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**Subject:** WAST Statement - Wylfa Newydd Development  
**Date:** 04 December 2018 20:30:15  
**Attachments:** [image002.png](#)  
[Wylfa Newydd Written Representation Final JLW 04.12.18.docx](#)  
[WAST response to questions 03.12.18.docx](#)

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Good afternoon

Please find attached the WAST statement in order to comply with the deadline set by the Examining Authority of 4<sup>th</sup> December. I also enclose a response to those questions we consider relevant to WAST.


Please note that WAST continues to seek further information from Horizon Nuclear Power and, as such, has submitted a detailed list of amendments and questions to a draft statement of common ground; WAST is therefore not currently in a position to agree any areas of common ground, whilst some fundamental assumptions are still to be clarified. We continue to seek to engage with the developer to gain further clarity on the key elements of the proposals, in order to complete further modelling and discussions regarding mitigating actions. These are reflected within the written statement.

Please do not hesitate to contact me if you need any further information.

I would be grateful if you could please confirm receipt of this email.

Thanks

Jo

#  fy enw i ydy...

#  my name is...

**Jo Williams**

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Cymraeg:-

Mae'r neges hon yn gyfrinachol. Os nad chi yw'r derbynnydd y bwriedid y neges ar ei gyfer, rhowch wybod i'r anfodydd yn ddioed. Dylid ystyried unrhyw ddatganiadau neu sylwadau a wneir uchod yn rhai personol, ac nid o angenrhiad yn rhai o eiddo Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg, nac unrhyw ran gyfansoddol ohoni na chorff cysylltiedig.

Cofiwch fod yn ymwybodol ei bod yn bosibl y bydd disgwyl i Fwrdd Iechyd Prifysgol Abertawe Bro Morgannwg roi cyhoeddusrwydd i gynnwys unrhyw e-bost neu ohebiaeth a dderbynnir, yn unol ag amodau'r Ddeddf Rhyddid Gwybodaeth 2000. I gael rhagor o wybodaeth am Rhyddid Gwybodaeth, cofiwch gyfeirio at wefan Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg yn [www.abm.wales.nhs.uk](http://www.abm.wales.nhs.uk)

English:-

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NHS Trust

## **Wylfa Newydd Written Representation**

### **1. Introduction and Summary**

#### **1.1 The Welsh Ambulance Service NHS Trust (WAST) provides:**

- 999 blue light response for medical emergencies in Wales (including the emergency operation centres Emergency Operations Centres (EOCs) (the telephone contact centres where the 999 call is received and the actual response of an ambulance resource is deployed);
- NHS Direct Wales/111 service: telephone health advice and information service available 24/7 365 days of the year;
- Non-Emergency Patient Transport Services (NEPTS); and
- Special response, for example to terrorist/chemical/biological/radiological/nuclear/otherwise hazardous incidents, by the Hazardous Ambulance Response Team (HART, based in South Wales with a limited UK mutual aid arrangement) or Special Operations Response Team (SORT) for casualty decontamination which is operated on a recall-to-duty regional basis

#### **1.2 Demand on WAST is already high with more than 40,000 999 calls per month. WAST categorises incidents into “Red” for immediately life threatening, “Amber” for serious conditions that are not immediately life threatening and “Green” for non-serious conditions. Between 5% and 7% of incidents are categorised as “Red”: immediately life threatening.**

#### **1.3 WAST currently receives on average 42,000 calls to its NHSDW and 111 telephone services per month.**

#### **1.4 WAST also completes approximately 198,000 NEPTS journeys to hospitals across the region per year. Of these, just over 13,000 journeys are completed per year from Anglesey to more than 100 centres within the Anglesey or Gwynedd areas.**

#### **1.5 A Demand and Capacity Review completed in March 2018 demonstrated that incident demand across Wales is increasing year on year. The review was based on historic demand per head of population by age and gender groups and projected increased population figures. The forecast incident demand increase across Wales is 2.7% per year or 14.4% cumulative over five years.**

#### **1.6 In the Betsi Cadwaladr University Health Board region, there is a forecasted year on year increase of 2.5%. This does not take into consideration local development projects and therefore any additional impact on call demand and incident demand from the proposed Wylfa Newydd Nuclear Power Station.**

Associated developments should be considered in addition to this baseline demand increase on an already very stretched 999 blue light service.

- 1.7 WAST has no capacity to meet additional demand arising from the construction, operation or decommissioning of the proposed nuclear power station. Whilst WAST supports any development which improves the health, general resilience infrastructure and socio-economic prosperity of Anglesey, it is critical that Horizon Nuclear Power (HNP) provides for appropriate mitigation through the provision of all necessary healthcare facilities and section 106 financial contributions to WAST. This is necessary to mitigate the impact of the proposals so that the operational needs and obligations of WAST are fully satisfied, enabling it to carry out its functions without detriment to patient care and safety in Anglesey and Gwynedd or additional costs/impact to the organisation's existing resource envelope.
- 1.8 This written representation sets out the potential impact and makes some assumptions based on the information provided by HNP to date.
- 1.9 In summary, this document sets out in detail:
  - Key issues considered:
    - a) Increase in life threatening or life changing medical emergencies created by activities associated with the construction of the main power station site and associated development (see 2.3);
    - b) An increase in the population base brought about by the provision of temporary workers introducing a higher demand for ambulance services, resulting in needing to meet the physical and mental health needs of workers (see 2.4);
    - c) Impacts on domestic or routine ambulance services brought about by associated construction activity and developments such as improvements on the highways hindering response times to non-HNP activity; increased frequency and severity of incidents such as road traffic accidents brought about by the increased volume of vehicles their type and size (see 2.5).
  - Scenarios modelled including assumptions made and source information:
    - a) Incident Impact of construction workforce by 16 – 44 year old males (nearest population data cohort to expected construction workforce);
    - b) Incident impact of additional population on Anglesey (assumed to be 25% of construction workforce numbers (additional population modelled on 16 – 64 year old male and female population);
    - c) 999 call demand impact of construction workforce;
    - d) 999 call demand impact of additional population on Anglesey;

- e) NHSDW/111 call demand impact of construction workforce;
- f) NHSDW/111 call demand impact of additional population on Anglesey;
- g) Initial conclusions on resources required to mitigate the impact of the above; and
- h) Practical operational conclusions on the resources required to mitigate the above.

The full detail supporting this summary is outlined within the main statement following.

- 1.10 Based on the outline modelling explored in more detail in this document, WAST estimates the following revenue and capital budgets required to mitigate the impact of the project. This demonstrates an annual revenue cost of approx. c.£860,000 per annum after year 3 based on the impact of the increased workforce on the Wylfa Newydd site, and subsequent impact on the staffing requirements for WAST in order to respond. This would be a total potential impact on WAST of c £8,000,000 over 11 years. It should be noted that longer term legacy issues will also need to be considered, as WAST should not bear long term ongoing costs as a result of this project. These figures are considered a worst case scenario, based on no medical provision by HNP. WAST would welcome further detailed dialogue with HNP to ensure every party meets their statutory responsibilities.
- 1.11 It is essential that WAST, alongside the wider emergency services community, is able to access resources to procure services which support the critical operational infrastructure where site developments warrant it. If these issues are not adequately addressed then WAST would be concerned that, not only would it be unable to provide an appropriate service to the proposed facility, but that the patient care and safety of service that it currently offers to the existing population of Anglesey would be adversely impacted.

## **2. Consideration of Potential Impacts on WAST Response**

- 2.1 The Statement of Relevant Representation sets out that WAST has undertaken initial reviews of the Development Consent Order (DCO) documentation, but a significant amount of further information is required before any agreement can be reached on a Statement of Common Ground and the relevant modelling work can be done. This position is extant; this statement is based on known information and assumptions have been outlined where necessary.
- 2.2 WAST has identified three significant risks (in line with the response to Pre-Application Consultation 2 (PAC2) and Pre-Application Consultation 3 (PAC3) under which all concerns and questions are categorised, encompassing the construction, operation and decommissioning phases.

**2.3 Increase in life threatening or life changing medical emergencies created by activities associated with the construction of the main power station site and associated developments.**

On Site Medical Provision

2.3.1 WAST welcomes confirmation that the construction site will have a paramedic, an ambulance and on-site healthcare facilities. It is acknowledged that further discussion is required about the exact specification of service provision and the remaining implications for WAST and the wider healthcare economy. WAST would expect to see:

- Suitably sized and resourced occupational health and hygiene facilities staffed during normal working hours with out-of-hours cover as required.
- Full time paramedic services on the Wylfa Newydd Development Area site to ensure competent emergency response for the main site, providing initial trauma care, minor injury treatment ahead of ambulance or helicopter transfer to hospital.
- First aid provisions as per construction normal practice.
- One ambulance to be based on the Wylfa Newydd Development Area site for dedicated use by the Wylfa Newydd Project for emergency transfer on site.

2.3.2 WAST still needs to understand how the service provider intends to manage injuries on site, and how specifically casualties requiring hospital treatment will be removed from site. In addition, it is unclear about the exact specification of arrangements present on site, including operational hours and clinical capability. We would also seek confirmation of the proposals to manage life threatening or life changing emergencies across all associated development site.

2.3.3 WAST would seek to challenge the assumptions in the draft Statement of Common Ground that there will be potentially one major trauma, and seven moderate incidents per year which require ambulance responses. WAST would also seek to challenge the assumption that a further 100 incidents may be managed on site. It is not clear on what basis these assumptions are made.

2.3.4 From the information shared to date, it is unclear when the services described will be implemented (reference has been made to the availability of a full service from year 3 of construction), and the residual impact before and after these services are in operation. In addition, as above, the specific nature of the services to be provided require further clarification. Therefore, the WAST analysis is based, at this stage, on no medical provision being available, but we would seek urgent confirmation of when these services will be in place, so that we can adapt our modelling accordingly.

2.3.5 WAST will need to identify the impacts of training requirements on both new staff which are appointed in line with the increased demands on the region, and any training implications for existing staff in responding via any new

arrangements. The lead in time for the training of new staff is significant and should be taken into consideration when planning for response to any impacts.

#### Workforce Numbers on Site

- 2.3.6 WAST notes the available information on the profile of the workforce and the intention to have 8,643 construction workers at the peak of construction in year 7. The impact of an additional 8,643 population on Anglesey alongside the supporting wider supply chain and families that come with the workforce, should not be underestimated.
- 2.3.7 Whilst acknowledging the plans for on-site healthcare provision, it is noted that the workforce profile in years 1 to 3 still indicates a workforce of up to 1,640 with no supporting healthcare provision. Combined with the potential wider increased workforce in associated developments and within the wider system, there could potentially be a significant impact on health services in the area.
- 2.3.8 In addition to this, WAST remains concerned that the Accommodation Strategy for the workforce does not consider the impact of the 3,000 non-campus based workers across the lifespan of the construction phase. WAST has previously indicated that it welcomes on-site campus accommodation; however, the phasing of the workforce to accommodate 4,000 at peak, and once home-based and other off-site workers are accommodated means that the benefits of this provision will not be realised until years 8 or 9 of the project. Therefore consideration needs to be given to the wider impact of the Wylfa Newydd site.
- 2.3.9 WAST has modelled the impact of an additional increase in population of 25% over and above the construction workforce to take into account the above points along with dependants and families and other population groups that will come to Anglesey (direct, indirect suppliers/other). This would also include any additional demand arising from the current population as a result of the construction, for example, increases in breathing conditions, and mental health and so on. WAST would welcome further dialogue with HNP on this and can adjust the percentage accordingly.

#### Management of Casualties within Hazardous Environments

- 2.3.10 WAST has been clear with HNP that it requires assurance on the capability and availability of these arrangements and further detail is needed on the arrangements for responding to hazardous areas, or responses that require multiple paramedics, and handover/site access protocols.
- 2.3.11 Further, the management of hazardous environments does not appear to be covered in the documentation and is a particular area of concern on which WAST would want assurance from HNP to ensure appropriate mitigations are in place. We would need to be assured that the risk assessment processes

are robust and that the competencies of any internal resources or specialist contractors is sufficient to expedite an effective casualty rescue.

- 2.3.12 We note the intention to use an EPCC Sub-Group to engage with the emergency services and the development of a Community Safety Management Strategy; we would ask that HNP expedite these discussions and production of relevant documentation to further assure us about the level of service provision on site. As previously noted, HNP should not rely on a 999 response to incidents requiring retrieval of casualties from height, below ground or within the marine environment or any classification of confined space or height and should ensure that this capability is provided on site.

#### Site Management Arrangements

- 2.3.13 WAST will want to understand what protocols and processes will be put in place for the management of both the construction site and those associated developments.
- 2.3.14 To ensure that WAST resources are used where most needed, WAST expects HNP to put in place major incident plans, including plans for management of multiple casualties, with a view to minimising the impact on blue light services and the wider health economy. It will be necessary for HNP to have robust plans in place for the management of a multitude of scenarios, including fire on site, management of disorder or protest, and arrangements for the management of the temporary worker accommodation.
- 2.3.15 In addition to this, HNP should ensure that appropriate processes are put in place for the management of the Marine Off Loading Facility, and should not expect WAST to retrieve or manage casualties within this environment.

- 2.4 An increase in the population base brought about by the provision of temporary workers introducing a higher demand for ambulance services, resulting in needing to meet the physical and mental health needs of workers.**

#### Local Health Provision

- 2.4.1 WAST notes that the Health Impact Assessment (HIA) identifies large magnitude and significant major adverse impacts on medical and healthcare services' demand and NHS capacity. The HIA identifies mitigation through "appropriate healthcare provision or contribution". WAST must be involved in the discussions as the NHS Direct Wales service is a key part of the primary care sector, and unmet demand in the primary care sector can impact on the ambulance care pathway.
- 2.4.2 As a commissioned service, WAST works closely with all health boards and continues to engage with and support the health board in ensuring that safe and effective services are provided for the region. HNP will need to make provision for the workforce on site as far as possible, and should ensure that workers and families are aware of options to 'Choose Well' in terms of their



healthcare needs. WAST will need to understand how temporary residents will receive primary and community care through to complex secondary care (including referrals into secondary care pathways from Healthcare Professionals).

- 2.4.3 It should be noted that unmet dental need poses a specific demand issue for WAST and arrangements for workforce dental care, including those of families should be considered and confirmed. Dental problems are a significant demand category on the WAST NHS Direct Wales service, and WAST cannot be expected to absorb this increased level of activity without additional resource. It is also essential that information on dental services available to the HNP workforce is shared with WAST so that appropriate signposting can take place if required, and to minimise the impact on the local health economy.
- 2.4.4 WAST will also seek reassurance from HNP regarding the wider workforce management strategies for both staff on site, and those within the wider community in terms of entertainment arrangements during time off, and for the management of drug and alcohol misuse. WAST cannot absorb additional activity due to anti-social behaviour and would seek to ensure that mitigation is put in place by the developer before any such situation arises.
- 2.4.5 WAST resources are already under a significant strain in the North Wales region and, as noted above, it cannot be assumed that WAST can absorb any additional activity without the appropriate accompanying increase in funding and resource.
- 2.4.6 The international representation of the workforce profile means WAST will need to ensure that HNP has put in place appropriate translation arrangements for non-English speaking staff. In addition, any direct call on the WAST service will need to be responded to appropriately, and any additional resources required to ensure that WAST can respond to such requests will need to be met by HNP.
- 2.4.7 WAST would expect HNP to provide:
- Space to provide primary care services (consultation/ recovery room) for the non-home based construction workforce.
  - A confirmed mechanism for engaging with local pharmacies for the safe provision of prescription medicines.
  - Details of arrangements for dental care.
  - Basic shopping provisions on the Site Campus which will include over-the-counter medicines.
  - Provision for ongoing longer term provision of support for workers, specifically but not limited to mental health support and management of long term conditions.

#### Dependants and Families

- 2.4.8 The draft SOCG document suggests that approximately 285 partners will join contracted workers at peak, with potentially 220 dependents. Whilst acknowledging the nature of the workforce, these numbers seem low considering an overall potential workforce of 9,000 at peak. WAST would seek to challenge these assumptions and to further understand the basis for these calculations.
- 2.4.9 HNP indicates that these families will need to be register with local NHS services and would not have access to onsite healthcare. Any associated potential impacts on WAST should be considered e.g. referrals to secondary care which may require non-emergency transport, or requirements for out of hours care which may be reliant on WAST responses including NHS Direct or 111 (when implemented).

#### Supply Chain and Contractors

- 2.4.10 WAST has previously sought information on the volume of additional workers who could be expected in support of the supply chain. This extends also to the number of workers sub-contracted by companies supporting the main construction and associated developments. As indicated above, the modelling has assumed a 25% increase on the original assumed construction numbers (this also includes dependants and families), but this will need to be closely monitored, and WAST continues to seek confirmation of this from HNP.
- 2.4.11 WAST is keen to understand how HNP intends to manage the health needs and safeguarding issues of the whole workforce associated with the project and would seek to ensure that there is no detrimental impact on WAST or the wider health community. We would want to see further detail of the anticipated Community Safety Management Strategy to understand the processes and arrangements which will be put in place to mitigate against any risks.

### **2.5 Impacts on domestic or routine ambulance services brought about by associated construction activity and developments such as improvements on the highways hindering response times to non-HNP activity; increased frequency and severity of incidents such as road traffic accidents brought about by the increased volume of vehicles their type and size.**

- 2.5.1 Both the emergency and non-emergency response elements of the WAST service will be affected by any disruption to key routes both across the island of Anglesey and within the wider region. It is noted that such disruption could be generated by roadworks associated with highway improvements, increased volumes of traffic, large loads and increased commuter movements to the construction site and associated development sites.
- 2.5.2 WAST notes the various proposed highway improvements which, it is stated, should improve access, once completed. WAST will want to see the results of detailed modelling of the impact of proposed highway changes and average road speeds on its ability to respond.

- 2.5.3 Further modelling will be required to determine how ambulance travel and job cycle times will be affected across the immediate and regional areas. In addition to this, there will be a need for WAST to consider how core 999 services may be affected by changes to the road network, and increased traffic volumes.
- 2.5.4 Consideration will also need to be given to a potential increase in road traffic collisions arising from the increased volume of traffic on the roads across the region. This may impact on WAST both through delays on key routes, and also through call-outs to WAST to respond in cases of injury. Increased demand in these instances may also arise in pressures on the wider unscheduled care system, and this will need to be addressed.
- 2.5.5 WAST will seek details of all mitigation work which is planned and the mechanisms to ensure that delays to both emergency and non-emergency patient transport across the region are avoided.

## **2.6 Non-Emergency Patient Transport Service**

- 2.6.1 As noted above, our NEPTS service completes c.198,000 journeys per year in North Wales, taking patients to hospitals across the region. Of these journeys, just over 13,000 journeys are completed per year from Anglesey to just over 100 centres within the Anglesey and Gwynedd areas. NEPTS vehicles make c.50 journeys across the bridges onto the mainland every week day, with 20 on Saturdays. Therefore any increased traffic on these key routes, or any incidents which prevent access will detrimentally impact on the ability of this service to convey patients to appointments in a timely manner.
- 2.6.2 In addition to this, the NEPTS service requires access to all routes across the island, but specifically the A55, B4547, A4244, A487, A4086 and the A5; however, the service will also need access to all routes linking residential areas and the main hospital sites. Again, any work which impacts on these routes will need to be clearly communicated well in advance, and mitigation put in place to avoid any detrimental impact on WAST. The risk of traffic collisions, congestion and delays will need to be mitigated as far as possible and WAST will need details of how this is anticipated.

## **2.7 Other Considerations**

- 2.7.1 Other issues which will impact on WAST include:
- potential staffing impacts - WAST needs to ensure that any potential migration of experienced clinical and administrative staff from a service already under considerable pressure can be mitigated;
  - to support resource planning WAST has requested details of the types of roles that will be recruited to;
  - wider socio-economic effects on both staff and patients;
  - partnership working across the breadth of organisations across North Wales;

- the cumulative effect of this development, alongside all other developments within the area (notably National Grid, Bluestone and other energy projects on both Isle of Anglesey and the mainland) will have a significant impact on WAST; and
- the impact of noise, air pollution and other environmental impacts on the wider island population need to be better understood, and may impact on demand for ambulance services in the future.

### **3 Outline Modelling**

- 3.1 Based on the above sections WAST has undertaken some initial modelling. This modelling has been done on the basis of no medical provision on site, as the detail required to model potential scenarios has not yet been provided by HNP. WAST will seek to enter into discussions about mitigation in order to ensure that the services provided both on site and within the wider community are appropriate, and minimise impact on public services. This position therefore represents a scenario in which no provisions are put in place by HNP i.e. a worst case scenario
- 3.2 Scenarios modelled including assumptions made and source information:
- a) Incident Impact of construction workforce by 16 - 44 year old males (nearest population data cohort to expected construction workforce);
  - b) Incident impact of additional population on Anglesey (assumed to be 25% of construction workforce numbers (additional population modelled on 16 – 64 year old male and female population);
  - c) 999 call demand impact of construction workforce;
  - d) 999 call demand impact of additional population on Anglesey;
  - e) NHSDW/111 call demand impact of construction workforce;
  - f) NHSDW/111 call demand impact of additional population on Anglesey;
  - g) Initial conclusions on resources required to mitigate the impact of the above; and
  - h) Practical operational conclusions on the resources required to mitigate the above.

#### **Initial Conclusions from Modelling**

- 3.3 WAST used the estimated construction workforce numbers to develop an incident ramp, based on incidents per 1,000 population multiplied by the construction workforce. This was then converted to a cost using an average job cycle time and cost per hour. This process was completed for incident responses, 999 calls and calls to NHSDW/111 and also undertaken for the

additional population (25% of the construction workforce) over and above the construction workforce.

- 3.4 In years 1 and 2 WAST could use the potential S106 mitigation monies for overtime within the existing stations to mitigate the impact of the project; however, from year 3 onwards it would not be possible to spend the level of S106 mitigation monies through overtime due to the small WAST workforce in Anglesey (see Practical Operational Considerations).
- 3.5 For our Emergency Operation Centres (where we receive 999 calls) and for NHSDW/111 it would be possible to use the S106 monies on overtime.

### Practical Operational Considerations

- 3.6 From year 3 of construction WAST will need to replace the overtime spend with one emergency ambulance resource, which requires 12 full time equivalents to maintain the service 24/7 365 days of the year. This number of staff would also require one Clinical Team Leader and an Advanced Paramedic Practitioner. This arrangement would require fleet and equipment costs with a potential for additional estate required and this would need to be considered in greater detail, if required. The s106 monies for EOC and NHSDW/111 could be spent on overtime.
- 3.7 Based on the outline modelling above WAST estimates the following revenue and capital budgets required to mitigate the impact of the project. This demonstrates an annual revenue cost of approx. £850,000 per annum after year 3 based on the impact of the increased workforce on the Wylfa Newydd site, and subsequent impact on the staffing requirements for WAST in order to respond.

<b>Table 1 - Estimated Worst Case Revenue Costs</b>								
1	2	3	4	5	6	7	8	9
Year	EOC	EOC	NHSDW	NHSDW	Response	Response	Response	Totals
	Workforce	25%	Workforce	25%	Workforce	25%	Estate	
1	22	6	58	15	2,183	874	-	3,158
2	61	16	164	41	6,144	2,454	-	8,879
3	299	80	834	209	836,417	-	21,786	859,624
4	606	168	1,748	437	836,417	-	21,786	861,161
5	998	286	2,975	744	836,417	-	21,786	863,205
6	1,204	355	3,701	925	836,417	-	21,786	864,387
7	1,574	479	4,989	1,247	836,417	-	21,786	866,491
8	1,369	433	4,510	1,127	836,417	-	21,786	865,642
9	901	296	3,080	770	836,417	-	21,786	863,248
10	315	107	1,117	279	836,417	-	21,786	860,021
11	99	35	362	91	836,417	-	21,786	858,789
<b>Totals</b>	<b>7,447</b>	<b>2,260</b>	<b>23,537</b>	<b>5,884</b>	<b>7,536,077</b>	<b>3,329</b>	<b>196,073</b>	<b>7,774,607</b>

1. Year of construction workforce.
2. EOC estimated overtime costs to respond to 999 calls from construction workforce.

3. EOC estimated overtime costs to respond to the estimated 25% increase in population (25% of the construction workforce) as a result of dependants, families and other population groups attracted to Anglesey as a result of the construction project.
4. NHSDW/111 estimated overtime costs to respond to non-emergency medical phone calls from the construction workforce.
5. NHSDW/111 estimated overtime costs to respond to the estimated 25% increase in population (as per 3 above).
6. Estimated cost for ambulance response capacity to respond to the estimated increase in incidents from the construction workforce requiring an ambulance response. Overtime on existing ambulance response workforce in years 1 and 2, with a single emergency ambulance response station from year 3 (24/7, 365 days of the year) with daytime Advanced Paramedic Practitioner support and a Clinical Team Leader.
7. Estimated cost for ambulance response capacity to respond to the estimated 25% (see 3 above). Cost for years 1 and 2 only, as response capacity for the 25% would be included column 6 from year 3.
8. Estimated estate cost for a single emergency ambulance station. Estimated lease costs and associated revenue estate costs.
9. Total revenue cost per annum and total over 11 years. These figures subject to further dialogue with HNP about the applicant's planned medical provision and further dialogue also required on legacy costs.

<b>Table 2 - Estimated Worst Case Capital Costs</b>								
1	2	3	4	5	6	7	8	9
Year	EOC	EOC	NHSDW	NHSDW	Response	Response	Response	Totals
	Workforce	25%	Workforce	25%	Workforce	25%	Estate	
1	-	-	-	-	-	-	-	0
2	-	-	-	-	-	-	-	0
3	-	-	-	-	352,670	-	-	352,670
4	-	-	-	-	-	-	-	0
5	-	-	-	-	-	-	-	0
6	-	-	-	-	-	-	-	0
7	-	-	-	-	-	-	-	0
8	-	-	-	-	-	-	-	0
9	-	-	-	-	-	-	-	0
10	-	-	-	-	-	-	-	0
11	-	-	-	-	-	-	-	0
<b>Totals</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>352,670</b>	<b>0</b>	<b>0</b>	<b>352,670</b>

6. Estimated capital costs for a single emergency ambulance station, in particular, fleet costs.

- 3.8 The figures are based on current prices (2018/19 and would need to be adjusted for inflation). The figures do include an estimate of demand increase.
- 3.9 Once the construction phase of the project begins to wind down and then finish, WAST will be left with legacy revenue and capital costs. WAST would seek to reduce these legacy costs, but where this is not possible WAST would expect HNP to continued funding them. WAST would welcome further detailed dialogue with HNP regarding the provision of on-site medical facilities and the dispersal and reduction of legacy costs so that WAST's mitigations are reasonable.

## **4 Conclusions**

- 4.1 WAST is a statutory body required by law to manage ambulance and associated transport services. Any factors which are likely to increase its operational obligations need to be fully addressed and financially resourced. All direct and non-direct impacts of the HNP proposals need to be assessed. Further information is required about the effect on WAST's operations and financial and other commitments need to be put in place to ensure that WAST can satisfactorily meet its legal obligations and expectations otherwise imposed.
- 4.2 WAST expects, as part of the DCO process, the local planning authority (LPA) to conclude a s106 agreement whereby the issues set out in this statement of representation are dealt to the satisfaction of WAST as planning obligations requiring the applicant to:
1. provide financial contributions to WAST in such payment schedule as may be agreed to ensure that all costs and liabilities incurred by WAST which are directly and necessarily occasioned by the overall effect of the development are met by the applicant;
  2. meet requirements of any associated impacts of the potential need for additional ambulance station facilities together with any construction costs, equipping and staffing thereof be provided by the applicant;
  3. the LPA shall not approve a Community Safety Management Strategy, major incident plan or any similar document without first obtaining the prior approval of WAST thereto and
  4. any other reasonable requirement of WAST which may be properly the subject of a planning obligation given on behalf of the applicant in a s106 agreement.

We note that no heads of terms for such an agreement have been submitted to WAST to date. WAST therefore reserves its position to add to or amend each or all of its submissions in respect of any agreement in respect of the matters set out herein.