Plan, designed to address the more intangible aspects of health and well-being. Furthermore to maintain brevity the HAP provides a summary of the mitigation measures in the Environmental Statement, which also address local circumstance.</p>
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- It is not clear how the community profile has been used to inform the assessment. This information should be used to analyse the potential for differential impacts on vulnerable communities and sub-groups.	89414-158-4784			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
South West Strategic Health Authority	Statutory Consultee	Stage 1	Somerset Primary Care Trust is the local NHS organisation leading on this consultation in line with their responsibilities for the health and wellbeing of the local population. We support their participation in this exercise and their formal consultation response.	8711-160-304			/	Statutory and non-statutory consultee responses at Stage 2 included a range of recommendations on the most appropriate organisation to be consulted on specific issues, and on appropriate liaison groups to be supported. The organisations spanned both local and health authorities, trusts and practice federations.
Tractivity 1362	Public	Stage 2 Update	Your healthcare plans for the workforce do not appear to be finalised or available for comments which is of great concern at this stage in the planning.	89628-160-82			/	EDF Energy conducted an ongoing program of consultation for the Health Impact Assessment (HIA) with both key stakeholders and the public. The HIA has three key tiers of consultation. The first tier reviewed the outputs from both the Stage 1 consultation process and previous community forums. This feedback provided an initial basis to determine and develop the health pathways considered through the HIA. The scoping exercise also included telephone interviews with key stakeholders to gain additional input for the scoping report. The HIA presents a summary of this feedback which subsequently informed, but did not solely define, the health pathways identified within the project profile.
Tractivity 62301	Dual - Consultee with an Interest in Land and Public	Stage 2	(Personal details removed) BBC Radio 4 17.6.10 "My company is all about openness and transparency" You will have received a copy of the letter sent to (Personal details removed) describing the effect of EdF's proposals on the mental health of the residents of the Stogursey hamlets. EdF has itself indeed already tacitly acknowledged the impact of the development on these communities by inviting them, and them only, to meetings to discuss the Preliminary Works. Fifty to a hundred households are going to be taking the strain of the most enormous industrial enterprise this region of the country has ever experienced and yet there has been no further acknowledgment of this from the company beyond your observations, relayed through (Personal details removed). that "Minimising the impacts .. on communities potentially affected is an essential part of our Preferred Proposals. Our preferred proposals have been shaped by .. comments received from residents." I like the use of the word "potentially" and the elastic reference to "residents"	9991-160-115	/			Tier two of consultation encompassed feedback from the Stage 2 consultation process, while tier three formed a discrete stage of consultation to determine health and well-being concerns held by the residents of the four local hamlets surrounding the site. The HIA has been further informed through attendance at public exhibitions and ongoing engagement and iterative input from key health stakeholders.
South West Strategic Health Authority	Statutory Consultee	Stage 2	- I would like to thank you for the preparation of the Health Impact Assessment as a significant step in assisting and developing understanding of both the public health benefits and wider impacts from the proposed development. I commend the approach taken and the inclusion of local information from both NHS Somerset and the South West Public Health Observatory in the development of the Health Impact Assessment. - I would ask that this process continue as the Stage 2 Proposals are reviewed and to ensure the views of local public health practitioners and key stakeholders are included in the development of the final health impact assessment.	10182-160-560			/	Subsequent to the Stage 2 consultation, healthcare provision has further evolved following the appointment of the occupational healthcare provider. This is reflected in the HIA and Health Action Plan which outline the agreed service provision, further helping to identify residual healthcare requirements. Somerset Primary Care Trust has been consulted throughout the preparation of the HIA and involved with the determination of the healthcare planning contribution. Also following the Stage 2 consultation, the HIA has been updated to provide a summary of the comments received during each stage of consultation with a response provided to the issues raised. This provides a stronger base for demonstrating how the feedback received has influenced the assessment process.
South West Strategic Health Authority	Statutory Consultee	Stage 2	I would therefore ask that consideration be given to the inclusion of the management of communicable diseases as part of the development of a wider Health Action Plan and that EDF Energy continue to work with NHS Somerset to develop and help support a program of public health activity to help control any potential rise in communicable diseases.	10182-160-1641	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
South West Strategic Health Authority	Statutory Consultee	Stage 2	- In relation to the proposal to develop potential long-term storage of nuclear waste on site for up to 100 years, I would ask that due consideration be given to the response of the Health Protection Agency as the organisation best placed to comment on the potential long-term health impacts from storage of radiological material on site.	10182-160-2770			/	
South West Strategic Health Authority	Statutory Consultee	Stage 2	- Finally, I would ask that full consideration be given to the detailed submission to the Stage 2 Consultation prepared by NHS Somerset. As the local health organisation with responsibility for ensuring appropriate health care to meet the needs of the local population and with responsibility for protecting the wider public health and well being in Somerset, they are best placed to respond to the detailed considerations raised in the health impact assessment and wider stage 2 consultation planning documentation, including transport and wider social impacts of the proposed developments.	10182-160-3898	/			
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We note that EDF have consulted with NHS Somerset's Public Health Department on the workforce, housing, electro magnetic fields, road collisions, potential health risks from the facility (radiation leakage) and health promotion. All of which has little to do with the delivery of grass roots health care. EDF need to enter into wider discussions with NHS Somerset's Primary and Secondary Care Directorates and SW Ambulance Service NHS Trust, as to the additional service provision required to meet the potential increase in demand. EDF should also consult with WyvernHealth.Com about additional services which the NHS may need to commission in the area. There is no evidence of such consultation in the document.	10271-160-23290			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We recommend a more joined up approach be made by EDF and NHS Somerset in co-operation with other local health stakeholders, to create a new GP led Community Hospital and Health Centre offering a wide range of services, to replace the existing (WW1 vintage) hospital and provide adequate capacity for the construction workforce and for the local population for the duration of the operational life of Hinkley Point C and beyond.	10271-160-25824		/		

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62469	Public	Stage 2	The Somerset Health Authority has consistently evaded addressing local health concerns. Their lack of engagement and cooperation with interested parties demonstrates a culture of complacency. I do not feel at all protected or confident that they are up to the job. The Health Protection Agency has a dubious record. Wherever you look, you come across the same tired reliance on the archaic, discredited ICRP model to assess risk based on dose, which is inapplicable to the internal biological responses to novel anthropogenic radioactive substances. There is nothing in your own proposals that indicate you have kept up with the times. You demonstrate a dinosaur mentality in your documents that scares, not reassures me that you really understand the concept of protecting the public's health and the role you, yourselves, play in that.	89471-160-8202			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Before finalising the health action plan it would be advisable to engage further with communities to assess their views on the health impacts and to give due weight to the views of communities most affected when determining the required actions for mitigation of the affects.	89459-160-7227	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.1 The assessment chapter of the HIA provides an overview of the health impact of selected factors. It is noted that the structure of the chapter does not correspond directly with the health pathway components identified in the stakeholder engagement section. Specifically the following appear not to be addressed: - communicable disease risk - impact on green space and recreational facilities - loss of cycle routes and rights of way - possible social impacts of temporary workforce such as increase in unplanned pregnancy	89460-160-16			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.12 The provision of comprehensive onsite primary care services could be a significant mitigating factor in offsetting the impact on existing services as well as providing better access for the temporary workers. NHS Somerset would therefore recommend that in addition to nursing services a regular GP service should be provided that amounted to between two and three GPs. Discussions could be undertaken with NHS Somerset and the Bridgwater Federation of GP practices as to the provision of this service.	89461-160-5027			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.2 Before finalising the health action plan it would be advisable to engage further with communities to assess their views on the health impacts and to give due weight to the views of communities most affected when determining the required actions for mitigation of the affects. (3.1).	89463-160-5216	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.3 NHS Somerset and local NHS provider organisations look forward to working closely with the local authorities and EDF to develop and agree the detail of the final health action plan, related mitigation and community benefits.	89463-160-6812			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The health pathways listed in Table 2.2 do not fully reflect the health issues identified in stakeholder consultations as described in Section 4. Health pathways raised by stakeholders and not listed in Table 2.2 include: - Health promotion - impacts on / enhancement of green space; - Visual impacts - amenity value and use; and - Community severance, access and accessibility - loss of any pedestrian or cycle routes, impact on access to areas of green space, amenities, facilities and social networks.	89414-160-6040	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	It is observed that the assessment of health need, as discussed in the HIA, draws primarily on secondary published information. Meaningful engagement of local stakeholders with an interest in health and welfare in the affected areas would provide a more robust assessment of health need. In particular, engagement with relevant primary care trusts and acute health care trusts, should be demonstrated.	89415-160-3076	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The proposal to form a Construction Liaison Group with the local authorities (Section 7.3) is supported. The remit of this group should be expanded to address community issues such as disruption, severance, safety and health issues. The Community Liaison Officer (Section 7.4) should input directly to the Construction Liaison Group. The recommendation for further discussion of education and training programmes with the relevant authorities prior to the application for Development Consent is supported (7.5.5). Industry representatives and local training providers should also be included in these discussions.	89415-160-7947	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The Health Action Plan recommends that EDF Energy engage with the PCT to utilise monitoring data on the above indicators in order to demonstrate transparency and address community concerns relating to these health pathways.	89415-160-11455	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
South West Strategic Health Authority	statutory consultee	Stage 2 Update	Comments made during the initial stage 2 proposals substantively remain with the following additional observations	89707-160-642			/	
South West Strategic Health Authority	statutory consultee	Stage 2 Update	- I would like to confirm my support for the Health Task Finish Group where more detailed discussions continue to take place concerning the potential future public health consequences and ask that due consideration is given to the findings of that group in relation any potential additional public health impact arising from the implementation of these proposals;	89707-160-1635			/	
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	Stakeholder comment from Stage 1 specifically centred on the potential change in radiological exposure and subsequent risk to health. Although the comments received by the Council at Stage 2 did not focus to the same degree upon this and the scientific evidence does not support these concerns, the Council expects substantial ongoing engagement with concerned local stakeholders by EDF	89860-160-0	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	7.3.2 Health and Well Being Further assessment work and discussions with stakeholders, such as the Primary Care Trust (PCT) are needed to identify an appropriate figure to compensate and mitigate for the potential health impacts of the project. Discussions are continuing with EDFE and other relevant bodies to agree the figure that will ultimately be contained within the s.106 agreement associated with a Development Consent Order.	89890-160-5151	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Stop Hinkley	Non-Statutory Consultee	Stage 1	The following commentary by (Personal details removed) from the Low Level Radiation campaign puts clearly the case that there is a serious flaw at the heart of the advice on the health effects of radiation. The International Commission on Radiological Protection seems most at fault here.	88940-159-735			/	A number of public and NGO consultee responses criticised the ICRP methodology for assessing the health impact of radiation, and advocated or quoted references advocating reliance on the KiKK study or Green Audit reports, particularly when considering cancer induction in children following in utero exposure.
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>"Much of the evidence about health risk from radiation is post-Chernobyl, which ICRP entirely ignores in formulating its advice. A substantial book full of evidence suggesting that this oversight might be foolish is free to download at http://www.euradcom.org/publications/chernobylinformation...htm. See also http://www.llrc.org/health/subtopic/russianrefs.htm and a new book just published in the Annals of the New York Academy of Sciences (see http://www.nyas.org/Publications/Annals/Detail.aspx?cid=f3f3bd16-51ba-4d7b-a086-753f44b3bfc1). This latest one includes a review of studies of the deaths attributed to Chernobyl fallout in Europe; they total nearly 1 million up to 2005.</p> <p>The ICRP approach treats radiation as if it were homogeneous. That's like regarding all poisons as if they were of equal toxicity, weight for weight. "How much poison do you think would kill you?" asks the idiot. "Well it depends what poison you're talking about", says any half-way intelligent person. In terms of radiation exposure, the idiot question is "What dose is safe?", and the intelligent answer is "that depends; where is the radiation coming from? .. is it a source stuck on my DNA? ... is it stuck in my lymph nodes? is it delivering all its energy into a tiny bit of me and leaving all the rest unirradiated?"</p> <p>The nub of the issue is that there are some kinds of radiation exposure which it is valid to regard as uniform, homogeneous, well-averaged, evenly distributed in the body (however many synonyms one needs). Examples are x-rays and cosmic rays.</p> <p>But there are other kinds of exposure which are never evenly distributed, so that all their damage is concentrated into microscopic volumes of tissue. Hot particles are one example and there are many others. In these circumstances, the CERRIE committee advised in 2004, the very concept of dose may be meaningless at the cellular and molecular level.</p> <p>So there is a massive caveat that should be posted on any expression involving the word "dose". One of the main reasons the nuclear establishment sticks to using dose is for the administrative convenience of lumping all kinds of exposure together. Well that's just not scientifically valid.</p>	88940-159-1017			/	<p>Chapter 3 of the Health Impact Assessment (HIA) provides a profile of the local community including the prevalence of a range of conditions including cancer, cardiovascular and respiratory disease. This information is considered in the context of the available health evidence base which includes reports from local concern groups, the South-West Cancer Intelligence Service and ultimately the review provided by the Committee on Medical Aspects on Radiation in the Environment (COMARE).</p> <p>To maintain brevity the evidence base relating to radiological exposure, the areas of concern raised, and scientific responses provided over the previous 25 years is presented in the appendices of the HIA.</p> <p>The Green Audit surveyed residents in Burnham on sea to establish cancer incidence in the area. As requested by the Department of Health, COMARE considered the implications of the Green Audit study and found the methodology to be inherently flawed. Despite 100% of those surveyed having provided a response only 30% of the population were approached which may not be representative of the whole population. This conclusion has been reflected within the HIA.</p> <p>Furthermore in its 2011 report on the incidence of childhood leukaemia around nuclear power plants in Great Britain, which included consideration of the German KiKK study amongst a comprehensive range of other international and UK studies, COMARE concluded:</p> <p>"There is no evidence to support the view that there is an increased risk of childhood leukaemia and other</p>

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Stop Hinkley	Non-Statutory Consultee	Stage 1	"Leukaemia incidence in Somerset with particular reference to Hinkley Point" (Personal details removed), Somerset Health Authority 1983, '85, '88. The three reports studied leukaemia incidence in West Somerset, finding a 24 percent excess in those aged under 24 years over a seventeen year period, suggesting a link to Hinkley Point. There was a suggestion in the reports that accidental unrecorded discharges might have accounted for the higher numbers recorded.	88950-159-15			/	cancers in the vicinity of Nuclear Power Plants due to radiation effects." Chapter 5 of the Health Impact Assessment provides a brief introduction to the basic principles of radiation and health risks, the methodology applied and the radiological assessment conclusions. The UK dose limit for members of the public has been given as 1 mSv per year, and this is based on International and European regulations and guidance.
Stop Hinkley	Non-Statutory Consultee	Stage 1	"Breast cancer mortality and proximity to Hinkley Point nuclear power station 1995-98" (Personal details removed) Green Audit 2000. Found an 89 percent excess of breast cancer deaths on Burnham-on-Sea north over a four year period. Follow up studies later confirmed the excess.	88950-159-860			/	As Hinkley Point C is a prospective development, the assessment protocol requires assumptions to be made on the potential dose to the general public. Therefore it is appropriate to base this on known discharges and environmental measurements from existing and previous nuclear power stations in the UK, of which Sizewell B is the most comparable.
Stop Hinkley	Non-Statutory Consultee	Stage 1	We asked the South West Cancer Intelligence Service for details of cancer incidence as opposed to deaths in the area but they were reluctant to provide the figures, saying they were concerned about the confidentiality of individual cases. We argued that many people might actually want more information to help them ascertain what factors might have been involved in their illness. In the end we decided to set about our own doorstep survey, visiting the homes of about 3,000 people in Burnham North electoral ward. Stop Hinkley funded the survey and analysis while members of Parents Concerned About Hinkley undertook the door-to-door health questionnaire. (Personal details removed) of Green Audit analysed and published the results: "Parents Concerned about Hinkley survey, 2002" doorstep survey by volunteers analysed by (Personal details removed). 100% response from 30% of Burnham north population between 1996 and 2001 showed: leukaemia incidence 2.7 times the England & Wales average; breast cancer 98% above average; kidney cancer 4 times average; cervix cancer 5.5 times average. A Government committee wrote off the study saying wrongly it was a 30% response of a 100% population and therefore unrepresentative.	88950-159-1145			/	
Stop Hinkley	Non-Statutory Consultee	Stage 1	In 2004 we issued the following press release: "Burnham breast cancer rate still high" 10th Jan 2004	88950-159-2344			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>The following article was published in 2008 highlighting a Stop Hinkley commissioned Green Audit report on infant mortality near Hinkley Point:</p> <p>"N-PLANT CANCER FEARS HIGHLIGHTED"</p> <p>Western Daily Press, 1st March 2008</p> <p>Infant mortality is almost three times more likely to occur in Severn Estuary towns and villages downwind of Hinkley Point power station than inland parts of Somerset, a report says. Details of the study by Dr Chris Busby, of Green Audit, which was supported by a former director of the South West Cancer Registry, were aired last night on the BBC's Inside Out West programme.</p>	88950-159-5218			/	
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>The Committee Examining Risks from Internal Emitters (CERRIE, 2004) reported that radioactive 'dose' is now irrelevant, so radioactive discharges in millisieverts will not accurately predict whether individuals will be harmed. They also recommended that regulators should recognise that children are particularly vulnerable.</p>	88950-159-9480			/	
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>HINKLEY NO BUILD?</p> <p>IS HINKLEY POINT A SUITABLE SITE FOR TWO NEW EUROPEAN PRESSURISED REACTORS (EPR), (Personal details removed), LARGE & ASSOCIATES, CONSULTING ENGINEERS, LONDON</p> <p>British Legion, Castle Street, Bridgwater Somerset -7:30 PM Monday</p> <p>13 October 2008</p> <p>The present operational nuclear power station at Hinkley Point B comprises two Advanced Gas-Cooled Reactors (AGR) but plans announced (24 September 2008) by EDF at its takeover of the present Hinkley operator British Energy, suggest that of the 4 European Pressurised Reactor (EPR) nuclear plants that it has planned for the UK, two will be built alongside the existing nuclear plants at Hinkley Point, with the other two at Sizewell, Suffolk. The first EPR is planned to be in electricity generation by 2017 so, with the expected retirement of the fault ridden and troubled existing Hinkley AGRs within a few years, the spare electricity distribution grid capacity from Hinkley strongly favour this first EPR being commissioned at Hinkley Point.</p>	88960-159-17032			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Stop Hinkley	Non-Statutory Consultee	Stage 1	<p>(1) http://www.guardian.co.uk/commentisfree/2010/jan/07/nuclear-power-weapons-radiation-defence (Simon Jenkins' book review 7th and 8th January 2010)</p> <p>(2) 7th - 11th January 2010</p> <p>http://www.guardian.co.uk/environment/2010/jan/10/nuclear-power-irrational-fears</p> <p>(3) http://www.guardian.co.uk/environment/2010/jan/10/chernobyl-nuclear-deaths-cancers-dispute - John Vidal recycles radiophobia</p> <p>(4) Health Effects of the Chernobyl Accident and Special Health Care Programmes: Report of the UN Special Expert Group "Health"; pp 93-4</p> <p>(5) D.M.Grodzinsky, General Secretary, Division of Biology, Ukrainian National Academy of Sciences, "Reflections of the Chernobyl Catastrophe on the Plant World: Special and General Biological Aspects" - Chapter 7 in http://www.euradcom.org/publications/chernobylebook.pdf</p>	88960-159-31596			/	
Tractivity 874	Public	Stage 2	There is an increased incidence of cancer in this area. The statement the authorities have found no link between nuclear and cancer is inadequate. Until conclusively proven otherwise, that link must remain a possibility. I feel more research and information should be provided.	9632-159-8481			/	
Tractivity 62172	Public	Stage 1	<p>The February 2009 Environment Agency (EA) 'Criteria for RadWaste Disposal' document (18) sets out (19) the Environment Agency's view - in quantitative terms - of the risks associated with radionuclide exposure.</p> <p>The Environment Agency start from a baseline (20) of a:</p> <p>'one in a million' risk (per year - to the person at greatest risk) of developing either (21):</p> <p>non-fatal cancer,</p> <p>fatal cancer, or</p> <p>inherited defect</p> <p>and state that this level of risk would arise from an exposure of:</p> <p>20 micro Sieverts per year (22, 23)</p> <p>(micro = one millionth)</p>	89480-159-8047			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
			<p>Risk levels depend on the chance of something happening.</p> <p>If the chance of being exposed to the radionuclides was less than one, then the 'one in a million' baseline would be matched with an exposure level that was higher than 20 micro Sieverts.(24)</p> <p>Nuclear Reactors and Childhood Cancer</p> <p>In late 2007 the German 'KiKK' study (KiKK stand for Kinderkrebs in der Umgebung von KernKraftwerken - 'Childhood Cancer in the Vicinity of Nuclear Power Plants) reported a 1.6-fold increase in all cancers and a 2.2-fold increase in leukemias among children living within 5 kilometres of all German nuclear power stations.</p> <p>See:</p> <p>Ian Fairlie</p> <p>"Childhood cancers near German nuclear power stations: the ongoing debate"</p> <p>Published in 'Medicine, Conflict and Survival' 1st July 2009 (on-line) [http://www.informaworld.com/smpp/title~content=t713673482]</p> <p>This article indicates that the issue of just how dangerous exposure to radionuclides is still a matter of some controversy.</p> <p>It is a matter of much concern and upset that the particular illness that was found near the German nuclear power stations was leukaemia and solid cancer in children under five years old.(25)</p>					

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62172	Public	Stage 1	<p>"Spent nuclear fuel - how dangerous is it? A report from the project "Description of risk"</p> <p>SKB Report - Technical Report TR-97-13 (March 1997) On page 21 of this report at para 3.5.2: the following two figures are provided:</p> <ul style="list-style-type: none"> - the lethal dose is given as 5,000 'milli-Sieverts' (26) - a dose rate of one million 'milli-Sieverts' per hour is quoted <p>(one year after one tonne of waste fuel has been taken out of a reactor - when standing at one metre distance from the waste fuel rod)</p> <p>From these two figures it is then calculated (27) that:</p> <p>To stand one metre from:</p> <ul style="list-style-type: none"> one tonne of waste fuel, one year after its removal from the reactor <ul style="list-style-type: none"> - would kill you in twenty seconds. <p>On page 23 of the NDA 'Disposability' report for Westinghouse 'AP1000' (28) type fuel (29), a weight of approximately 600 kilograms per 'AP1000' fuel assembly is quoted. (see Table B4)</p> <p>The figure quoted for the weight of an 'EPR'(30) fuel assembly is also roughly 600 kilograms.(4) (See page 29 - Table B9)</p> <p>Therefore:</p> <p>One fuel assembly of either 'AP1000' or 'EPR' type fuel weighs roughly half a tonne.</p> <p>This means that standing next to one of either of these fuel assemblies could kill you in about a minute.(32)</p>	89480-159-9872			/	

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Tractivity 62172	Public	Stage 1	<p>An indication of the radionuclide content of Uranium high burn-up waste fuel rods may be obtained from Section 5.5 (pp 89-100) of the report:</p> <p>- "Radionuclide content for a range of Irradiated fuels" Contractors Report to Nirex</p> <p>[Contractor: EEUK Reference Number: 17503/74/1 Rev. 2] Doc No. 'Pcdocs395337v5 ' Revision: 2 Contract Number: TE2769/74 July 2003</p> <p>Nirex RadWaste Inventory (2007) (57)</p> <p>The report above referred to radionuclides synthesised in the fuel rod only. The following list of radionuclides - taken from the Nirex (2007) Inventory main report includes radionuclides that have been synthesised in the fabric of the reactor.</p> <p>Taken from Table 6.2 (pp 66 -67) of the Main Report</p>	89482-159-4546			/	
Tractivity 62172	Public	Stage 1	<p>Risk of Radiation-Induced Cancer at Low Doses and Low Dose Rates for Radiation Protection Purposes</p> <p>NRPB (National Radiological Protection Board)</p> <p>Volume 6 , No. 1 (1995) Added/updated: 29 August 2008</p> <p>ISBN 0-85951-386-6</p> <p>http://www.hpa.org.uk/webw/HPAweb&HPAwebStandard/HPAweb_C/1195733754925?p=1219908766891</p> <p>The aim of this report is to provide an updated, comprehensive review of the data available for assessing the risk of radiation-induced cancer for radiation protection purposes. Particular emphasis is placed on assessing risks at low doses and low dose rates. The review brings together the results of epidemiological investigations and fundamental studies on the molecular and cellular mechanisms involved in radiation damage. Additionally, this information is supplemented by studies with experimental animals which provide further guidance on the form of the dose-response relationship for cancer induction, as well as on the effect of dose rate on the tumour yield. The emphasis of the report is on cancer induction resulting from exposure to radiations with a low linear energy transfer (LET). The work was performed under contract for the Institut de Protection et de Surete Nucleaire, Fontenay-aux-Roses, Paris, France, whose agreement to publish is gratefully acknowledged. It extends the advice on radiation risks given in Documents of the NRPB, 4, No. 4 (1993).</p>	89482-159-5762			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62172	Public	Stage 1	<p>Epidemiological studies provide a substantial amount of direct, quantitative data on the risks of cancer in man following radiation exposure. The main source of information is the Life Span Study of the survivors of the atomic bombings of Hiroshima and Nagasaki in 1945. This population shows a pattern of increasing risk with increasing dose for both leukaemia and most solid cancers with a significant increase in the risk of cancer at acute doses in the range 200-500 mGy and above. Information on cancer risks is also available from a number of studies of patients irradiated for medical reasons. Many of the patients in these studies received high doses to particular organs, often 1 Gy or more, although some had received much lower doses. Results from pooling several studies have suggested a statistically significant increase in the risk of thyroid cancer at doses down to about 100 mGy (low-LET).</p> <p>A number of studies provide information on the risk of childhood cancer following exposure of the mother's abdomen during pregnancy. The low background cancer rates in children also improve the ability to detect an elevated cancer risk after irradiation in utero. These studies, together with data from the long-term follow-up of those exposed to atomic bomb irradiation, strongly suggest that irradiation in utero increases the risk of cancer. In the case of the Oxford Survey of Childhood Cancer, a 40% increase in the childhood cancer rate in children up to 15 years of age has been seen following doses in the range of about 10-20 mGy (low-LET). Similar results have been obtained in a number of other, smaller studies of the effects of obstetric radiography. Although there may be some increase in sensitivity to radiation at this early stage of development, there is no reason to believe the mechanisms involved in tumour induction will be fundamentally different to those in adults.</p> <p>Direct information on the effects of low dose chronic radiation exposure is becoming available from studies of radiation workers, both in the UK and elsewhere. The quantitative estimation of cancer risks from these studies presents particular problems, however, because of the need for a large study population to detect elevated risks at the low doses involved and the need for a long period of follow-up. Despite this limitation, some studies of occupationally exposed workers exposed to low-LET radiation provide indications of excess cancer risks, notably for leukaemia. Although the data are not strong enough to allow quantitative risk estimates to be obtained, the findings are generally consistent with the risk estimates developed by ICRP in Publication 60 and with the assumption of a cancer risk even at low doses. Studies of the effects of exposure to background radiation and of environmental exposure are subject to the influence of confounding factors and generally lack sufficient statistical power to detect small increases in risk.</p> <p>Epidemiological studies thus indicate an approximately 40% increase in the risk of radiation-induced cancer in childhood following exposures in utero at doses of low- LET radiation of about 10-20 mGy. A statistically significant increase in the risk of cancer has also been observed following exposure of children to doses down to about 100 mGy, and to the atomic bomb survivors in the dose range 200-500 mGy.</p>	89482-159-7999			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62172	Public	Stage 1	<p>Animal studies</p> <p>Studies in experimental animals cannot be used to obtain quantitative estimates of cancer risk to apply to human populations because of differences in sensitivity between species. They can, however, be used for examining the form of dose- response relationships and biological and physical factors that influence the radiation response.</p> <p>Analyses of a series of studies in mice have shown that the lowest doses at which a statistically significant increase in cancer yield is observed varies between studies, depending on the number of animals in the experiment, the radiation sensitivity of the strain of mouse to specific cancers, and the spontaneous cancer rate, as well as the dose range. In a number of studies the lowest acute dose to give a significant effect on tumour yield falls in the range between about 100 and 200 mGy (low-LET). This is similar to that found in studies on adult human populations. The lowest dose to give a significant increase in risk following chronic irradiation is generally higher than that for acute exposure because of the reduced effectiveness of low dose rate radiation in inducing cancer. It is concluded that animal studies provide broad support for the results of epidemiological studies of the tumorigenic effects of radiation at low to intermediate doses.</p>	89482-159-11368			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62172	Public	Stage 1	<p>Studies at the molecular, cellular, tissue and whole-animal level have demonstrated that radiation damage increases with dose and that, at least for low-LET radiation, at high dose rates it is often greater, per unit of exposure, than at low dose rates. Although the assumption that has frequently been made for radiation protection purposes is that the dose-response curve for cancer induction is linear, with the risk proportional to dose, in practice a dose and dose rate effectiveness factor (DDREF) is used to allow for a reduced effectiveness of radiation in inducing cancer in man at both low doses and low dose rates. There are, however, only limited data on the effects of dose rate on the induction of radiation-induced tumours in human populations.</p> <p>Analysis of the dose-response data for the combined incidence of leukaemia and solid cancers in the Japanese atomic bomb survivors may be used to derive a DDREF of about 1.7 in order to provide an overall estimate of human cancer risks at low doses and low dose rates of ionising radiation. Human data on the induction of thyroid cancer suggest a DDREF of 3 when the effects of acute external irradiation are compared with low dose rate exposure resulting from intakes of iodine-131. There are, however, questions about the contribution of heterogeneity of dose and uncertainties in dose estimates, as well as the effect of age on the overall risk. For female breast cancer, information is conflicting, but comparative data from Canadian provinces indicate a DDREF of possibly 3 for a reduction in effect at low dose rates.</p> <p>Animal studies and experiments on cell transformation in culture and on somatic and germ cell mutation rates have provided further insight into the likely effects of both dose and dose rate on tumour induction. Studies both on cell transformation in vitro and on mutation rates in somatic and germ cells suggest values of DDREF in the range 2-4. A review of relevant animal tumourigenesis studies provides values of DDREF in the range from 1 to 10 or more for dose rates varying by factors from 100 to 1000 or more. Thus, it may be that at lower dose rates than those experienced by the Japanese atomic bomb survivors, a DDREF greater than 1.5 may apply. Risk estimates derived from limited data on the effects of human exposures at low dose rates do not, however, support the use of high values of DDREF.</p> <p>Taken together, the available human and experimental data suggest that it is appropriate to apply a low value of DDREF and a value of 2, as presently recommended by ICRP in Publication 60, and a value of less than 3, as recommended by UNSCEAR in its 1993 Report, seem justified.</p>	89482-159-12713			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62172	Public	Stage 1	Molecular and cell studies Increasingly, interpretation of epidemiological and experimental studies at low doses is being influenced by accumulating information on the fundamental nature of the tumorigenic process. Neoplasia in tissues is now seen as a complex, multistage process that can be subdivided into four phases: neoplastic initiation, promotion, conversion and progression. The subdivisions are necessarily simplifications of the overall process which is, in any event, somewhat variable between different tumour types. However, they do provide a basis from which to interpret the cellular and molecular changes involved.	89482-159-15394			/	
Tractivity 62172	Public	Stage 1	Source for the Information on Uranium Experiment: Cross (1991) NSS/R252 J.E. Cross, D.S. Gabriel, A. Haworth, I Neretnicks, S.M. Sharland and C.J. Tweed "Modelling of Redox Front and Uranium Movement in a Uranium Mine at Pocos de Caldas Brazil" NSS/R252 Nirex, 1991	89483-159-12141			/	
Tractivity 62504	Public	Stage 2	EdF even misrepresents COM ARE's (Committee on Medical Aspects of Radiation in the Environment). http://www.comare.org.uk/ own acknowledged error in dismissing the sample study of Burnham residents and incidence of cancers.	10097-159-4392		/		
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	Much of the supporting data is drawn from Sizewell. It is not clear if the data is from Sizewell A or B. Sizewell A was a project completed in a different era and against wholly differing health targets. More emphasis is now placed on prevention, as opposed to treatment; as well as identifying diseases in their infancy, so enabling earlier intervention. Sizewell B owes its legacy to a time before Practice Based Commissioning and Practice budgetary responsibility.	10271-159-19866			/	
Tractivity 62469	Public	Stage 2	b) The quality of information is variable with examples of inaccuracies in reporting, e.g. in the health report where you have omitted an infant study and misrepresented COMARE by reporting an error of theirs that COMARE had subsequently corrected	89469-159-397		/		

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Environment Agency	Dual - statutory consultee and consultee with an interest in land	Stage 2	<p>Issue: A.C.3 - Health Concerns linking cancer incidence and exposure to low level radiation</p> <p>Comments: This appendix is a useful summary of various radiation related health concerns, however there have been more recent reports for example Green Audit reports on alleged health risks in Burnham- on-Sea and further work by the South West Public Health Observatory. It would be useful if these were addressed in this appendix.</p> <p>Action: Update in light of more recent relevant reports</p>	89078-159-11202	/			
Stop Hinkley	Non-Statutory Consultee	Stage 2	<p>Misrepresentation of COMARE statement on PCAH study in EdF consultation</p> <p>In 2002 the Parents Concerned About Hinkley (PCAH) group undertook a massive door-to-door survey of people's health in the Burnham north area. They collected 100 per cent of survey responses from the one third of the population they asked to take part, considered scientifically to be a very high sample. COMARE mistakenly said the study was a 30 per cent response to a 100 per cent survey, which would be much less significant scientifically. COMARE corrected their original mistake but EdF has still published the mistaken and misleading claim in its Stage 2 consultation.(27)</p>	89450-159-3399		/		
Stop Hinkley	Non-Statutory Consultee	Stage 2	<p>There are numerous studies showing a significant health risk from nuclear reactors to the local community which EdF has failed to address in its Stage 2 consultation. It has not even attempted to outline the pivotal debate around low level radiation and, as an attempted example of showing studies to be flawed, has misrepresented COMARE's response to a Green Audit report.</p>	89450-159-4084		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The Health Impact Assessment (HIA) report provides references to studies on the effects of health determinants.</p>	89414-159-2129			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Kilve Parish Council	Statutory Consultee	Stage 1	There is no doubt that there will be a great deal of psychological strain put on the local residents, as well as the loss of their countryside, and sense of peace and solitude. Loss of access to the countryside will be a severe blow, because this has always been one of the main attributes of living in the area.	88930-177-16742			/	Concerns raised by statutory and public consultees on the impact on mental health and well-being spanned workforce behaviour, disruption of due to transport and night work, loss of access to countryside, and the long-term storage of radioactive waste.
Tractivity 1374	Public	Stage 2 Update	EDF fail to accord respect to fears regarding the hostel, transport and night working.	89640-177-760	/			Social perception is the process of forming impressions of individuals and groups, and in this context relates to the perceptions held by local communities of the non-home based workforce. Local concerns, needs and priorities have been investigated through the engagement process to more effectively catalogue issues relating to well-being and social perception.
Tractivity 62582	Public	Stage 2	I feel that EDF have not taken the parishioners into consideration at all even though we have repeatedly told them that the worry of having this campus here for the next ten years is making many people ill with stress related illnesses, myself included; I am now suffering from migraines every few days, and panic attacks and depression. Please, please, please change your mind about this campus; the people here really cannot cope with any more distress. Please listen to what everyone is saying and act upon it.	10133-177-9756			/	This includes a number of wider health determinants such as access to leisure facilities, financial security, physical security and environmental parameters such as access to green space which can increase physical activity and alleviate stress.
Stogursey Parish Council	Statutory Consultee	Stage 2	[6.2.1] 'The risk to community health is not of a level to quantify any meaningful adverse health outcome.' This statement is based on purely physical health issues and does not take any account of the psychological effects of years of disruption on local people. Will EDF say anything about these effects?	89293-177-14758	/			Particular consideration has been given to the local hamlets in close proximity to the site in acknowledgement that the construction stage poses a greater risk to well-being for this group. The Health Action Plan contains mitigation to help address the more intangible aspects to mental health and well-being.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	In the areas immediately adjacent to development sites, some communities exhibited signs of stress and are fearful about the impact of the proposal on their well being, quality of life and property values;	89323-177-5183	/			The assessment of social pathways considers changes to the social fabric of the community from the incoming non-home based construction workforce. The socio-economic assessment in Volume 2, Chapter 9 of the Environmental Statement demonstrates that the distribution of construction workers is weighted towards larger population centres, which are better placed to cater to the social needs of the non-home based construction workforce.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The proposal for the management and storage of high level radioactive waste, which could remain on site for up to 160 years, is a significant concern for the local authorities and the communities that will have to live with the real and perceived risks of the storage facility for several generations.	89418-177-4757		/		The Health Impact Assessment (HIA) provides a robust assessment of radiation risk from the proposed site. This includes the risk from external (from radioactive material) and internal sources (inhalation and ingestion) of radiation. The storage of nuclear waste on the HPC site, in accord with Government policy, falls outside of the scope of the HIA as it is a broad topic, debated nationally and not solely specific to Hinkley Point. However Volume 7, Chapter 2 notes that the

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The health and wellbeing issues are not explicitly defined in the HIA, for instance they do not appear to include stress related health and wellbeing considerations brought on by the long term implications of living within very close proximity to a large scale construction project for up to 10 years (where the existing conditions are radically altered by the proposed project), fear of crime and antisocial behaviour or lifestyle changes resulting from reluctance to use local facilities. As a consequence the authorities are concerned that there are no obligations specified to minimise, mitigate or provide compensation for these impacts. Further assessment of the effects of temporary construction workforce on the social fabric and wellbeing of communities is required to assist in the identification of the appropriate obligations to mitigate and compensate for these effects.	89420-177-9765	/			radioactive discharges from the facilities for intermediate level waste (ILW) and spent fuel will be minor in comparison with the already small discharges from operation of the reactor units.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	These concerns can include the actual and perceived impacts on public health and the environment and on local infrastructure and the economy (as described above). The proposals for the management and storage of high level radioactive waste, which could remain on site for up to 160 years, are a significant concern for the local authorities and the communities that will have to live with the real and perceived risks of the storage facility for several generations.	89422-177-3546		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Mental health issues such as stress and anxiety are not adequately assessed or mitigated.	89423-177-6067	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 846	Dual - Consultee with an Interest in Land and Public	Stage 2	13. Please let us have your overall views on our proposals and any other general comments in the box below Leave Benhole lane alone. you dont own it and have no right to change it in any way. So keep out. Hope p. permission is refused for everything! 1) individual compensation for residents of Shurton for the stress and anxiety already caused by this long drawn out consultation.	9604-176-6991	/			<p>A substantial number of public and statutory consultees, particularly from the communities close to the main site and also Cannington and Combwich, expressed serious concern on the effect on health of uncertainty on the prospective impact of the prolonged construction period. Particular concerns included sleep deprivation, the introduction of a large workforce, and inability to sell and move house, especially for the elderly. Statutory consultees identified the need for effective communication and for confidence that the Health Action Plan would be implemented.</p> <p>Following the Stage 2 consultation process the Health Impact Assessment has been refined to further consider quality of life and well-being for local communities. However appraising, monitoring or even defining well-being cannot be done precisely as perceptions, priorities, circumstance and relative needs all vary at the individual level.</p> <p>The HIA has therefore investigated local concerns, needs and priorities through the engagement process, so as to catalogue more effectively the issues that might constitute an individual or combined impact on well-being. This includes an additional discrete stage of consultation with the local hamlets in close proximity to the site.</p> <p>The communication strategy outlined in the Health Action Plan (HAP) would raise awareness of construction activities, health initiatives, and the availability of recreational facilities amongst local residents to help maintain a sense of inclusion and control, helping to improve well-being. Communication will also include the measures aimed at controlling potentially antisocial behaviour by campus residents and the means by which prompt action on complains can be secured.</p> <p>Following the Stage 1 consultation process, preferred proposals have been produced which include an update on the proposed changes for Cannington. This includes removal of the Cannington accommodation campus, reducing the number of spaces in the park and ride and the use of embankments to further limit noise emissions from the bypass. In addition the preferred proposals show a reduction in the range of facilities available at Combwich.</p>
Tractivity 924	Public	Stage 2	6. Any other ideas or comments? Properties bought were bought for their enviromental vista, this proposal has and will greatly effect their value! The open views to the Quantocks, with a car park increased traffic low level lights and limited screening will significantly price of property, mental health of the owners in general!	9682-176-2969			/	
Tractivity 1060	Public	Stage 2	2. Any other ideas or comments? Although you have reduced the site size, you have increased the land and the use of the land at Cmbwich. your plans for Combwich have a huge imptct on the people of the village. With the site being operational for what can only be described as 24 hrs. This will cause residents to experience a massive drop in the quality of life. With constant light/noise the quality of lives will be severely affected. When are we and our children supposed to sleep!! If the plans go ahead sleep will be a distant memory and our health will take a downturn.	9818-176-389			/	
Tractivity 1333	Public	Stage 2 Update	Impact on increased population using local health facilities and emergency services, whilst difficult to judge what the impact will be, need to have a flexible approach to support any additional burden placed on these services. This additional use of health services could also include the impact of these changes on local residents health and their use of health services leading to increased stress, increased prescription useage, need for counselling services etc. etc,	89599-176-311			/	
Tractivity 1344	Dual - Consultee with an Interest in Land and Public	Stage 2 Update	I live in the silence of of a village due to health issues. I cannot tolerate noise. A lot of people live here because they work a night shift. i love my garden but it is too noisy to us now. I work from home as a volunteer, but need silence to concentrate. We are in despair. We are OAPs and cannot afford to move. We feel as if we do not exist.	89610-176-1001			/	
Tractivity 1372	Public	Stage 2 Update	I do not think that the immediate local people will gain from employment. many are retired and frightened of what may be coming	89638-176-118			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 212	Public	Stage 1	<p>6. Please give comments on your preferences and any suggestions about the future use of these facilities.</p> <p>We do not agree with agricultural land being used as an accommodation campus/freight/park & ride facility in Cannington (South) as it is a flood plain and far too near existing residential village family homes. It would increase our village size nearly half again. It has the potential to cause noise/light pollution 24 hrs/day. The anxiety/possible threat to homes etc perceived by the families/senior citizens alongside a campus of some 200 probably mainly men is not acceptable.</p>	8917-176-2322	/			The 'Main Site Neighbourhood Support Scheme' also puts forward a Property Price Support and Noise Insulation Scheme for residents of local hamlets in closest proximity to the site. An overview of the scheme is included in the HAP. The scheme is intended to reduce uncertainty for residents in close proximity to the site.
Tractivity 62248	Dual - Consultee with an Interest in Land and Public	Stage 1	<p>Thank you for arranging a further meeting with the Putnell area residents concerning the effects of the CAN B proposals.</p> <p>I think that we all made our feelings clear about the previous lack of direct communication with us from EDF. Well I know that we from (Personal details removed) and our neighbours from (Personal details removed) certainly did hence your offer of this meeting tonight at their home.</p> <p>Saturday was a chance to vent our anger about the total lack of communication from EDF. I hope that this evening will be a chance for us to find out more about how the proposed uses for CAN B would affect our homes and our future lives. We are all living with the uncertainty that this brings. We just keep wondering "what if" and it is affecting the way that we live. We need some information so that we can see what the future may have in store for us, how the certain disruption to our lives could be minimised and allow us to return a consultation questionnaire in a more informed manner.</p> <p>On a personal note - we have two children who are at times of their lives when they need stability (Personal details removed). Their lives as well as ours are affected by this unknown. We have quiet rural life surrounded by green fields in a house that we love and have spent years renovating, it is difficult to not show our concern for the future to the family.</p>	9369-176-251	/			
Tractivity 62301	Dual - Consultee with an Interest in Land and Public	Stage 2	<p>You will have received a copy of the letter sent to (Personal details removed) describing the effect of EdF's proposals on the mental health of the residents of the Stogursey hamlets. EdF has itself indeed already tacitly acknowledged the impact of the development on these communities by inviting them, and them only, to meetings to discuss the Preliminary Works. Fifty to a hundred households are going to be taking the strain of the most enormous industrial enterprise this region of the country has ever experienced and yet there has been no further acknowledgment of this from the company beyond your observations, relayed through (Personal details removed). that "Minimising the impacts .. on communities potentially affected is an essential part of our Preferred Proposals. Our preferred proposals have been shaped by .. comments received from residents." I like the use of the word "potentially" and the elastic reference to "residents"</p>	9991-176-212	/			
Tractivity 62319	Public	Stage 2	<p>This disruption may go on for ten years and will ruin people's lives: the worry of this is already making some of us ill.</p>	10005-176-1009			/	

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Tractivity 62319	Public	Stage 2	You appear to be extremely confident of obtaining permission regardless of the concerns and views of the local community. To this effect you have not and are not listening or acting on any of our concerns with the exception of a small movement of the southern boundary. If you really want to be "good neighbours" to the community as (Personal details removed) states then you should reconsider your proposals and issue a revised scheme. We want and are entitled to far more information than in your Stage 2 proposal. The whole process is having an impact on our health and wellbeing, and is bringing about a deterioration of our quality of life.	10005-176-2325	/			
Tractivity 62337	Dual - Consultee with an Interest in Land and Public	Stage 2	I live in Shurton and have completed and returned the questionnaire in response to the proposals. I do understand that nuclear power is necessary and believe that the Hinkley site is probably suitable as we already have a site here. However I am concerned regarding the effects the actual build will have on those of us who live closest to the site. I know a lot of the disruption is unavoidable and whilst a local fund for mitigation is good it will not in any way compensate us as individuals. I know that my lifestyle and my psychological health and well being will be severely compromised.	10017-176-0			/	
Tractivity 62372	Dual - Consultee with an Interest in Land and Public	Stage 2	The thought of living on the edge of an industrial estate with 24 hour noise and light pollution is causing us much stress. We have lived here for 24 years and expected a quiet retirement as has many of the residents.	10043-176-507			/	
Tractivity 62374	Dual - Consultee with an Interest in Land and Public	Stage 2	Both the works and the final plans will have a devastating effect on scores of individuals in several communities for a very long time. These are social and emotional issues and for want of a word spiritual, or psychological if you prefer. While professing social values EdF has done little or nothing to acknowledge the impact on the lives of individuals in spite of being asked to do so publicly, formally and informally.	10045-176-548			/	
Tractivity 62425	Dual - Consultee with an Interest in Land and Public	Stage 2	We are country loving people about to enjoy retirement in a beautiful part of W. Somerset. No! We are angry, demonstrative, threatened and stressed, and do not know how to move forward with our life. EDF proposals are making us ill; forcing us to consider having to move and give up the quality of our life now.	10062-176-387			/	
Tractivity 62508	Public	Stage 2	Increases in traffic will cause anxiety within the aging population, although this is not recognised by EdF, nor are there any plans to compensate for the harm caused.	10098-176-18631	/			
Tractivity 62582	Public	Stage 2	If there was no campus EdF would have more land so I believe you should scrap the plan for the campus completely as it is unnecessary and nobody here wants it; in fact many of us are ill with worry at the thought of having an extra 700 people here, right at the bottom of people's garden.	10133-176-2487		/		

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62582	Public	Stage 2	GENERAL COMMENTS My family moved to Shurton three years ago in order to live a happier and more peaceful life - we had previously lived in a built up area, and my husband suffers from a serious stress related illness, so coming to live here seemed a very good idea. We renovated and extended our house, (which cost us many thousands of pounds), so that my elderly parents could live with us here in the peace and quiet, and we knew they would be happy here, and well cared for. Now my parents are facing at least ten years of fear, anxiety, noise and disruption, as are other elderly residents of the small hamlets of Shurton, Burton, Knighton, and Wick.	10133-176-11345			/	
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	13. The work carried out by EDF into the health impacts associated with their proposal is focused on the health of the workforce, which is of course important, but it should also deal with healthy living and the physical and mental health needs of the surrounding communities. Given the potential impacts of your proposals, anxiety is likely to be a key issue for the population surrounding the site and on routes into the site.	89189-176-10604	/			
Stogursey Parish Council	Statutory Consultee	Stage 2	If 700 bed onsite campus goes ahead it will increase Stogursey Parish by half and the majority will be single male. This is bound to have a significant adverse impact on local people, some of whose health is already suffering due to the stress and worry caused by EDF proposals, lack of clarity, failure to answer questions etc.	89291-176-4116			/	
Stogursey Parish Council	Statutory Consultee	Stage 2	Bp 11 and 12: Stated aim is to avoid adverse impacts on physical and mental health. There is an identifiable link between these two categories of health. Residents of Stogursey Parish are already experiencing a great deal of uncertainty about their futures as a direct result of the proposed development. In fact many of those to be most affected i.e. those living in Shurton are experiencing high levels of anxiety resulting in lack of sleep and related problems including inability to concentrate.	89293-176-3272			/	
Stop Hinkley	Non-Statutory Consultee	Stage 2	6) Causing unnecessary anxiety and concern to local residents, for example round Cannington, by unexpected visits to ascertain whether they would sell their property in preparation for the proposed EdF/Hinkley C works, and with the scarcely veiled threat of compulsory purchase.	89452-176-3587			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.20 The immediate area surrounding the proposed development is relatively rural in nature, with a low population density, higher than average age and relatively low current demand for health services. Changes to the total population or the pattern of homes in the local area could potentially impact on the prevalence and incidence of mental health problems in the community. Current figures suggest that staff at the site would tend to live mostly in the Sedgemoor area . A large influx of working age adults and their families into this area could change the demographic influence on demand for mental health services.	89460-176-11478			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	As new settlers reach retirement age one might expect a proportion to settle in the area, marginally increasing the rate of organic mental health problems. Mental health services for children and adolescents, at universal, targeted and specialist levels of provision, might also expect to experience a rise in demand from an incoming population of working age adults moving into the area with their families.	89460-176-12814			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	While the HIA provides recommendations for initial awareness rising, there is little evidence to suggest that this commitment will be implemented or that perceptions would be altered sufficiently to avoid potential mental health impacts.	89412-176-12350			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	we consider that during construction and operation, there remains the risk that mental health issues may be affected. We would therefore suggest that there is a case for describing the sustainability outcome under this criterion as uncertain during these phases.	89412-176-13003		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	It does not sufficiently address the broader social and quality of life issues which will arise as a result of a major power station development. These include anxiety about potential health effects, visual impacts, housing blight and other issues, changes in the way communities perceive their environment, and the cumulative effects of the development on specific communities.	89414-176-3719	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	'Soft' health issues are potentially significant and should be taken into account when considering the scheme impacts and the need for mitigation.	89414-176-4305			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	This overview ignores the broader socio-economic and environmental effects, including psychological issues.	89415-176-6226	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62906	Public	Stage 2 Update	Over time the apartment has gradually regained its value, however since the announcements of your proposals my partner and I are left terrified as to what effect this has had. We are not in a position to pay for a valuation to be carried out and neither do we wish to do so only to be told devastating news.	89661-176-776			/	
Tractivity 62949	Public	Stage 2 Update	Because this is a rural area, the noise levels at night are very low. Any increase, especially intermittent noises, will disturb the sleep patterns and inevitably affect our health and wellbeing. This is in addition to the existing stress level because of worry about the whole project.	89680-176-1826			/	
Tractivity 63003	Public	Stage 2 Update	More and more local residents are putting their properties on the market as the prospect of staying becomes too much. Estate agents are reporting a lack of interest from purchasers to properties neighbouring the Hinkley site. EDF must buy the properties of local residents who feel they need to move away. All of this is raising stress levels of local residents, some seeking medical help.	89693-176-2307	/			
Tractivity 63031	Public	Stage 2 Update	These working hours will have untold affect on the physical and mental health of local residents.	89704-176-1072			/	
Tractivity 63031	Public	Stage 2 Update	Already the stress of never ending consultations, feeling that one has to leave the area and not being able to sell one's home is taking its toll on local residents.	89704-176-4044			/	
Sedgemoor District Council	Dual - local authority and consultee with an interest in land	Stage 2 Update	Transport impacts have been a major cause of anxiety for local residents and existing businesses since the Stage 1 consultation and EDFE have so far failed to respond on this matter in a comprehensive and credible manner.	89735-176-2329	/			
West Hinkley Action Group	Non-statutory consultee	Stage 2 Update	Many residents are already suffering from stress-related illnesses which they perceive to be directly attributable to the planned development. The proposals to increase the length of working hours even further has compounded this anxiety.	89771-176-802			/	
10	Comments received under the EIR from the IPC	Stage 2	Residents are alarmed and dismayed and (Editor's notes: information redacted) There is now widespread stress in the community and I have heard reports that this has led some residents suffering mental illness, for example, (Editor's notes: information redacted)	89799-176-853			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
17	Comments received under the EIR from the IPC	Stage 2	<p>1Hinkley C Site</p> <p>Satisfactory Totally Unsatisfactory No Opinion Don't know</p> <p>- I find it impossible to believe that a civilised human being imagined this development on this site.</p> <p>- What deluded model of social interaction persuades the company that siting a 700 bed- hostel with buildings three-storeys high, recreational facilities indoors and out and on-site parking for residents' cars and service personnel, on high ground above the nearest community - a hamlet centuries old with several listed buildings lying a mere 300 yards distant - represents the actions of the 'good neighbour' which EdF claims that it wishes to be?</p> <p>- The company itself admits that it will have difficulty reducing light pollution from the proposed campus. It has not acknowledged that there will also be noise nuisance, visual intrusion and evening and weekend recreational nuisance which will affect all local traffic and the private lives of the local hamlet residents. There will be no benefit to the local communities during operation and no legacy use,</p> <p>- Psychologically there will be no escape from sight or sound of the development. EdF might just as well bulldoze the hamlet and have done with the difficulty.</p>	89806-176-9767			/	
29	Comments received under the EIR from the IPC	Stage 2	The intentions of EDF for the village of Combwich are causing great concern and distress.	89818-176-0			/	
Stogursey Parish Council	statutory consultee	Stage 2 Update	Parishioners have already contacted SPC to say they are having trouble sleeping, just thinking about how bad it will be. Several are now receiving medical treatment for the effects of stress brought on by these new proposals.	89871-176-6927			/	
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	- Prolonged impact on local residents who will have to endure the lengthy construction phase and who have grave concerns about the temporary major expansion of their population without the opportunity to establish any lasting community legacy. It is a serious concern of the Council that this may have direct health impacts on residents in terms of stress related illnesses.	89886-176-4353	/			
WSC & SDC Joint Response	Dual - local authority and consultee with an interest in land (Sedgemoor only)	Stage 2 Update	This is a major concern to the Councils at this late stage in the pre-application process and a cause of great anxiety to local communities who have reasonable concerns about highway safety, congestion and impacts on residential amenity.	89892-176-973			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
43	Comments received under the EIR from the IPC	Stage 2 Update	Resident's are alarmed and dismayed and this has created a climate of fear. There is now widespread stress in the community and I have heard reports that this has led to some residents suffering mental illness. For example, I am informed that one elderly couple, who do not want to be identified, have been harassed and. threatened by EDF because they refused to agree to an EDF purchase of their home.	89912-176-840			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Countryside Council for Wales	Statutory Consultee	Stage 1	Human Health and Well being - Access to natural green space would have been a useful indicator. We assume that the Public Rights of Way network and open access land is covered under the transport networks and links, but if not it should also be considered.	87870-149-4673	/			<p>Statutory and non-statutory consultation responses centred on the desirability of including mental health and quality of life issues within the scope – in particular, to reflect the stress and anxiety arising within the affected communities due to fear of property blight, crime. Responses also highlighted the need to engage with a wider range of stakeholders, especially those who deliver health interventions. Other comments were that the consultation did not address the health impacts of chemical contamination of water or land and waste storage and disposal. One respondent regretted the loss of the overarching perspective formerly provided by the nationalised Central Electricity Generating Board, responsible for both power stations and the national grid.</p> <p>Initially the health pathways were refined through a formal scoping report issued to key health stakeholders. Feedback from the Stage 2 consultation identified a greater need to investigate and address the more intangible and subjective elements of health and well-being. Accordingly, the Health Impact Assessment (HIA) investigates local concerns, needs and priorities utilising the comments received through the engagement process to identify and address issues that might constitute an individual or combined impact on well-being.</p> <p>In addition the HIA has a greater focus on local communities, specifically the hamlets in close proximity to the main site. To avoid duplication the Health Action Plan (HAP) summarises and provides signposts to the mitigation measures outlined in the Environmental Statement and draft Section 106 Agreement. These therefore provide a foundation on which the HAP can both build on and complement through committed mitigation and community support initiatives.</p> <p>There are several health pathways which fall outside of the scope of the assessment and as such have not been addressed through the HIA. These include national energy policies, the shift toward nuclear power, storage of nuclear waste and waste management and contaminated land. Waste management is a broad topic that is being debated nationally and not solely specific to the proposed facility at Hinkley Point. The HIA does not directly</p>
Sedgemoor District Council & West Somerset Council Joint Council Response	Dual - Local Authority and Consultee with an Interest in Land (Sedgemoor only)	Stage 1	c) Consideration of non-radioactive and radioactive waste and the long term impact on human health and the environment as a result of such proposals needs to be provided. The future studies setting out this evaluation should be identified and ideally should form part of a comprehensive Health Impact Assessment (HIA) for the project.	88070-149-2586		/		
Somerset Councils and SNEG	Statutory Consultee	Stage 2	8. Health: The scope of the health impact assessment focuses primarily on health provision for workers rather than considering the impact of the project and work force on regional health needs and provision. The final submission should expand its scope to include this broader perspective and address mental health concerns (e.g. stress, and anxiety regarding the impacts of construction on local residents) relating to the development.	10240-149-10624	/			
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	EDF Energy have produced a Health Impact Appraisal (HIA), amounting to a staggering 151 pages alone, many of which maybe a requirement for the various planning and nuclear safety authorities, but have little relevance for the local population and distract from the key issues surrounding the fragile health economy of Somerset.	10271-149-4619			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	Engagement should be widened to include not only those who EDF have a statutory obligation to consult (ie NHS Somerset), but also additional stakeholders who will be providing services on behalf of the NHS, such as Somerset Community Health and local GP service providers, such as the FBP. It is these organisations which will take on the mantle of delivering healthcare in accordance with the GP Led Commissioning Agenda and the proposals of the Coalition White Paper on Health. The opportunity to comment on proposals is not a substitute for more formal talks.	10271-149-13526	/			
Health Protection Agency	Statutory Consultee	Stage 2	Neither chemical emissions to water nor contaminated land are covered by the HIA.	89165-149-7874			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
West Somerset Council	Local Authority	Stage 2	- The scope in relation to broad health issues is far too narrow and simply focuses on workers not on the communities affected by the proposals.	89183-149-6873	/			consider the health impact from contaminated land however; further information is available through the Contaminated Land Assessment in Chapter 14, Volume 2 of the Environmental Statement.
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	13. The work carried out by EDF into the health impacts associated with their proposal is focused on the health of the workforce, which is of course important, but it should also deal with healthy living and the physical and mental health needs of the surrounding communities.	89189-149-10604	/			
Stogursey Parish Council	Statutory Consultee	Stage 2	[Table 4.1] Construction Emissions Pathway Stakeholder Comments - 'The construction phase (and associated construction traffic) has the potential to impact upon the local environment, influencing the level of community exposure to noise and vibration, emissions to air and general disruption, representing a potential acute and chronic risk to health' SPC agree - what is EDF planning to do to mitigate these real risks?	89293-149-9851	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	In our response to the Stage One consultation process, we highlighted the need for such a complex project to have an overarching Health Impact Assessment (HIA) to assess and combine all the potential impacts. This response is focused on the content of the HIA and an assessment of the adequacy of the content to identify and reasonably quantify the public health and health service impacts of the development.	89459-149-779	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The concept of developing a Health Action Plan to deliver an holistic health mitigation and enhancement strategy is supported. However the current proposals fall short of meeting this objective fully. The health needs assessment for the construction workforce is based on ambitious assumptions regarding the proportion of local workers versus and non-home-based workforce, and does not take into account opportunities to address the specific health needs of rural communities around the site.	89313-149-1951	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Engagement with existing migrant communities should also be integrated into the consultation and engagement programme as well as recognition of health (including sexual health) issues in terms of women and young people.	89320-149-7707			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The scope of the appraisal is considered to be narrow, and excludes key health issues and pathways. The appraisal covers quantitative issues assessments of exposure to radiation, noise and air emissions, road traffic accident rates, the more general effects of temporary construction workers' accommodation camps, the health needs of the temporary workforce and effects on the local economy and employment. It does not sufficiently address the broader social and quality of life issues which will arise as a result of a major power station development. These include anxiety about potential health effects, visual impacts, housing blight and other issues, changes in the way communities perceive their environment, and the cumulative effects of the development on specific communities.	89414-149-3313	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Whilst it is recognised that the 'softer' health issues may only be assessed at a qualitative or speculative level, this should not be considered as a reason for excluding such issues from the appraisal. 'Soft' health issues are potentially significant and should be taken into account when considering the scheme impacts and the need for mitigation.	89414-149-4102	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>In addition it is considered that the scope in relation to broad, 'qualitative' health issues is narrow. Other health determinants that are not addressed include:</p> <ul style="list-style-type: none"> - Mental health issues (e.g. anxiety and stress) resulting from concern and frustration about the health, social, environmental and economic effects of the development; - Actual or perceived property blight leading to anxiety and stress; - Community disruption and increased fear of crime and anti-social behaviour resulting from the presence of the non-home-based construction workforce. <p>Furthermore some pathways that have been identified in Table 2.2 are not assessed within the appraisal sections of the report. These include:</p> <ul style="list-style-type: none"> - Communicable disease (adverse); and - Meeting energy demands (benefit). 	89414-149-6557	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The summary of operational effects appears to conclude that there will be no adverse effects following the completion of the construction phase, on the grounds that radiological emissions and air emissions will not pose a significant risk to health. This overview ignores the broader socio-economic and environmental effects, including psychological issues. Therefore it is considered that much additional work is needed in order for the HIA to provide a clear, accessible evaluation of the significance of health effects.</p>	89415-149-5976	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The authorities have a number of concerns with the approach to and the findings of the EDF's HIA document principally relating to the narrow interpretation of the scope and definition of health and welfare impacts. This narrow interpretation appears to be carried over into the Requirements and Obligations document where the obligations are limited to meeting the needs of the construction workforce.</p>	89420-149-8861	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	<p>The authorities require the scope of the HIA to be broadened to address the whole range of health and welfare effects of the development and to ensure that the appropriate mitigation and compensation is identified.</p>	89420-149-12073			/	

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal scope is considered to be narrow and does not sufficiently address broader social and quality of life issues. These issues may include concerns about housing blight, fear of crime, community severance, visual impacts, loss of amenity, loss of green space and resulting changes in the way people perceive and use their environment.	89423-149-5383	/			
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	The work carried out by EDF into the health impacts associated with its proposal is still too focused on the health of the workforce, which is of course important, but it should also deal with healthy living and the physical and mental health needs of the surrounding communities.	89853-149-0	/			

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41	Comments received under the EIR from the IPC	Stage 2 Update	<p>Subject: 3/32/10/037 Objection to the current proposal on the grounds of insufficient review scope for</p> <p>health issue emissions and others changes and findings on other sites</p> <p>Dear</p> <p>Please could I submit the attachment of regarding concerns in France for health impact from extra grid connection uprating and for emissions and discharge level changes.</p> <p>The review of the Finish and France projects for the EPRs suggest there are possible omissions in the total project impact from all physical and emission changes. Bringing all related works into the planning process including the National Grid work is logical.</p> <p>There is more anecdotal information suggesting the timeline will be longer than EDF advocate to 2017/2018 because there can be insufficient time contingencies in the schedules of Areva and others including EDF.</p> <p>A RASP type review of strategic, planning and political risks identifies the loss of the CEBG exposed the UK to fragmented and incomplete processes for the nuclear and large project impacts. This omission of an authority with oversight of design and implementation is very significant. The privatisation of the power sector with the removal of CEBG is a significant loss to the controls and validation / verification oversight processes that were in place for the first and second nuclear build programmes / projects.</p> <p>It is hoped this project can be paced after risks and designs are more fully assessed and analysed and agreed with competence. Currently the CEBG competencies are not being applied. Coordination is not to required standards compared with the CEBG approaches.</p>	89910-149-0			/	

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	The fact that those officers have been involved in the process of agreeing the assessment approach is reassuring although more evidence of involvement of the communities directly affected would have been advisable.	89460-150-5771	/			Consultation responses identified the need for greater engagement with affected communities and a broader focus including health impacts of social and quality of life issues. Respondents also sought clarity on EDF Energy's depth of commitment to the Health Action Plan (HAP), and advocated contributions towards enhanced health facilities and initiatives.
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	8.1 The health action plan section of the HIA provides a summary of the proposed topic areas to be addressed. There is insufficient detail regarding the mitigation measures proposed to be able to assess their adequacy. It is not clear whether the action plan represents a commitment by EDF to implement the actions or whether it represents a range of possible benefits some of which will be included within Environmental Management and Monitoring Plan and others whose status is less clear. We recommend a detailed and resourced health action plan will be required if the project is to proceed.	89463-150-3794			/	From the outset of the project the Health Impact Assessment (HIA) has been based on a broad socio-economic model of health which encompasses both conventional and wider determinants of health. A key aspect of the approach has been iteratively to support and build upon the information provided through the Environmental Statement. The HIA includes information relating to health promotion and the provision of healthcare services. Following the Stage 2 consultation process an occupational healthcare provider has been appointed and the services proposed have been outlined within the final Health Action Plan (HAP). This covers risk prevention, health promotion and health surveillance programs for the construction workforce, reducing the burden on NHS services. The residual impact on health care services requires a healthcare contribution and the methodology for determining this has been established through consultation with key health stakeholders including Somerset Primary Care Trust and Somerset County Council. Should consent be granted this would be implemented through the Section 106 Agreement. Following the Stage 2 consultation process the residual healthcare requirement has been outlined within the HAP.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	In 4.79 of the Scoping Opinion a comment is made regarding the socio-economic topic area: 'The proposals have the potential to affect a wide area. The Commission considers that the impacts of the proposals in terms of agriculture and rural communities should be addressed especially during the construction phase, and the potential impacts on local villages and Bridgwater should be taken into account.' We are therefore concerned to find both the socio-economic assessment (and Health Impact Assessment) do not sufficiently address the broader social and quality of life issues which will arise as a result of such a major nuclear power station, such as: anxiety visual effect change in how the community perceive their environment the cumulative effects on specific communities, such as the local villages and Bridgwater.	89330-150-5768	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Where quantitative assessment has been undertaken, workings and assumptions should be shown and supporting studies (e.g. the Environmental Appraisal) clearly cross-referenced to increase the transparency of the appraisal.	89414-150-5263			/	The HIA presents a series of committed mitigation and community support initiatives through the HAP (chapter seven of the HIA). EDF Energy is committed to supporting the delivery of these mitigation measures, to facilitate this, and partnerships are being formed with key health stakeholders. Furthermore the HAP has been refined following the Stage 2 consultation process to outline monitoring and governance procedures.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Health and Well Being - investment in measures and initiatives to promote healthy lifestyles and compensate for the additional burden and cost for health related services. This would include contributions for new and improved health facilities, including GP practices, hospitals and clinics as well as measures and initiatives to promote healthy living.	89418-150-14318	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 1058	Public	Stage 2	Also, health capacity for the influx of workers and those that bring families.	9816-161-6324	/			<p>Non-statutory and local authority consultation responses at Stage 2 highlighted the impact of the construction workforce on medical, pharmacy, dental and diagnostic service, set against increased demand from the local population due both to stress and to increased incidence of communicable disease including STDs. Particular concern was expressed over EDF Energy's potential underestimate in numbers registering, and the unresponsiveness to such rapid changes of the NHS funding arrangements.</p> <p>A key objective of the Health Impact Assessment (HIA) has been to provide iterative health support during the planning stage. This has included modelling the healthcare requirement associated with the non-home-based workforce. Following the Stage 2 consultation process an occupational healthcare provider has been appointed and the services proposed have been outlined within the Health Action Plan (HAP). This includes on-site medical care and health promotion campaigns. The on-site healthcare services are coupled with stringent health prevention and promotion campaigns, designed to minimise health needs. Consequently a capital contribution for health infrastructure is not deemed appropriate.</p> <p>However, the residual impact from referrals to the NHS has been modelled and a financial contribution identified through consultation with Somerset Primary Care Trust (PCT). This includes GP, acute care and specialist services with a separate financial contribution for ambulance provision. The contribution has been outlined in both the draft Section 106 Agreement and the HAP.</p> <p>Although the healthcare contribution was originally intended to solely focus upon the change in health care demand directly attributed to the temporary non home based workforce, the PCT requested the scope be expanded to also cover the few partners and children of non home based staff that may also seek accommodation within the area. This represents a voluntary community support initiative as it does not address an impact directly associated with the</p>
Tractivity 1228	Public	Stage 2 Update	How are you going to mitigate the inevitable deaths which would result from building the EPR reactors? How are you going to compensate parents whose children die from leukaemia? How are you going to compensate families where the father dies from prostate cancer, a stroke or a heart attack, leaving them penniless? You need to understand the appalling health damage done to Somerset communities by the existing nuclear discharges into the atmosphere and their effects on every part of the human body as they cross the lungs into the lymph system and then cause a wide variety of fatal illnesses.	89494-161-82			/	
Tractivity 1267	Public	Stage 2 Update	Q3 Do you have any comments on our proposed community mitigation and benefits? I understand there will be on site medical services. Will there be pharmaceutical services. What about people who need more complex care? Is there going to be sufficient additional funding for local health services to cope with the extra demand?	89533-161-128	/			
Tractivity 1296	Public	Stage 2 Update	We do not want any accom at Cannington Court or indeed in Cannington village for Hinkley C. It would put a severe strain on policing/medical facilities	89562-161-866	/			
Tractivity 1333	Public	Stage 2 Update	Q2 Do you have any comments on our updated accommodation proposals? Impact on increased population using local health facilities and emergency services, whilst difficult to judge what the impact will be, need to have a flexible approach to support any additional burden placed on these services. This additional use of health services could also include the impact of these changes on local residents health and their use of health services leading to increased stress, increased prescription usage, need for counselling services etc. etc,	89599-161-240	/			

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Tractivity 388	Public	Stage 1	6. Please give comments on your preferences and any suggestions about the future use of these facilities. An influx of huge numbers of workers from all over Europe and Asia is not an option in a small community. We were told years ago that cases of leukaemia were possibly due to a virus being introduced to the population, when Hinkley A and B were built, leading to a cluster of cases in this area. Now that we are so much better informed, compensation for any such cases would certainly be sought.	9073-161-2506			/	<p>proposed development.</p> <p>The HIA has identified the possible future reforms to the NHS including the anticipated abolition of PCTs in 2013. The Health and Task Finish Group, who support the development of the HAP, include both the PCT and the bodies likely to inherit responsibility for public health including Sedgemoor District Council and Somerset County Council, thereby constituting a change management group.</p>
Tractivity 62582	Public	Stage 2	Other factors that have not been considered are medical and dental care for the workers; what impact would these extra people have on our local doctors' surgeries? Would it be to the detriment of the local people?	10133-161-9310	/			
Tractivity 62582	Public	Stage 2	What about the general and psychological well being of the workers, being away from their homes and families? Who would look after this? Is there a plan for a clinic on site for the workers to ease the load on the local doctors?	10133-161-9524	/			
South West Strategic Health Authority	Statutory Consultee	Stage 2	- The Health Impact Assessment profiles the potential increase and change in the local population around the construction activity with the temporary accommodation of construction workers for up to ten years. The health impact assessment notes the potential for an increase in communicable diseases	10182-161-1214			/	
South West Strategic Health Authority	Statutory Consultee	Stage 2	- The health impact assessment outlines a potential profile of the temporary workers over the ten year construction phase. The Health Impact Assessment suggests that the health care needs over this population are unlikely to be different in nature to those shown in the current resident population in terms of demands on both primary and secondary care. However, the health impact assessment does not fully identify the potential increase in volume of health care activity. I would ask that consideration be given to the provision of additional financial support to the local health economy to mitigate and compensate for the additional healthcare activity burden attributable to the accommodation of the temporary workers in the Somerset area for the ten year build period.	10182-161-1992	/			
Burnham-on-Sea & Highbridge Town Council	Statutory Consultee	Stage 2	- Doctors' surgery capacity (for workers and dependants) - Health services generally (e.g. dentists and others)	10220-161-2871	/			

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	It is anticipated by EDF in their submission, that during the peak building phase there will be an influx of approximately 3000 workers to the area, 25% or 400 are expected to bring their families, the remainder will live in construction campuses (1080) or in rented/private accommodation (1590). Including families this may equate to potentially 4500 new patients (see GP capacity 5.8.12 comments) or a 5% increase in our population, all to be looked after in a declining health economy, from a stagnant NHS budget.	10271-161-3706	/			
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	The HIA correctly points out that the local area has a notable IMD indicator and that there are high levels of ill health and poor housing stock. The influx of new people and increased activity will undoubtedly affect the existing population and we will see increased levels of mental illness, and chronic diseases in our population for the duration of the building phases of the project.	10271-161-5554			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	3.5 Existing Burden of Health The much quoted JSNA was produced prior to the EDF proposal, the recession and the change of government. Neither the JSNA or the EDF consultation document take sufficient heed of subsequent Coalition Government demands that the NHS make significant savings of £20 Billion, the burden borne by Somerset being a substantial £100 million of savings, on top of the added health burden of what amounts to be a new conurbation, (with a population of 4-5000 persons), requiring an additional GP surgery and associated costs of £18 million over the same period. There does not appear to be any financial consultation with NHS Somerset about how the overall impact of a shortfall in funding of £118 million will affect the area.	10271-161-10784	/			
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	5.8.12 Undoubtedly there will also be an influx of foreign workers who will remain domiciled locally for lengthy periods, between home leave. There is no mention of what percentage of workers may be non-native English speakers or if EDF will arrange for adequate trained medical translators to help during consultations. For NON EEC residents how will the full cost of private or NHS medical services be recovered?	10271-161-18806		/		
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	5.8.15 We would challenge the assertion that only 1552 people may register locally. It is far too conservative a figure. 400 workers may indeed be bringing a wife and 2 children to live with them, but what about elderly relatives and the single worker who moves down for few years until moving on to the next construction project. As stipulated we believe a figure closer to 4500 patients will access our services. An average GP is expected to treat no more than 1400 patients each, EDF claim that 1552 patients would require less than 1 additional GP is wrong, including leave planning an additional 4 GPs would be required as a minimum.	10271-161-19224		/		

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	<p>5.8.16 The proposed health care planning contribution of £894.240 spread over 4 years would seem totally inadequate in comparison with the cost of a new surgery to look after 4000+ patients, which as already illustrated, would exceed £4 Million in surgery costs alone. Whilst some of the additional £15.5+ Million needed to cover secondary care and ancillary services would follow the patients if they registered here, the funding for those temporarily resident would not and this may account to some 50% of the workforce.</p> <p>We would also question the benefit of paying carte blanche, £894,240 (a sum barely able to cover 2 years prescribing costs) to NHS Somerset. Although a statutory body, it is an organisation which will cease to exist in 2012. We would however support this funding being made available via NHS Somerset (as the statutory body) to other local stakeholders, on the proviso that that any monies were invested locally (ie within Sedgemoor). NHS Somerset must also ensure that appropriate additional national prescribing support is received for the duration of the project to cover temporary residents.</p> <p>Combining a new Community Hospital with a GP walk in centre, MIU and CATU would meet the needs of EDF, NHS Somerset and the local communities, so leaving a lasting legacy for good in Bridgwater. It is vital that the Hinkley Point workers are not unfairly disadvantaged and are allowed to access a modern NHS Health Care facility which could be provided in this manner.</p> <p>This work should be completed prior to the main construction so providing a facility to treat workers in need of immediate medical assistance from the outset. Having such a facility in advance of the main construction effort would undoubtedly be well received by local residents.</p>	10271-161-20337		/		
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	<p>There does appear to be a shortfall between the EDF perceived perception of local health provision and what are the realities in the current economic climate. We also strongly feel that there is much more that can and must be done to prevent a postcode lottery and ensure equity of health service provision.</p>	10271-161-24706	/			

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	In short the following points need to be addressed: - Associated costs of Healthcare - Patient numbers under estimated - inadequate level of GP capacity - Difficulty in maintaining GP capacity - Need to retain facilities post construction not remove them - Opportunity to address social issues and deprivation - What organisation will be responsible for Health issues post the SHA and PCT	10271-161-26267			/	
Stogursey Parish Council	Statutory Consultee	Stage 2	[12.9&10] This refers to funding of additional healthcare staff, but takes no account of the possible need for infrastructure improvements. Stogursey lacks any proper healthcare facilities, and it may be possible to provide the on-site healthcare facilities in a different way that will provide a lasting legacy for the local population. Has EDF confirmed with Somerset PCT that there is no requirement for additional infrastructure?	89294-161-1476			/	
Tractivity 63240	Consultee with an Interest in Land	Stage 2	15.16 The health care contribution has been assessed with reference to the impact of the proposed development on GPs' surgeries. Further consideration must be given to the impact of the proposed development on wider health care facilities including local hospitals, NHS drop-in centres, ambulance and paramedic cover, and related health and welfare services (such as "stop smoking" services which EDF will promote to its workforce). As with police cover below, the potential support that may be needed from the Ambulance service may place a strain on what is currently in place and required by the local population.	89446-161-7099	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	The project should not underestimate the resources required to support new families to integrate in a moderately isolated community such as some areas of Sedgemoor and West Somerset and ensure appropriate access to social, community and health support.	89460-161-2552			/	

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.17 The health pathways section of the HIA identifies a concern over potential impact on communicable disease rates during the construction phase. This issue is not analysed in detail within the assessment section of the document. Whilst it is acknowledged that the impact of the project on most communicable disease is likely to be limited, consideration should be given to the potential for increase in sexually transmitted disease associated with the temporary workforce.	89460-161-9075	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Balancing all of the known factors it would be reasonable to expect the proposed development to have the following effects on the Sedgemoor area: - increase local population levels - reduce the average age of the population - moderately increase the demand for mental health services for adults of working age and for children and young people - in the long term, increase the numbers of people with dementia or other organic mental health conditions	89460-161-13600			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.4 The latest version of the Local Development Framework for Sedgemoor identifies that over the same period an average of 350 houses per annum will be completed in Bridgwater indicating over the period to 2018 a requirement for an additional 6,160 people to access primary care services in Bridgwater.	89461-161-1553			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.5 EDF estimate that 30% of the temporary workforce and their families will register with a GP practice. This would give a need for an increase in capacity within local surgeries of between 1,552 and 1,811. However, we expect that there would also be a significant demand for services from the 70% of people who have not registered with a local practice. The national average is over five attendances per patient per annum at a GP surgery and although men of working age may attend slightly less than the national average this it is still likely to be a significant service requirement. 5.6 EDF have estimated that 60% of the temporary workforce will require local dental services. This is in line with the general position in Somerset where the remaining 40% of the population either access private care or no dental care at all. The estimates made would indicate a need for additional services for 3,104 to 3,622 patients. This converts to a demand for an additional capacity of 10,864 to 12,677 units of dental activity (3.5 UDAs per person).	89461-161-1895	/			

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.7 Many of those attending a GP practice require a prescription and so consideration needs to be given to where their medications will be dispensed.	89461-161-2948	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.8 Approximately 20% of the population in Somerset receive an NHS sight test each year. It is reasonable to expect that a significant proportion of those working at Hinkley Point will require sight tests. However, many opticians are routinely open on a Saturday, so the service could be accessed through their home optician outside Somerset or a local Somerset optician.	89461-161-3400			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.13 Bridgwater has been identified as an area with below average NHS dental capacity and as a result a new practice has been commissioned for the South Bridgwater area to open in 2011. This will provide 14,000 additional Units of Dental Activity (UDAs) . However, this is unlikely to be sufficient to cover the current shortfall in capacity, the growth in population and additional temporary workers. The capacity required to provide dental services to 3,622 temporary workers is just below two full time dentists with the associated dental capacity.	89461-161-5537	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.14 Patients attending GP services are likely to often receive prescriptions for medication that can be dispensed either in a community pharmacy or where eligible a dispensing GP practice. It would be important to consider where patients attending an on-site surgery would obtain their medication and the operation of a dispensing GP practice or community pharmacy should be seriously considered as part of the onsite medical services.	89461-161-6092	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>5.17 NHS Somerset receives three yearly revenue allocations based on the existing registered population (31 March 2010). The next set of allocations covering 2011 to 2014 are due to be published later this year. It is likely that this will also include allocations for a fourth year to 2015. Therefore temporary workers who register with Somerset practices will only attract additional funding for NHS Somerset if they are registered at the date of the next allocation (from April 2014 or 2015). However, unregistered temporary workers will never bring any funding to the local NHS.</p> <p>5.18 EDF should therefore be asked to provide funding for services over the period (to 2015) for all new residents and on an ongoing basis for temporary workers who do not register.</p> <p>5.19 The current level of funding suggested in the Proposed planning requirements and obligations consultation document is insufficient to meet expected requirements.</p> <p>5.20 This cost can be offset by the provision of onsite primary care services that are equivalent to NHS services.</p>	89461-161-7154	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.3 We believe that the described impact on health facilities must reflect the total numbers of additional resident population arising from the construction phase of the development. Using the experience of Sizewell B it is estimated that 25% of workers will bring partners with an average 1.9 children per family. This would therefore result in between 5,175 and 5,838 additional residents placing demand on health facilities during this period.</p>	89462-161-1292			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.6 The main acute hospital serving the area affected by the development is Musgrove Park Hospital in Taunton. The northern edge of the Sedgemoor area also sees Weston General Hospital in Weston-Super-Mare as its local acute hospital.</p> <p>6.7 The consultation documentation references the catchment population for Musgrove Park Hospital as being 340,000 and suggest that the additional demand of 3,000 - 3,500 attracted by the development would have an approximately 1% impact on the demand for services in this area. We believe that when the additional family members are included in the calculation the impact increases the resident population by between 1.5 and 1.7% and therefore should be categorized as a moderate impact.</p>	89462-161-2615		/		

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.11 The consultation document suggests that the incoming population will predominantly live in the Sedgemoor area and would therefore place a significant demand on the Bridgwater Community Hospital.</p> <p>6.12 The socio-economic study suggests that the increase in the Bridgwater population would be between 2,189 and 2,547 dependent upon the level of local recruitment. This would result in an increase in demand for services within the local community of between 6.0% and 7.0%.</p>	89462-161-4516			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.13 The impact of the development on the Bridgwater health demand clearly falls within the major category and therefore we believe should be mitigated through the contribution of funding towards meeting the additional demand caused.</p> <p>6.14 As you will be aware the health service funding mechanism involves allocation of revenue funds from central sources, which is based upon the stable population base, and capital funds which we receive again from central funds on the basis of successful business cases and to a lesser extent the population base we cover. The significant medium term fluctuations in resident population, such as you describe in your Consultation Document, would take some time to be reflected in our budgets and would result in revenue funding pressures during this period.</p> <p>6.15 NHS Somerset is currently in discussions regarding the capital in respect of Bridgwater Hospital development and this is seen as the key priority for us over the short term. We are therefore keen to progress discussions on options to mitigate the effects of the Hinkley Point C development regarding a contribution to the capital funding of the new Bridgwater Hospital. This would allow funding to be more clearly linked to the construction phase of the Hinkley point development which is where the distorting impact of the development on local health services will be most keenly felt.</p>	89462-161-5020	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>6.16 The investment of a capital contribution to the Bridgwater Hospital scheme would not only allow the NHS the physical capacity to meet the additional demand caused by the influx of workers and their families but would also provide a unique opportunity for EDF to provide a lasting legacy to the local area.</p>	89462-161-6449		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>9.2.6 The current level of funding suggested in the proposed planning requirements and obligations consultation document is insufficient to meet expected pressures on primary care and hospital services (5.1; 6.15)</p>	89463-161-6298			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	No assessment is provided in relation to how the project might affect admissions into key services targeted under the Somerset Community Strategy.	89338-161-17777			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Proposed population growth through residential developments in the area and proposed improvements to healthcare facilities are referred to in the health needs assessment. However the HIA does not state whether there are any other developments that could give rise to cumulative health impacts.	89410-161-3077	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	A health needs assessment has been undertaken to estimate the amount of primary healthcare provision needed for the temporary, non-home-based construction workforce. This is based on assumptions about the number of individuals and families expected to register with local GP practices. The assessment considers that there will be no significant impact on the capacity of local hospitals, as the peak construction phase will increase the population served by local hospitals by 1%	89415-161-39			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal of construction worker health needs estimates that 30% of the non-home-based workforce will register with a local GP, based on experience at Sizewell B. It is considered that, rather than basing estimates on previous projects where uptake may have been low, the non-home-based workforce should be actively encouraged to register with a GP and needs assessed accordingly	89415-161-523		/		
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal (paragraph 5.9.5) states that the construction workforce, being largely within the 35-55 age bracket, will exhibit a relatively low hospital admission rate. However further consideration should be given to other features of the non-home-based workforce which may give rise to particular health needs such as drug and alcohol related conditions, or mental health issues linked to low levels of social support for workers living away from home for prolonged periods	89415-161-912	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	In addition to considering the needs of the construction workforce, the HIA's health needs appraisal should assess potential changes in the health needs of existing communities resulting from the development. While Section 5.8 of the HIA states that it seeks to address the "current health care capacity within the three immediate districts" (para 5.8.3), assessment presented is limited. The assessment appears not to take into consideration or respond to local health needs identified through its community profiling as discussed in Section 3 of the HIA. Furthermore, consideration is generally afforded to the area covered by Somerset PCT as a whole, with local variations in provision, access and health equality within the "three immediate districts" not addressed. The HIA fails to identify those particular locations which will experience a change in need through increased demand for service and also by potential service provision. Consideration of need is also limited to general hospital and GP surgeries. The HIA fails to describe the effect of the scheme on other primary care services, such as dentist and pharmacy provision	89415-161-1394	/			
Tractivity 63031	Public	Stage 2 Update	These working hours will have untold affect on the physical and mental health of local residents.	89704-161-1072			/	
South West Strategic Health Authority	statutory consultee	Stage 2 Update	- the principal changes with respect to the public health considerations are drawn from the revised estimates of the temporary workforce, both home-based and non home- based. The revised numbers are slightly higher than those used for the Stage 2 response;	89707-161-761			/	
Taunton Deane Borough Council	Local authority	Stage 2 Update	As well as the implications on Taunton Deane's housing infrastructure, the increase density of population will also have direct implications for providers of local services, particularly in the public sector - education, health, policing, etc.	89741-161-5909			/	
Holford Parish Council	statutory consultee	Stage 2 Update	Holford Parish Council is very concerned that the effect of the sudden increase in the local population will have on existing overstretched health care facilities - in particular, ancillary facilities for example, dental care, podiatry and diagnostic procedures such as laboratory support and scanning techniques. The area already has a high proportion of elderly residents and waiting times for many services seem set to increase with no prospect of improvement in these kinds of service.	89750-161-1871	/			
Selworthy & Minehead Without Parish Council	statutory consultee	Stage 2 Update	Councillors and the electorate they represent are concerned at the enormous impact the building of the proposed power station will have on the already overloaded road system, school places, doctors, dentists and other services and facilities.	89753-161-783			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset	Non-statutory consultee	Stage 2 Update	NHS Somerset notes consideration being given to provision of more permanent housing, to be occupied by project workers in the short term before being handed over to registered social landlords on completion of the construction phase. Any such developments should include a s106 agreement contribution to health care provision in the planning consents.	89773-161-2551		/		
27	Comments received under the EIR from the IPC	Stage 2	- Schools, hospitals and emergency services will be pushed to breaking point	89816-161-8383			/	
Tractivity 1333	Public	Stage 2 Update	Impact on increased population using local health facilities and emergency services, whilst difficult to judge what the impact will be, need to have a flexible approach to support any additional burden placed on these services. This additional use of health services could also include the impact of these changes on local residents health and their use of health services leading to increased stress, increased prescription useage, need for counselling services etc. etc,	89599-94-311	/			

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	The HIA should acknowledge the potential need and reliance of some individuals on voluntary community groups. Engagement and involvement of Somerset Racial Equality Council within the health action plan is recommended. The project should not underestimate the resources required to support new families to integrate in a moderately isolated community such as some areas of Sedgemoor and West Somerset and ensure appropriate access to social, community and health support. A key factor will be registration with health services such as the doctor and dentist. Past experience had demonstrated that proactive encouragement to register with health services pays dividends in reducing reliance on emergency services and improving the quality of life of the individuals concerned.	89460-162-2333			/	Consultation responses sought more information on the potential impact on demand for school and social care services. One response also advocated recognition of the role of voluntary community groups. The Health Action Plan outlines the healthcare contributions allocated to cover any residual impact on health services such as primary care. The impact on school places and early year's services falls outside of the scope of the Health Impact Assessment and has been addressed through Chapter 9, Volume 2 of the Environmental Statement. This Chapter also includes a gravity model which estimates the distribution of families during the construction phase.
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	28. Although the information provided in the consultation document provides a useful overview of need and distribution, it does not provide enough information to enable the impacts upon school places, early year's services and adult social care to be fully scoped out and planned.	89844-162-12688		/		Following the Stage 2 consultation process an occupational healthcare provider has been appointed. As part of this service, all employees will undergo pre-employment health screening to ensure that members of staff are fit to work. Due to the nature of the project the impact on adult social services is anticipated to be minimal, as non-home based workers would not require the services offered by adult social care.
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	29. The concentration of the workforce within designated campuses will have an effect upon the area in which they are located. Any negative impact is likely to be felt acutely within the local schools and the Social Care teams. We require additional information which assesses the likely numbers of school age children and the indicative distribution of families at peak construction. This highlights the need for further discussions between the Council and EDF about the level of mitigation that will be required.	89844-162-12971			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 62206	Public	Stage 1	I object to proposals for the largest UK nuclear power station due to my concerns over: 1) Health risks from radioactive emissions 2) Risks of leaks, accidents, terrorism	9428-165-37			/	<p>Consultation responses at Stage 2 identified the need for the off-site countermeasures in the event of an off-site nuclear emergency at an existing nuclear site (HPA or HPB) to accommodate up to 5000 additional workers at HPC. The emergency plan in place to cover this situation would therefore need to be enhanced to provide sheltering and evacuation for substantially increased numbers, together with any lessons learned from experience at Fukushima, with training and exercising demands on a range of agencies and consequent financial impacts. Separately, consultees identified potential pressure on hospital provision resulting from construction accidents.</p> <p>As a condition of their nuclear site licences, emergency arrangements have been in place around Hinkley Point for many years as required initially for Hinkley Point A and subsequently Hinkley Point B. These cover both the operators and external agencies including the emergency services, safety and environmental regulators and the relevant local authorities.</p> <p>Appropriate plans would be put in place to accommodate the construction workforce within these</p>
Tractivity 62239	Public	Stage 1	I object to proposals for the largest UK nuclear power station due to my concerns over: - Health risks from radioactive emissions - Risks of leaks, accidents, terrorism	9438-165-34			/	
Tractivity 62240	Public	Stage 1	object to proposals for the largest UK nuclear power station due to my concerns over: - Health risks from radioactive emissions - Risks of leaks, accidents, terrorism	9439-165-34			/	

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>7.4 During the peak phase of construction there will be around 5000 people working at the Hinkley Point C site, this will result in a new off-site plan having to be developed to ensure all immediate counter measures are able to offer appropriate protection to all 5000 workers.</p> <p>7.5 Changes to the plan will need to include:</p> <ol style="list-style-type: none"> 1) Sheltering facilities for up to six hours for the workforce 2) Sufficient stocks of Potassium Iodate Tablets for the workforce 3) Evacuation arrangements to evacuate the workforce, alongside the residents 4) Traffic control measures to ensure construction traffic does not adversely affect the evacuation from the site 5) Transport strategy to evacuate workers, due to their own vehicles being located at Park and Ride locations 6) New training and exercise programme to ensure workers and visitors understand how to respond in the event of an off-site nuclear emergency and are briefed on the reason for taking the potassium iodated tablets and the correct dosage. <p>7.6 This additional provision will put an extra burden on the Emergency Planning Community in terms of resource time and costs associated to developing, training and exercising a new off-site plan.</p> <p>7.7 The complexity of managing a further 5000 people during the response to a off-site nuclear emergency should not be underestimated and will have a direct impact on health and social care in terms of providing shelter, medication, primary and secondary care and psychological support to those affected by the evacuation.</p> <p>7.8 Up to 3000 - 3500 of the workforce will be living in rented accommodation across Somerset, plus there will be up to 900 in temporary accommodation onsite; therefore during the worst case scenario where a return to site is no longer an option, the workforce will need to be repatriated.</p> <p>7.9 Further work and clarity is need from EDF on how they plan to provide financial support and care for its workforce during an off-site nuclear emergency, both in the short and long term.</p>	89463-165-1506	/			<p>arrangements. These contingency plans are not outlined in detail within the Health Impact Assessment but would be developed following a formal decision from the Infrastructure Planning Commission.</p> <p>The residual impact from referrals to the NHS has been modelled and a financial contribution identified through consultation with Somerset Primary Care Trust and this includes provision for acute care.</p> <p>Following the events in Fukushima, Japan the Secretary of State for Energy and Climate Change, Chris Huhne, requested Dr Weightman, HM Chief Inspector of Nuclear Installations, produce a report to the government on implications and lessons for the UK nuclear industry. Dr Weightman's interim report was published in May 2011. Recommendations put forward through the final report, due in late 2011, will be implemented by EDF Energy.</p>

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The HIA assessment considers that there will be no significant impact on the capacity of local hospitals. The authorities believe that this is very unlikely to be case as there is likely to be significant additional pressure on hospitals from construction related incidences and accidents associated with the project. Obligations will be needed to secure sufficient funding for improvement to the services offered by hospitals that will be used by the Hinkley C construction workers.	89420-165-10652	/			
NHS Somerset	Non-statutory consultee	Stage 2 Update	One final note which is not strictly part of the pre-application consultation is the impact of the recent earthquake and tsunami in Japan. NHS Somerset would like to seek assurance that the lessons learned from this tragedy will be incorporated in the Hinkley Point C project.	89773-165-5834			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Tractivity 1237	Public	Stage 2 Update	Medical and educational facilities to increase in line with the expected increase in population.	89503-163-110			/	Consultation responses at Stage 2 noted the pressure on Bridgwater healthcare provision, including dentists, and the upcoming retirement of a number of GPs. Concerns were expressed on the potential impact of HPC workers on waiting times for specialists, and on the lack of benefit of existing planned enhancements within Somerset where these are remote from Hinkley Point. A number of consultees favoured EDF Energy's provision of on-site services to mitigate these impacts, though others advocated enhanced facilities also open to the wider community. One public consultee sought inclusion of an epidemiological monitoring capability.
Tractivity 1244	Public	Stage 2 Update	Will EDF have their own medical centre (so as not to drain local Dr's/health services).	89510-163-337	/			
Tractivity 1339	Public	Stage 2 Update	The overview indicates that residents of Bridgwater town will face a gross overloading of roads, utilities and medical services	89605-163-3279			/	Following the Stage 2 consultation, an occupational healthcare provider has been appointed in order to appropriately address the needs of the construction workforce. The services proposed have been outlined within the final Health Action Plan (HAP). This covers health prevention and promotion campaigns and health surveillance programs for the construction workforce, reducing the burden on NHS services.
Tractivity 378	Public	Stage 1	1. Any upgrades to the healthcare system would be very welcome, particularly significant investment in additional specialists and state-of-the-art medical equipment. Specialist healthcare in the West Country has traditionally been centred on Bristol and Plymouth hospitals. An upgrade of facilities at Musgrove Hospital would benefit all the communities affected by EDF's Hinkley project. A boost to local primary healthcare would also be of benefit as the project is likely to increase Williton's population by around 10%.	9346-163-6095	/			The residual impact of NHS referrals has been modelled and the approach outlined and discussed with the Primary Care Trust (PCT). The subsequent healthcare contribution considers both primary and acute care, and emergency services. This would remove any additional burden and associated cost from the NHS, helping to maintain local services.
Tractivity 441	Public	Stage 1	9. What are your views on EDF Energy's general approach to community benefits and do you have any specific suggestions about what should be included in the package? There is real concern about the health effects of living near a nuclear power station, so be proactive and include both a health centre (run by local GPs) and a centre for ongoing epidemiological research & monitoring. Include the effects of traffic (moving fuel in and low-level waste out) as well as the station itself.	9120-163-4872	/			The residual impact on NHS services is not of a magnitude to require a capital contribution for health infrastructure. In addition the per-head healthcare contribution made for each NHS referral includes provision for specialist services as it is based on the per head expenditure outlined by Somerset PCT. The Health Impact Assessment (HIA) has identified the possible future reforms to the NHS including the anticipated abolishment of PCTs in 2013. The Health and Task Finish Group, who supported the development of the HAP, include both the PCT and the bodies likely to inherit responsibility for public health, including Sedgemoor District Council and Somerset County Council, thereby constituting a
Holford Parish Council	Statutory Consultee	Stage 2	The Parish Council is very concerned that existing overstretched health care facilities - in particular ancillary facilities such as dental care, podiatry, and specialist provision, will have a detrimental impact on a population which already has a high proportion of elderly residents. EDF Energy proposals may well cover routine matters of health and social care, but are likely to create longer waiting times for specialist facilities.	10224-163-3134			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	<p>Workers who register temporarily with GP practices will significantly drain the local health economy without any reimbursement from National resources. Similarly there is no additional funding for weekend and out of hours services at the Minor Injuries Unit (MIU) or the Clinical Assessment and Treatment Unit (CATU) situated in Bridgwater Community Hospital. Nor is there any provision by NHS Somerset for the increased drain on Community Services such as Midwifery, Health Visiting or Community and District Nursing to cope with the additional work load of an influx of temporary workers and their families.</p> <p>We largely agree with the potential implications described in Table 2.2, Project profile Summary and Health Impact Appraisal Scope. It should be noted here that the construction phase will bring significant extra drain on health resources and prescribing when both budgets are being cut. Without additional resources Practice Based Commissioning budgets will not cope with the extra burden. This could lead to local GP service providers closing their lists to new patients or having their contracts revoked where budgets are exceeded, with the subsequent loss of medical provision, all of which would have a compounding negative effect on the delivery of local health services.</p> <p>The NHS budgets for an appropriately sized GP surgery to look after the influx of workers, as envisaged by EDF, at the height of the construction phase, would be in the excess of £4 Million per annum, this would provide for service level agreements with acute trusts, community hospitals, prescribing and other community services. This funding will remain in the workers constituent PCT unless they register with a local practice. Despite growth in surgery list sizes, NHS prescribing budgets for surgeries are reducing year on year, this sudden increase in temporary residents and their drain on resources would not be manageable at a practice level, even in the larger practices.</p> <p>A surgery budget, in addition to that above, would in excess of £500,000 for provision of primary care medical services and facilities, such as GPs, Nurses and other family health services. Though EDF promise some medical facilities it is doubtful that they would match that provided by the NHS and a more detailed submission is required from EDF.</p> <p>This additional burden on the local health economy of in excess £4.5 Million per annum, which does not include dental or dispensing costs, needs to be addressed by EDF and NHS Somerset prior to commencement of any works.</p> <p>Consideration should also be made to provide medical cover in the community, as opposed to in a private facility, so as to ensure an equitable standard of health care provision. A 24/7 GP walk-in centre would provide for the needs of EDF and the wider Bridgwater Community.</p>	10271-163-7922	/			<p>change management group.</p> <p>The health and well-being of the local community has been assessed and addressed through the Environmental Statement (ES) and HIA. The HAP provides an overview of the initiatives put in place through the ES to protect and promote good health, and this is supplemented with additional recommendations to help improve local circumstance.</p>

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	<p>Table 5.7</p> <p>EDF anticipate in their paper that during the peak building phase there will be an influx of approx 3000 workers to the area, 400 of whom are anticipated to bring their families, the remainder will live in construction campuses (1080) or in rented/private accommodation (1590). We question this conservative assessment especially when EDF themselves revise this estimate sometimes quoting 3300 and most recently on the Local News at 5000. The provision for substantial additional funding for public projects should be included in the planning consents should the EDF ceiling of 3000 new workers is breached.</p> <p>Interpretation of EDFs figures shows a potential 1600 new patients registering in the Federation area for primary care provision and an additional 1600 temporary residents on practice lists. The remaining 1000+ being treated at EDFs own primary care facilities, details of which are lacking and must be disclosed for scrutiny. The potential capacity increase in GP list size is limited to 1650 according to EDF and there is no reimbursement for caring for temporary resident workers who reside in the community and are more likely to approach a local GP surgery than an EDF facility. EDF has shown that there is insufficient capacity for health care provision within the area and substantial investment is required.</p> <p>EDF states that many of the workers will return home at the weekends. Does this mean there will be no weekend construction working? For Primary Care purposes this is not relevant as medical centres operate Monday to Friday, so these 'weekly boarders' will inevitably need to register locally as would those whose commute is not reasonably possible due to distance. Those who choose not to return home for weekends will continue to cause a strain on NHS out of hours providers. Again no mention is made of how EDF will tackle this problem and the provision of a 24/7 GP walk in centre should be considered.</p>	10271-163-14116			/	

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	<p>Table 5.8 GP Capacity</p> <p>This table shows a capacity of 1650 additional patients within 10 miles of Hinkley, a shortfall of 2850 which is not entirely accurate as some of the surgeries shown are not readily accessible to workers from the campuses. For example the new Burnham-on-Sea Surgery in Berrow, which though relatively close by line of sight, by road, is an entirely different matter.</p> <p>What has not been identified is that there are 12 GPs (30% of the GP workforce) due to retire within the next 5 years and replacement is problematic in this area, this will compound the limitations imposed by sheer patient volume in our area.</p> <p>5.8.10 NHS Somerset is indeed investing heavily in new GP Practice's, however the 32 surgeries being replaced are not all in the Hinkley Point catchment area, though it is acknowledged that Brent House Surgery will have additional capacity soon. The St James Surgery and the Yeovil GP led Health Centre are also totally irrelevant as patients are unlikely to drive past the Bridgwater MIU or A&E in Taunton, especially since Yeovil is an hours drive away.</p>	10271-163-17705			/	
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We recommend a more joined up approach be made by EDF and NHS Somerset in co-operation with other local health stakeholders, to create a new GP led Community Hospital and Health Centre offering a wide range of services, to replace the existing (WW1 vintage) hospital and provide adequate capacity for the construction workforce and for the local population for the duration of the operational life of Hinkley Point C and beyond.	10271-163-25824		/		
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	Account also needs to be taken of the new arrangements for primary health care following the abolition of the PCT (Primary Care Trust).	89189-163-11163	/			
Stogursey Parish Council	Statutory Consultee	Stage 2	[5.8.10] How does a new surgery at Dulverton and Milborne Port plus a new facility at Yeovil have any relevance to health care local to Hinkley Point?	89293-163-14164			/	

Respondent Reference	Respondent Type	Consultation Stage	Comment	Comment ID	Change	No Change	Noted	EDF Energy Response (Begins at first page of Topic)
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.9 In order to provide primary care services suitable buildings and personnel are required.	89461-163-3833			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.10 This additional capacity has been planned to provide services to the growing population of Bridgwater and the surrounding area. Whilst the building capacity is sufficient to provide services to the residents of new housing it is not sufficient to also provide services to all the temporary workers expected.	89461-163-4359			/	
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.11 In addition to the surgery buildings GPs need to be recruited with their supporting clinical and administrative teams. A full time GP would be required to provide services to the estimated registered population of 1,552 to 1,811 people and up to 2.5 further GPs could be required to provide services to all the temporary workers (up to 6,038). 5.12 The provision of comprehensive onsite primary care services could be a significant mitigating factor in offsetting the impact on existing services as well as providing better access for the temporary workers. NHS Somerset would therefore recommend that in addition to nursing services a regular GP service should be provided that amounted to between two and three GPs. Discussions could be undertaken with NHS Somerset and the Bridgwater Federation of GP practices as to the provision of this service.	89461-163-4675		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.13 Bridgwater has been identified as an area with below average NHS dental capacity and as a result a new practice has been commissioned for the South Bridgwater area to open in 2011. This will provide 14,000 additional Units of Dental Activity (UDAs) . However, this is unlikely to be sufficient to cover the current shortfall in capacity, the growth in population and additional temporary workers. The capacity required to provide dental services to 3,622 temporary workers is just below two full time dentists with the associated dental capacity.	89461-163-5537	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	5.16 Optometrists are mainly based on the High Street and it is estimated that the additional activity can be accommodated through existing outlets. Unlike other primary care contractors, NHS Somerset has relatively little influence on the establishment of new providers, who can set up where they deem appropriate subject only to an inspection of their premises and holding the relevant qualifications.	89461-163-6723			/	

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	health is dealt with as a headroom issue under "Pressure on local social conditions and associated services" and is deemed to be of minor (neutral) effects on the basis that the project's design includes measures to either internalise new demand through the "on site" medical centre or compensate affected General Practitioner practices. The effect of recently announced reforms on the funding of GP provision has not been reviewed. The Obligations Chapter also includes a sum to cover pressure on non GP related health services.	89339-163-10160			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The assessment also fails to afford specific consideration to accessibility of services. The Hinkley Point C site is situated in a rural location and as such accessibility to primary health care in the surrounding communities will be relatively low compared with urban areas. When planning on-site medical facilities, EDF Energy should give full consideration to the needs of the surrounding communities as well as the temporary construction workforce, to avoid giving rise to inequalities in the availability of health care provision.	89415-163-2537			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The HIA and Obligations are based on providing for the needs of the construction workforce, based on assumptions about the number of individuals / families likely to register with local GP practices with very little consideration on the impacts on the health and welfare of existing communities, in particular those communities that will be directly affected by the construction of the project.	89420-163-9367	/			
Tractivity 62998	Public	Stage 2 Update	Existing Health centres will not cope.	89692-163-1752			/	

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Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We strongly support the Chief Executive of Sedgemoor District Council's call for EDF to support a new Community Hospital. (Personal details removed) has correctly identified that the current Hospital is inadequate and that an improved capacity is required to cope during the lifetime of Hinkley Point C.	10271-164-16439		/		<p>Consultee responses at Stage 2 advocated EDF Energy support for a new community hospital in Bridgwater.</p> <p>Following the Stage 2 consultation an occupational healthcare provider has been appointed to address the healthcare needs of the construction workforce. The services proposed have been outlined within the final Health Action Plan. This covers health prevention and promotion campaigns and health surveillance programs reducing the burden on NHS services.</p> <p>The residual impact from NHS referrals has been modelled and the approach outlined and discussed with the Primary Care Trust. The subsequent healthcare contribution considers both primary, acute care and chronic care. This would remove any additional burden and associated cost from the NHS, helping to maintain local services.</p> <p>The residual impact on NHS services is not of a magnitude to require a capital contribution for health infrastructure.</p>
Federation of Bridgwater Practices	Non-Statutory Consultee	Stage 2	We recommend a more joined up approach be made by EDF and NHS Somerset in co-operation with other local health stakeholders, to create a new GP led Community Hospital and Health Centre offering a wide range of services, to replace the existing (WW1 vintage) hospital and provide adequate capacity for the construction workforce and for the local population for the duration of the operational life of Hinkley Point C and beyond.	10271-164-25824		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	6.10 This business case clearly demonstrates the urgent need for the replacement of the hospital in order to provide a service to the existing population of Bridgwater and the surrounding area. It takes no account of the impact that will be caused should there be a significant increase in the resident population, such as the one described in your consultation document. The level of additional demand that would be generated by this influx of workers and families would not be manageable within the existing hospital but could be sustainable within the planned new hospital but is additional to the current activity modelling.	89462-164-3884		/		
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	<p>Potential Legacy Opportunities</p> <p>6.16 The investment of a capital contribution to the Bridgwater Hospital scheme would not only allow the NHS the physical capacity to meet the additional demand caused by the influx of workers and their families but would also provide a unique opportunity for EDF to provide a lasting legacy to the local area.</p> <p>6.17 In addition to the positive effect this would have on the local health services it would offer an excellent opportunity for EDF to demonstrate their commitment to enhancing services for the wider local community. We would be very keen to consider the potential benefits that can be derived to all parties by such an approach.</p>	89462-164-6415		/		

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Tractivity 62508	Public	Stage 2	Although EdF have taken into account the wellbeing and health of the workers living in campus/hostel accommodation, no account of their cultural or religious needs have been made.	10098-168-7036			/	Local authority responses at Stage 2 identified the need to recognise the cultural and religious needs of incoming campus residents and to integrate them with the local community, and equally to address the adverse impacts on Bridgwater in particular, with further clarity on the cumulative impact of the three campuses, the demand on schools and social care, and the legacy remaining when construction is complete.
Tractivity 62508	Public	Stage 2	It is recognised "once" in the consultation document, that there will be EU workers on site. This is mentioned in context of the educational needs of children, whose first language may not be English. It should be considered that their religious beliefs may differ, as well as their cultural needs.	10098-168-7219			/	
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	11. With regard to community cohesion, the issue of the proposed accommodation strategy is particularly acute, together with ensuring that new migrant worker populations are appropriately integrated within existing communities. In addition, there needs to be a comprehensive 'Welcome to Somerset' programme for migrant workers and their families, beyond the corporate induction process.	89189-168-9884		/		As reflected in the Health Impact Assessment (HIA) the location and size of the proposed accommodation campuses changed following the Stage 1 consultation process. The campuses would still incorporate a range of facilities enabling them to remain relatively self contained and reducing demand on local amenities and services. Furthermore sport facilities at the accommodation campuses would be open to the general public. The health pathways include the potential change in population structure and implications for local amenities. To add clarity the table of health pathways in the HIA (Table 2.2.) has been updated to include a column signposting to the relevant section where the impact has been assessed and, if necessary, mitigated.
Stop Hinkley	Non-Statutory Consultee	Stage 2	Isolated foreign worker communities A Swedish report into conditions at the Olkiluoto nuclear construction site in Finland shows that immigrant workers are exceedingly and despairingly isolated, unable to effectively access local infrastructure such as medical services. As a result they become highly dependent on the nuclear employer.(29) Although the EdF consultation points to supporting local health services there is an omission in terms of facilitating the immigrant workers' inclusion and integration into the local community. This would seem to be imperative to enable some cohesion.	89451-168-3810			/	Mitigation measures and legacy benefits have been outlined in the HAP; this includes an overview of initiatives presented through the Environmental Statement (ES) which promote and enhance social integration. This includes the use of recreational facilities, the worker code of conduct and the accommodation strategy.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.7.21 lists a number of potentially significant impacts from the accommodation campuses prior to mitigation. However the subsequent appraisal does not clearly identify the mitigation measures and residual effects in relation to these potential impacts.	89414-168-14712	/			Furthermore, since the Stage 2 consultation the 'Main Site Neighbourhood Support Scheme' has been announced. The scheme puts forward a Property Price Support and Noise Insulation Scheme for residents of local hamlets in closest proximity to the Hinkley Point C Development Site; an overview is included in the Health Action Plan. In addition the Community Impact Fund of £20 million to be administered by a board of eight representatives, with two each from West Somerset District Council, Sedgemoor District Council, Somerset County Council and EDF Energy, will be spent on local initiatives which support the community and improve integration.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	With regard to the former Innovia Factory accommodation, it is not clear whether the facilities provided for the construction workers (e.g. medical facility, IT facility) will be shared with the local community. As the campus is located within a relatively deprived ward it is considered that this community could benefit from the shared use of these facilities.	89414-168-15853	/			The cumulative impact of the facility has been considered through the Cumulative Assessment (Volume 11 of the ES) which includes information on

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.7.30 states that the introduction of a large male population into the local community has the potential to lead to poor social integration and unrest. This issue should be explored in more depth within the appraisal and the potential effects on the health and quality of life for local residents more fully described. The likely residual effects following the implementation of the mitigation described in the Health Action Plan should then be appraised.	89414-168-16219		/		access to amenities.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The statement in paragraph 5.7.31 that increasing local expenditure will 'address local pockets of inequality, deprivation and associated burdens of poor health' is considered to be a bold statement, requiring further evidence. While increased expenditure by the construction workforce will benefit local businesses, it is not evident that these benefits will be targeted towards the most deprived sections of the community and address inequalities.	89414-168-17082	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The College Road / Bridgwater and Albion Rugby club campus will be relatively small and have a relatively low level of impact compared with the other campuses. However the cumulative effects of the two Bridgwater campuses together with the workers from the Hinkley Point campus accessing Bridgwater facilities via the bespoke bus service should be assessed. The separate assessment of the three campuses does not enable the total impact on Bridgwater to be quantified.	89414-168-17790			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	It is not clear what, if any, legacy will be left for the community of Bridgwater and other local communities following the construction phase.	89414-168-18262	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal focuses on the overall beneficial effects on income and employment opportunities, but some individuals and communities will also suffer adverse effects, including: - Housing blight for residents close to the proposed Hinkley Point C site; - Businesses catering to tourists who may be displaced by the construction workforce residing in bed and - breakfast and caravan accommodation; - Adverse effects at the end of the construction periods, when demand for local shops and services is likely to dip.	89415-168-3729	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The environmental impacts of construction activity on residents that are located near to the main site, associated development sites and main transport routes (such as impacts associated with noise and air emissions and light pollution) will need to be minimised and mitigated. Where the health, amenity and well being impacts cannot be satisfactorily minimised or mitigated then the authorities will require suitable compensation for the loss of amenity and impacts on health and wellbeing. This compensation could take several forms, including funding for improved health facilities, promotion of healthy lifestyles and funding for sport, recreation and community facilities to be used by the local communities.	89420-168-11139	/			
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	29. The concentration of the workforce within designated campuses will have an effect upon the area in which they are located. Any negative impact is likely to be felt acutely within the local schools and the Social Care teams. We require additional information which assesses the likely numbers of school age children and the indicative distribution of families at peak construction. This highlights the need for further discussions between the Council and EDF about the level of mitigation that will be required.	89844-168-12971		/		

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	4.22 Any improvements in the socio-economic status of the area, in particular the provision of stable, well paid employment opportunities, might be expected to mitigate any additional demand on mental health services to an extent. Evidence suggests that employment is good for one's mental well being and can also aid recovery for those who have a mental health problem.	89460-167-13226			/	Feedback from the Stage 2 consultation highlighted the link between well paid employment opportunities and mental well-being – though concern was identified on the potential for friction due to disposable income differentials between workers and the local community, and on the sustainability of local benefits when construction ends.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	we consider this evaluation would benefit from further justification of the health benefits facilitated by employment during construction, and the sustainability of these benefits following cessation of construction activities	89412-167-11129			/	Following the Stage 2 consultation the Health Impact Assessment (HIA) has been updated to include an assessment of community well-being. This presents a range of wider health determinants which influence well-being, including the mental health benefit of financial security through increased employment opportunities. The mental health toolkit produced by the National Mental Health Development Unit has been used to inform the assessment within the HIA. The National Mental Health Development Unit is funded by the Department of Health to provide advice on implementing mental health policy to national and international standards.
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	While increased expenditure by the construction workforce will benefit local businesses, it is not evident that these benefits will be targeted towards the most deprived sections of the community and address inequalities.	89414-167-17310			/	A number of initiatives would be put in place to maximise opportunities for local people to gain employment during the Hinkley Point C Project. These include an Employment Outreach Programme, which is a separate initiative to the HIA, and a training and education programme offered through Bridgwater College.
Stogursey Parish Council	statutory consultee	Stage 2 Update	2.2.14. [7.4] Strict disciplinary measures will be necessary in the event of workers breaching the code of conduct, to ensure high standards of behaviour are maintained. EDF need to be aware that in general the surrounding area is a low wage area and the construction workers are likely to have considerably more money to spend than the locals. This will be a source of friction which needs to be carefully considered.	89872-167-10140	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The assessment of the non-home-based workforce in private accommodation includes both private rented and B&B accommodation (para 5.7.8). According to Table 5.7 the total number of workers in this type of accommodation is 1,590 (780 in private rented, 810 in B&B) for the 60% non home-based worker scenario. It is noted that this is inconsistent with the figures set out in Table 8.38 of the socio-economic assessment chapter of the Environmental Appraisal (780 in private rented, 780 in B&B/guesthouses/caravans etc.), although the discrepancy is minor.	89414-169-13732	/			<p>Consultation responses expressed concern at the health impact of potentially poor heating / insulation standards of "latent" accommodation outside the (summer) season, and also noted a minor discrepancy in projections of non-home-based workforce in private accommodation.</p> <p>To help prevent the uptake of substandard homes the accommodation office would support the workforce to find suitable accommodation. In addition a housing fund would be available to provide a range of measures including bringing empty homes back into beneficial use through improvement grants and subsidising affordable housing. An increase in communicable disease has been associated with living in overcrowded conditions. The occupational healthcare provider now appointed by EDF Energy will collect data on the incidence of communicable disease amongst the workforce to identify and manage any change in prevalence.</p>
NHS Somerset	Non-statutory consultee	Stage 2 Update	This means there will be greater reliance on existing underused and 'latent' accommodation. From a public health perspective this raises concerns about housing standards. Standards in the private rented sector are generally not high, with a substantial proportion of the housing stock failing to meet the decent homes standard. Typically this is due to poor heating and insulation. This will be of particular concern where holiday homes and caravans are utilised off season, and appropriate measures should be sought to ensure minimum standards are met. The proposed accommodation office could set the benchmark by requiring prospective landlords to confirm that their accommodation meets the decent homes standard. However, workers may seek to make their own arrangements bypassing the accommodation office, and thus in some cases occupy poor housing or inappropriate caravans etc. There could be increased demand on local authority environmental health officers to deal with substandard accommodation, if preventive measures are ineffective.	89773-169-1504			/	<p>The distribution of the non-home based workforce has been updated following the Stage 2 consultation process. The small irregularity between the Health Impact Assessment and socio-economic assessment is noted; prior to publication the assessments are cross-checked to ensure consistency and this has been applied to the final assessment.</p>

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Tractivity 1124	Dual - Consultee with an Interest in Land and Public	Stage 2	4. Any other ideas or comments? No consideration has been given on the impact of such a huge influx of workers on local services and the local community. There are too many health and safety issues not answered or considered.	9882-166-1778	/			Public, PCT and local authority consultation responses at Stage 2 highlighted the social and cultural impacts of non-home-based workers, particularly the potentially adverse impact on women, the importance of supporting integration with the local community – not least to capture economic value from local spending, while recognising the potential for friction due to differential disposable incomes – and the need to consider the potential ethnic / cultural groupings within the workforce. Clarification was sought of the term ‘enhanced social capital’.
Tractivity 1282	Public	Stage 2 Update	Q2 Do you have any comments on our updated accommodation proposals? Work/life balance must be a major concern? Listening leadership? During the project will give good productivity and mitigation in local surrounding communities.	89548-166-265			/	Although EDF Energy is working with the Local Authorities to maximise jobs for Somerset residents, the construction of Hinkley Point C will require workers to move into the area, mostly on a temporary basis. All workers on site will have a legal right to work in the UK and will be covered by UK employment law.
Tractivity 212	Public	Stage 1	6. Please give comments on your preferences and any suggestions about the future use of these facilities. We do not agree with agricultural land being used as an accommodation campus/freight/park & ride facility in Cannington (South) as it is a flood plain and far too near existing residential village family homes. It would increase our village size nearly half again. It has the potential to cause noise/light pollution 24 hrs/day. The anxiety/possible threat to homes etc perceived by the families/senior citizens alongside a campus of some 200 probably mainly men is not acceptable.	8917-166-2322	/			The profile also demonstrates that the workforce would consist predominantly of males aged 35-49 years. The range of on-site facilities available at the accommodation campus enables the facility to remain relatively self contained reducing demand on local amenities and services. Sports facilities would be open to the general public.
Tractivity 388	Public	Stage 1	6. Please give comments on your preferences and any suggestions about the future use of these facilities. An influx of huge numbers of workers from all over Europe and Asia is not an option in a small community. We were told years ago that cases of leukaemia were possibly due to a virus being introduced to the population, when Hinkley A and B were built, leading to a cluster of cases in this area. Now that we are so much better informed, compensation for any such cases would certainly be sought.	9073-166-2506			/	In addition the Worker Code of Conduct would highlight to the workers their role as ambassadors for the project through their behaviour and actions when in the community. Terminology used in the Health Impact Assessment (HIA) includes the phrase ‘social capital’ which refers to the opportunities to build networks and interact with other people in the community. The accommodation campus may improve social capital through creating new networks and improved socio-economic opportunities (direct/indirect/induced employment).
Tractivity 62508	Public	Stage 2	No mitigation packages have been proposed to offset the local impact of such a large influx of workers into such a small area, nor for the physical and psychological harm that will result.	10098-166-6690	/			The capacity of local health services has been outlined in the HIA (Chapter 5) and any residual impact on such services accounted for under the Health Action Plan. The HIA has been updated to include additional information for communicable disease; this incorporates sexually transmitted disease. Furthermore, following feedback from the consultation process, ambiguous terminology has been removed from the assessment.
Tractivity 62508	Public	Stage 2	Obviously it will not be possible to confine the workforce to the accommodation campuses, and there is concern that well paid foreign workers may be resented in a town with a low income base, and a poor educational/social standing. Similarly, the campuses will have all the facilities "on-site" to cater for the workers needs. This could be seen as a "them and us", and again, resentment of the workforce living in the campus accommodation.	10098-166-7839		/		The number of non-home based construction staff

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Tractivity 62469	Public	Stage 2	q) Concentrating the campuses in one small area in Bridgwater guarantees the maximum of detrimental social impacts, skewing the local gender balance unacceptably (up around 84% among men aged 30-64 in Sydenham) and pitting the Hinkley workers directly against the adult resident population and, in Sydenham, many of those will be unemployed or unable to compete financially, so resentments will grow.	89469-166-14124			/	referred to in the HIA is referenced to detailed modelling within the socio-economic assessment, within Chapter 9, Volume 2 of the Environmental Statement (ES). In contrast to the ES the HIA does not apply a set of significance criteria. Fixed significance criteria are not appropriate due to the variation in the parameters which define health particularly in relation to qualitative elements such as community well-being.
Tractivity 62469	Public	Stage 2	bb) There is absolutely nothing in the proposals for women except harassment, Sexually Transmitted Infections and diminished job prospects. The jobs will go overwhelmingly to men. The training will be for men. Women will be employed as cleaners or lap-dancers. Prostitution will boom and women will be trafficked. The best EDF is offering is funding for a construction competition for 14-16 year- old schoolgirls - an outrageously insulting token gesture! Encouraging girls to consider construction in the current climate as a career path is short-sighted, misguided and an example of politically-correct nonsense. (I speak as a woman).	89470-166-11343			/	
Tractivity 62469	Public	Stage 2	c) EDF's plans will bring in the additional problems associated with a workforce that is potentially made up of foreign nationalities and diverse ethnic origin. The economic contribution from English migrant workers is minimal as earnings are sent out of the region. Integration will be challenging. A foreign workforce also undermines the economic input as most earnings will be sent abroad. Although foreign workers themselves may have a good level of English, their families may not, if at all. We are not geared up for this in our schools or health facilities. As our schools are all inadequate, families here will reconsider the advisability of remaining if they encounter further problems impinging on the quality of their child's education. This may be another driver of migration out of the town.	89471-166-5971			/	
Somerset County Council	Dual - local authority, statutory consultee and consultee with an interest in land	Stage 2	Community cohesion: EDF's assessment is focused on the health of the workforce which, whilst important, does not address the healthy living or the physical and mental health needs of the surrounding communities. Further work is required to ensure community cohesion, including appropriately integrating new migrant worker populations within existing communities.	89196-166-10338			/	

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NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	Potential Social Impact from the Introduction of a Temporary Non Home based Construction Workforce 4.3 A key element which NHS Somerset identifies as deficient in this section is the socio-demographic modelling of the temporary workforce. Whilst we accept the projected workers numbers as a fair estimate we emphasise that underpinning the figures and estimates of the proportion that will be 'non home based' are a number of assumptions over the likely socio-demographic mix of the workforce. These assumptions need to be made explicit and we believe that the workforce impact should be modelled on a different scenarios in addition to the simple 30% or 40% recruited from the local (CDCZ) population. In particular the impact of different ethnic and or cultural groupings within the workforce should be explored further to ensure that appropriate support is available in the community and within EDF to meet specific cultural needs and expectations or the workforce and avoid sensitivities with the local community.	89460-166-1108	/			
NHS Somerset Primary Care Trust	Non-Statutory Consultee	Stage 2	9.2.3 The potential social impacts of the temporary construction workforce have not been adequately explored and require more sophisticated modelling of potential impacts and measures required to mitigate negative impacts. (4.18)	89463-166-5509			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Also, not addressed within the discussion, are the potential indirect health effects resulting from the introduction of temporary workforce into the area, realised through increased demand on health services, but also through related issues such the potential health effects from possible increase in violent crime, anti-social behaviour and sexual health issue.	89412-166-10159	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal of social impacts from the introduction of a temporary non-home-based construction workforce comprises a brief, commentary-level appraisal of each accommodation type and location. This section is difficult to follow, with conclusions 'buried' within the text and no clear criteria for defining the magnitude and significance of impacts.	89414-166-11651	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The appraisal contains a number of unsubstantiated conclusions, and refers repeatedly to significant 'unmitigated' effects on communities before concluding, without specifying what mitigation measures are assumed, that there will be no significant effects	89414-166-12005	/			

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	There are numerous separate health pathways associated with the presence of the non- home-based workforce in the community, which need to be separately identified and analysed. A number of potential health pathways are omitted from the appraisal, including: - Communicable diseases and sexual health; - Actual and perceived increase in crime and antisocial behaviour; - Relationships and potential tensions between the existing communities and the temporary workforce, which may deter the use of community facilities.	89414-166-12265	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.7.1 states that 'the type and magnitude of potential social outcomes are bespoke to individual communities, influence by their relative socio-economic status, demography, size, culture and to some extent, readiness to change'. The evaluation that follows does not appear to take account of these factors	89414-166-12795			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The assessment assumes 60% of the workforce will be non-home-based (para 5.7.3). It is not clear what this assumption is based on, although it is likely that this is related to a target for 40% of the workforce to be locally based. If this target is not achieved then the assumptions in section 5.7 may be underestimated.	89414-166-13115			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- Discrepancy between the level of services and facilities (restaurant, bar, gym, health centre etc) available to construction workers compared with the facilities available to local village communities.	89414-166-15646			/	
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.7.30 states that the introduction of a large male population into the local community has the potential to lead to poor social integration and unrest. This issue should be explored in more depth within the appraisal and the potential effects on the health and quality of life for local residents more fully described. The likely residual effects following the implementation of the mitigation described in the Health Action Plan should then be appraised.	89414-166-16219			/	

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Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	Paragraph 5.7.32 states that the adverse effects on the social fabric of the host community in Bridgwater will be balanced against 'enhanced social capital'. It is not clear what is meant by this and no evidence is presented to support this statement.	89414-166-17535	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	The effects of the construction workforce on the host communities is appraised at a very high level; this is considered to be a major effect of the scheme and should be assessed in more detail.	89423-166-5728	/			
Sedgemoor District Council and West Somerset Council Joint Council Response	Dual - local authority and consultee with an interest in land (Sedgemoor)	Stage 2	- the appraisal of social impacts from the introduction of a temporary non-home-based construction workforce comprises a brief, commentary-level appraisal of each accommodation type and location. This section is difficult to follow, with conclusions 'buried' within the text and no clear criteria for defining the magnitude and significance of impacts. The appraisal contains a number of unsubstantiated conclusions, and refers repeatedly to significant 'unmitigated' effects on communities before concluding, without specifying what mitigation measures are assumed, that there will be no significant effects.	89430-166-9225	/			
Somerset County Council	Dual - local authority, statutory and consultee with an interest in land	Stage 2 Update	The Council expects annual contributions to be made to ensure capacity to deal with as yet unknown challenges for local services and the community, and address less tangible impacts. In this way, a migrant impacts fund should be established to help mitigate problems that occur, especially in the area of equalities and community cohesion. In addition, a worker integration contribution is necessary to support a programme of projects to ensure migrant workers are successfully integrated into communities across the County.	89863-166-1185		/		