

Caversham And District Residents Association

2024-29 Air Quality Action Plan CADRA Response to consultation

General comments

CADRA welcomes this Plan and the clear evidence of progress on this vital topic. We note the successes recorded for the previous plan period and the steady reductions in oxides of nitrogen (including the three locations in Caversham which exceeded 36 micrograms/cu m in 2019 but no longer do so), and we share the plan's hope that this is now the 'new normal'.

We also note the slight but steady increase in particulates and agree that, while below current thresholds of concern, this trend needs tackling before it becomes a problem.

In passing, we suggest that the reference to the third Thames crossing on p.37 should refer also to the benefits to air quality and more general amenity in Caversham and not solely to the reduction of congestion and pollution on the IDR.

We agree with the six priorities on p 32 and the actions in the various tables which are proposed to address them. However, we have these suggestions, the first substantial.

Local Hot Spots Relief

The focus of the Plan is strongly, and rightly, on the reduction of pollution at source. This is essential but should not be the whole story. We think that mitigation is also important.

Reduction is a long-term business and relief of local hot spots may be needed pending overall strategic reductions. This is especially important in relation to Priority 2: the reduction in exposure of vulnerable individuals, which seems to have less prominence in the proposals in Tables 01-03 than some of the other objectives.



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Mobile Monitoring

We wonder whether the welcome increase in PM2.5 monitoring in RDAQ30 could include a mobile capacity. This could assess particulate levels in locations where concentrations of the vulnerable individuals mentioned in Priority 2 sit alongside major traffic routes: for example, schools and old peoples' accommodation. It is possible that local topography and micro-climate create high concentrations in such locations which are masked by the relatively low average levels recorded by current fixed monitoring.

If such testing did reveal locally concerning levels close to such vulnerable receptors, then local mitigations such as tree or hedge planting or other forms of relatively low-cost screening should be considered. We suggest such a programme of local investigation and mitigation would be a useful addition to the actions in Tables 01-03.

15 January 2024