

Grundy, Mike (Place)

From: Simon Heaton <simon@heatonplanning.co.uk>
Sent: 25 October 2013 15:53
To: Grundy, Mike (Place)
Cc: 'Matthew Pixton'; 'David Green'; liam@heatonplanning.co.uk; 'Spencer Warren'
Subject: RE: Heaton Planning - Health Impact Assessment (Great Oak scoping report SCO.55/2013 M)

Dear Mr Grundy

My apologies for the delay in responding to this email. It has taken some time to come back to you as a consequence of the careful consideration and consultation that we have carried out on this particular request. In that regard we have been in detailed discussion with UK Coal as well as various organisations with an understanding of the role/purpose of HIA, the potential approach to be taken and the methodologies involved. As a follow up to these deliberations we have the following comments to make.

We fully understand the concern that has emerged from parts of the local community in regard to the potential health impacts of the development and UK Coal are in agreement with you that some independent assessment of this aspect is appropriate in determining the Planning Application.

Having said this, and from our liaison with UK Coal and health professionals/academics, we are quite clear that the carrying out of Health Impact Assessment (HIA) lies outside or, more particularly, runs alongside both the completion of an Environmental Impact Assessment (EIA) and the determination of a Planning Application for development. Indeed, certain constituent elements of an EIA and the responses from the relevant consultation bodies help inform the carrying out of an HIA. In particular, the assessments that are carried out and the consultation responses on: transport; air quality; noise and vibration; site safety; visual impact; socio economic effects; and, cumulative effects are all important factors in carrying out HIA. Besides the technical assessments set out in the Environmental Statement (ES) the responses and views on the application set out in formal consultation responses from the Highway Authority, Environmental Health Authority, Public Health Authority, the HSE, the relevant economic development bodies, as well landscape/planning officers are of importance. In addition, the input of stakeholder groups, community representatives and public health officials/officers with specialist knowledge is also important in the carrying out of HIA.

It is therefore our view that the carrying out of an HIA on a specific development proposal is most effective when it is carried out in tandem with the Planning Application determination process, as the HIA can be properly informed by the detailed application proposals and EIA/ES being in the public domain, and during a period when the relevant public bodies are considering and responding to formal consultation, and when communities/stakeholders are also being formally consulted.

It is worth stressing that in carrying out an EIA and in assessing various areas of potential impact upon the human population, for instance air quality and noise assessments, that the criteria/levels and thresholds that are used by the independent experts/assessors to judge acceptability are themselves based on a general intention to protect human health. Therefore, the findings contained within an EIA/ES are a considerable first step in considering and establishing the potential impact of the development on human health.

How the HIA is then undertaken is something your email has touched upon. Whilst you advise on the appointment of "a suitably qualified person to carry out the HIA" it is our view that a HIA is an exercise that is more appropriate to a multi-agency approach. In this regard, the approach taken in Wakefield on UK Coal's recent proposal for surface mining of coal and fireclay at the Deanfield site near Sharlton is in our view relevant.

In the Deanfield case the HIA was initiated by Wakefield Council. The carrying out and delivery of the Deanfield HIA was co-ordinated by Wakefield District Public Health Department and then overseen by a steering group made up of

public officers with specialist knowledge relevant to the HIA process and a range of stakeholder representatives, including UK Coal, Parish and Town Councils and the Action Group.

The Deanfield HIA was carried out following the completion of the EIA/ES and the submission of the application. The HIA process has run alongside the application determination process. The HIA report was produced by the Public Health Department.

The Deanfield case highlights that a multi agency approach, led by the Public Health Authorities – with the resultant independence and qualification/knowledge that you are seeking – is the best way forward. This is particularly the case when you take account of the fact that stakeholder participation through a Steering Group is an important element and requires management/co-ordination by the independent public experts. The Deanfield case emphasises that stakeholder engagement and the operation of the Steering Group is effective when there is a clear set of proposals in the public domain and when there is a good evidence base upon which views can be sought and judgements made – i.e. the EIA/ES material and the findings of independent specialists on subjects and considerations that are potentially relevant to the HIA (e.g. noise, air quality, transport, socio-economics).

We have consulted with various independent organisations with expertise in HIA and related matters. This includes the University of Liverpool’s Department of Public Health and Policy, who are part of the International Health Impact Assessment Consortium. Their view is that the “values and methodological approach to the wider determinants of health used in the Deanfield work are sound”. They highlight that the methodology at Deanfield involved a team of people that produced a “rapid” HIA over a 6 month time period. They have also emphasised that stakeholder participation is an important element of the process.

In the light of all these comments, the backdrop to which is the absence of any formal/statutory requirement or guidance in England for the carrying out of an HIA on a proposal for temporary minerals development, we consider there would be merit in the Mineral Planning Authority discussing with the Newcastle Borough Council Health and Social Care Department the potential to adopt a similar approach on the Great Oak proposals. We must emphasise that, as per the Deanfield HIA, UK Coal and potentially some of their specialist consultants would be most willing to participate fully in the stakeholder Steering Group. Given the level of interest shown by the Audley Medical Practice it strikes us that they should also be invited to participate, along with the Action Group and Parish Councils in the event that you adopt a similar approach to Wakefield.

As I am sure you will agree, the instigation of the HIA by the Local Authority and the co-ordination, management and reporting on the HIA by the District Public Health Department brings to the exercise the necessary independence and involvement of suitably qualified public health professionals. UK Coal would contribute to the HIA through their involvement in the Steering Group and the informing of the evidence base on important areas of consideration through the carrying out of the EIA on the development and the submission of an ES with the Planning Application.

Sorry that this is such a long email but we are sure you will appreciate that we have given the matter some very careful consideration and have spoken to quite a number of experts/professionals in the field. Luckily the approach taken on the Deanfield HIA appears to have the support of the main health impact specialists and therefore provides a most recent and up to date model for carrying out an independent and rapid HIA on individual proposals for relatively short- term surface coal mining development.

It strikes us that such an approach has the greatest potential to help inform your planning judgment on this aspect and in doing so maintain public confidence in the rigour and independence of the HIA.

Please let us know how you intend to proceed. In the meantime we will continue to work on the EIA, including all those aspects that will help inform and contribute to the evidence base for the HIA.

Best regards,

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From: Grundy, Mike (Place) [mailto:mike.grundy@staffordshire.gov.uk]
Sent: 16 September 2013 12:21
To: 'Simon Heaton' (simon@heatonplanning.co.uk)
Cc: David Green [dgreen@ukcoal.com] (dgreen@ukcoal.com)
Subject: Heaton Planning - Health Impact Assessment (Great Oak scoping report SCO.55/2013 M)

Dear Mr Heaton

Further to our conversation last week, I wish to remind you about the correspondence below and also confirm that I have received a number of emails more recently asking me to request that a Health Impact Assessment (HIA) be carried out by UK Coal and submitted with the planning application / forms part of the Environmental Statement. Incidentally one of the emails (from Claire Barnish - Chair of the local action group (CAGOO)) suggests that she spoke to David Green at UK Coal who commented that he would have no objection to providing a HIA.

Given the nature, scale and location of the proposals, the local concerns and my earlier comments, I consider that it is reasonable to request that the potential health effects are assessed. Therefore, for the avoidance of doubt, I wish to formally request that in addition to the scoping opinion and further comments I've already passed to you, I wish to confirm that the application / ES should also be accompanied by a HIA.

I trust that you will appoint a suitably qualified person to carry out the HIA. That person will take account of best practice from elsewhere in the UK; take account of the relevant local health data; and, contact and have regard to advice from the relevant public health authorities – locally and elsewhere.

Kind regards

Mike Grundy

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From: Grundy, Mike (Place)
Sent: 13 May 2013 12:32
To: simon@heatonplanning.co.uk
Cc: andrea.flanagan@northstaffs.nhs.uk
Subject: TRIM: Heaton Planning - copy of Audley Medical Practice letter - health concerns (Great Oak scoping report SCO.55/2013 M)

Dear Mr Heaton,

I have received a number of emails and letters from local residents following the issue of our scoping opinion.

The attached letter from Doctors at the Audley Medical Practice encapsulates what others have been questioning related to the potential effects of the proposals at Great Oak. In particular the need for the application to be accompanied by Health Impact Assessment (HIA) has been raised and it has been suggested that this would be best practice.

I trust you will give the potential health impacts due consideration as part of the Environmental Statement that will accompany the planning application and consider the need to provide a specific HIA.

I have copied this email to a representative of the Practice so that they can be made aware that I have passed their letter to you and in case you wish to contact the Doctors.

Kind regards

Mike Grundy

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