

**TONY BARNETT ON BEHALF OF CORPUSTY & SAXTHORPE PARISH COUNCIL  
(HEREAFTER C&SPC) 23 MAY 2023**

**REGARDING THE APPLICATION BY EQUINOR NEW ENERGY LIMITED FOR AN ORDER GRANTING DEVELOPMENT CONSENT FOR THE SHERINGHAM SHOAL OFFSHORE WIND FARM EXTENSION PROJECT AND DUDGEON OFFSHORE WIND FARM EXTENSION PROJECT**

**FURTHER INFORMATION IN RESPONSE TO THE APPLICANT'S COMMENTS IN DOCUMENT # C282-BS-Z-GA-00014 IN ELABORATION OF VERBAL COMMENTS AT THE EXA OPEN FLOOR MEETING AT GRESHAM'S SCHOOL ON 29 MARCH 2023.**

**THIS INFORMATION IS SUBMITTED NOW BECAUSE IT WAS NOT TO HAND FOR THE ORIGINAL MEETING HELD AT GRESHAM'S SCHOOL HOLT NOTED ABOVE. THIS DELAY WAS BECAUSE C&SPC:**

- a. **HAD TO SUBMIT A FOI REQUEST TO NORFOLK COUNTY COUNCIL (NCC) REQUESTING THE MINUTES OF THEIR MEETING WITH THE APPLICANT;**
- b. **AWAITED A DELAYED RESPONSE BY NCC TO A QUESTION FROM ITS COUNTY COUNCILLOR, MR STEFFAN AQUARONE. THIS QUESTION WAS SUBMITTED TO NCC CABINET PRIOR TO THE 29 MARCH MEETING AT GRESHAM'S SCHOOL BUT WAS NOT ANSWERED BY NCC UNTIL 17 MAY 2023.**
- c. **FOR THESE REASONS, WE RESPECTFULLY ASK THAT THE EXA ACCEPT THIS SUBMISSION DESPITE ITS BEING AFTER THE 16 MAY DEADLINE.**
- d. **WE COMMENCE BY NOTING THAT CORPUSTY AND SAXTHORPE PARISH COUNCIL SUPPORT THE DEVELOPMENT OF OFFSHORE WIND FARMS. THE PARISH COUNCIL HAS MAJOR CONCERNS ABOUT THE SHORT AND LONG TERM HEALTH AND WELLBEING IMPACTS OF THE ONSHORE TRENCH DIGGING AND QUESTIONS WHETHER THE CORRECT METHODOLOGY AND METHODS HAVE BEEN FOLLOWED BY THE APPLICANTS IN PREPARING THEIR APPLICATION WITH REGARD TO PUBLIC HEALTH AND WELLBEING AND WHETHER NORFOLK COUNTY COUNCIL HAS DEMONSTRATED DUE DILLIGENCE IN CONSIDERING THE PROPOSAL.**

1. The ExA will recall that in our original comments submitted at some length, we explained in some detail why both the methodology and methods deployed by the Applicant are inappropriate and insufficient to elicit any proper understanding of the human health and wellbeing effects of their project on communities in Norfolk and indeed more widely in the region. By way of clarification, we note again that these two terms are not identical.
2. Methodology describes the theory of method, in particular it refers to the framing of a problem. Method refers to the way that a problem is investigated once it has been framed. This subtle but important distinction is relevant throughout our comments here. It particularly engages questions of expertise and the relevance of expertise as discussed in sections 4 and 5 below.
3. The ExA will also recall that the Applicant in their response indicated precisely and with some elaborate but irrelevant citations that *“the assessment of human health (APP-114) has not been approached from an economic/project planning perspective. It has been approached through the requirements of the UK legislation, policy and guidance as set out in Section 28.4.1 Policy, Legislation and Guidance, ES Chapter 28 of the Health (APP-114).”*.

**4. In the light of these comments, we confirm that:**

- a. The Applicant has not responded to the extensive critique which we submitted. Instead, they have chosen to avoid responding by quoting/citing their previous evidence, evidence which we have already demonstrated shows they have adopted both an inappropriate method and an inappropriate methodology.
- b. We invite the ExA to consider why the Applicant has omitted to engage with the substance of our evidence.
- c. In particular the Applicants have not responded to the critical question of why their assessment of the proposed project has not complied with the method for such studies required by the UK Government’s Green Book<sup>1</sup>.
- d. We take the liberty of reminding the ExA once again of the purposes of the UK Government’s Green Book as indicated in the introduction to this document, namely:

*“The Green Book is guidance issued by HM Treasury on how to appraise policies, programmes and projects. It also provides guidance on the design and use of monitoring and evaluation before, during and after implementation. Appraisal of alternative policy options is an inseparable part of detailed policy development and design. This guidance concerns*

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<sup>1</sup> <https://www.gov.uk/government/publications/the-green-book-appraisal-and-evaluation-in-central-government/the-green-book-2020>

*the provision of objective advice by public servants to decision makers, which in central government means advice to ministers. In arms-length public organisations the decision makers may be appointed board members, and where local authorities are using the method, ... elected council members. The guidance is for all public servants concerned with proposals for the use of public resources, not just for analysts. The key specialisms involved in public policy creation and delivery, from policy at a strategic level to analysis, commercial strategy, procurement, finance, and implementation must work together from the outset to deliver best public value. The Treasury's five case model is the means of developing proposals in a holistic way that optimises the social / public value produced by the use of public resources. Similarly, there is a requirement for all organisations across government to work together, to ensure delivery of joined up public services.*

*The Green Book is not a mechanical or deterministic decision-making device. It provides approved thinking models and methods to support the provision of advice to clarify the social – or public – welfare costs, benefits, and trade-offs of alternative implementation options for the delivery of policy objectives.”*

We remind the ExA that the Applicant's proposal is not only a project but also a component of a programme of projects forming part of a national policy. Given the criteria listed in the introduction to the Green Book, we consider that this method and methodology should apply across the board. The Applicant apparently believes that this is not the case. They do not provide a cogent (or indeed any) account of how they have arrived at this conclusion.

- e. We invite the ExA to consider, as do we, that failure to follow the recommended method and methodology is a very serious omission.
- f. In saying this, we say that the Applicant's assertion that the treatment of wellbeing might not be Green Book compliant is very significant. We invite the ExA to consider whether it is acceptable for this application, which is a national-policy driven investment, not to tick all the Green Book boxes both in spirit and in compliance with the legal requirements? We further say that the Applicant has signally failed to recognise the importance of this aspect of compliance.
- g. In addition to the above comments, which in part repeat points made previously in our evidence but to which the Applicant has failed to respond, we remind the ExA – and apologise for having to do so – that the Green Book requires appraisal of options not selected, for example an OTN or the options of onshore transmission.
- h. Here, once again, we have evidence of serious methodological flaws in the Applicant's approach and must enquire whether and how in their health and wellbeing appraisal “were the relative community impacts of

these and any other options considered and, if so, what did such appraisal(s) suggest?”.

- i. We further wish to tell the ExA that while C&SPC cannot afford specialised professional planning / legal advice in relation to these matters. However, we have very fortunately had access, albeit informally, via the personal and professional networks of one of our members, to the expertise of very senior planning experts who have worked at the highest levels of national planning. The comments in Section 3(a-h) above are informed by this expertise.

**5. Subsequent to the preceding, we now turn to the question of what kind and level of expertise was available to NCC when it met with Equinor. Here we encounter both a mystery and also some clear evidence that that meeting – as recorded by the Applicant in their minutes – was as cursory as we have suspected and as we have already explained at some length to the ExA.**

- a. The mystery: Councillor Steffan Aquarone, an elected member of Norfolk County Council has told us as follows:

*1. That in response to his question to the NCC Cabinet Member for Environment and Waste he received the following:*

*As part of the County Council’s statutory response to the submitted Development Consent Order (DCO) for (the Orsted project) in 2018, all the relevant services and teams within the County Council were consulted on the applicant’s Environmental Statement, including Public Health. No health-related matters were raised by the County Council at that time, and it was accepted that more detailed issues were the responsibility of other statutory bodies such as District Councils who have responsibility for environmental health.*

It is interesting that NCC considers that such county wide, indeed region wide, matters should be devolved to district councils which are even less able to deal with public health matters than is NCC. In the experience of C&SPC, public health matters at district council level are usually referred to environmental health as there is *no* public health expertise at district level.

With regard to the Applicant’s submission, Councillor Aquarone tells us that Norfolk County Council’s Health and Wellbeing Board<sup>2</sup> is the forum for system leaders across the

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<sup>2</sup> The Board plays a key role in promoting the close collaboration of the health and care systems across Norfolk. It does this by bringing together health and social care providers, local government, the voluntary,

wider local health and care system. Its members include District Councils, the Integrated Care Board, Healthwatch, and others.

Councillor Aquarone states as follows with regard to the Wellbeing Board:

“I can find no mention of the Equinor project in any minutes dating back to summer 2018.”

Thus, the mystery is whether this project was ever given proper consideration and appraisal regarding public health and wellbeing issues arising from its implementation. This point is explored at length in the following paragraphs.

- b. Our own FOI request was dealt with promptly by NCC. We asked as follows:

*This (FOI) concerns Application by Equinor New Energy Limited for an Order Granting Development Consent for the Sheringham Shoal: Offshore Wind Farm Extension Project and Dudgeon Offshore Wind Farm Extension Project Equinor claim that they met with “NCC Public Health Team” on 6 April 2022 “to agree methodology and the approach to assessment” of the effects of their proposed project on the health and well-being of the population of Norfolk. They further claim that “NCC acknowledges this engagement and states that the methodology for the Health Impact Assessment is appropriate and based on best practice.” I am seeking the minutes of this meeting, including who attended, details of the discussion, any notes which were taken in the course of the meeting and the decisions arrived at.*

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community and social enterprise sector, and other partners. We work to improve the health and wellbeing of people in Norfolk and Waveney. We do this by:

- Prioritising prevention
- Tackling inequalities
- Integrating our way of working
- All working towards a Single Sustainable Health and Wellbeing System

We're responsible for producing a set of priorities for health improvement. You can read about these in our Joint Health and Wellbeing Strategy.

We are part of the Norfolk and Waveney Integrated Care System, alongside the Integrated Care Partnership. Our members

Our members are the health and wellbeing system leaders from organisations across our area. They include:

- Councils
- Norfolk and Waveney Integrated Care Board (ICB)
- Healthwatch Norfolk
- Representatives from the voluntary, community and social enterprise (VCSE) sector
- Norfolk police and the Police and Crime Commissioner (PCC)
- Main providers of health and care services in Norfolk

<https://www.norfolk.gov.uk/what-we-do-and-how-we-work/policy-performance-and-partnerships/partnerships/health-partnerships/health-and-wellbeing-board/about-the-board>

- c. In response to our request, NCC copied to us the following minutes prepared by Royal Haskoning DHV (RHDHV) dated 6 April 2022. We did not receive, as we had requested, copies of "*any notes which were take in the course of the meeting*". Nor, apparently, did NCC keep its own minutes or notes of this meeting.



**Minutes**

HaskoningDHV UK Ltd.  
 Industry & Buildings

Present: [REDACTED] (Prevention Policy Manager NCC), [REDACTED] (Public Health Expert Advisor NCC), [REDACTED] (JA), (Royal HaskoningDHV), [REDACTED] (Royal HaskoningDHV), [REDACTED] (RP), (RPS - advising Royal Haskoning DHV), [REDACTED] (RPS - advising Royal Haskoning DHV)

Apologies: Click to enter "Apologies"

From: [REDACTED]

Date: 06 April 2022

Location: Online

Copy:

Our reference: PB8164-RHD-ZZ-ON-Z-0037 Health Assessment Meeting Apr22

Classification: Confidential

Enclosures: Click to enter "Enclosures"

**Subject: EIA health methods**

Number	Attendee	Details	Action
<b>Agenda / Purpose the meeting</b>			
1		Agenda: 1) Introductions (All) 2) Project and application process overview (JA) 3) Health assessment (RP) 4) Q&A (All) 5) Next steps in the process (JA/RP) 6) AOB (All)	
2		<ul style="list-style-type: none"> <li>■ The meeting formed part of formal consultation offered by Royal HaskoningDHV, on behalf of Equinor, to the NCC.</li> <li>■ The meeting discussed the forthcoming Environmental Impact Assessment (EIA) for an offshore windfarm project at Dudgeon and Sheringham Shoal.</li> <li>■ An overview of the application was provided, including the main features of the project, the onshore works and the Development Consent Order (DCO) process.</li> <li>■ The port implications of the project were discussed including that a specific port and manufacturing site for the turbines has not currently been identified. NCC Public Health representatives noted the potential benefits to the local economy and jobs from skilled employment relating to the offshore wind industry, including the Energy Coast initiative. It was noted that it is usual for a windfarm project to not fix the</li> </ul>	



Number	Attendee	Details	Action
		<p>manufacturing and port locations till after the planning consent.</p> <ul style="list-style-type: none"> <li>■ The onshore cable route was discussed including its connection to the Norwich Main substation. It was noted that wider strategic electricity grid network constraints dictate the cable route length.</li> <li>■ The transitory nature of the cable burying works was discussed. It was noted that when appropriate construction practices are used, such works are unlikely to result in significant public health effects.</li> <li>■ There was a discussion of relevant health in EIA guidance. This showed the methods proposed for the Environmental Statement (ES) health chapter align with international and national good practice, as published by the Institute of Public Health (2021) and International Association for Impact Assessment and European Public Health Assessment (2020), and as referenced as good practice by the World Health Organization (2022) and Public Health England (2020).</li> <li>■ It was discussed that the methods presented in the preliminary environmental information report (PEIR) health chapter were an earlier iteration of those methods and would now be updated to reflect the recent publications.</li> <li>■ A revised methods statement was talked through, this was a set of tables for sensitivity, magnitude and significance based on the Institute of Public Health (2021) figures T09, T11 and T12.</li> <li>■ It was agreed that the health assessment should follow guidance in taking a public health, population health, approach to determining the likely significant health effects of the project, including articulating any significant health inequalities.</li> <li>■ <b>The methods proposed for the ES health chapter were agreed by NCC public health team.</b> NCC Public Health representatives welcomed the methods as providing a consistent and transparent basis for explaining the public health implications of the project.</li> </ul>	
<b>Actions/Next Steps</b>			
		<p>The next steps were discussed, including the publication of the ES health assessment based on the agreed methods. The opportunity for further engagement was offered to discuss the ES findings and develop a statement of common ground.</p>	

- d. The ExA will note that the sole engagement at that meeting on questions of wellbeing and public health appear to have been in the person of



Professor Andy Jones from the University of East Anglia who acted as an advisor to NCC. The other person in attendance from NCC was Ms Jane Locke, who at that time was a Prevention Policy Manager. In the next section we examine the role of a Prevention Policy Manager as it engages the complex matters to be investigated if we are to properly understand the health and wellbeing implications of a project such as that under consideration here.

- e. As far as we are able to ascertain, a Prevention Policy Manager has responsibility for “*Public Mental Health, suicide prevention, health inequalities, vaccination inequalities, drugs and alcohol policy, community safety*”. Ms Locke apparently no longer works for NCC and it has not been possible to examine her qualifications and experience. However, one of the current incumbents of a post bearing the same title appears to be a highly qualified person with a PhD in history, extensive administrative experience, as well as experience in student support<sup>3</sup>. Another current incumbent of a post with the same title appears to be a graduate in English Literature with an MA degree in Public Administration<sup>4</sup>. While the latter person evidently speaks the Ethiopian/Eritrean language Tigrinya, neither this person nor the other bearer of the title Prevention Policy Manager appears to have a formal qualification in any public health related discipline.
  
- f. According to the meeting minutes as recorded by RHDHC, questions of public health and wellbeing impact were considered by Professor Andy Jones. Professor Jones is certainly prominent in his field<sup>5</sup>. He is a distinguished environmental scientist who has undergraduate and postgraduate qualification from the University of East Anglia’s (UEA) highly rated School of Environmental Science. He now works in the UEA’s medical school. His expertise is summarised in what are presumably his own words as:

*Environments and Healthy Lifestyles, Healthy Lifestyles, Environmental Sciences, Public Health, Health Prevention Activities, Use of geographical information systems in the study of the environment and health, Development of asthma in childhood.*

*Video: UEA study finds dog walking can keep owners healthy in later life*

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<sup>3</sup> [REDACTED]

<sup>4</sup> [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

<sup>5</sup> [REDACTED]

*Academic Background*

*1992 School of Environmental Sciences, University of East Anglia: BSc (Hons) in Environmental Sciences (1st class).*

*1996 School of Environmental Sciences, University of East Anglia: PhD entitled Health Service Accessibility and Health Outcomes.*

*Biography*

*My primary research focus is on the environmental influences on population health. My core work explores the manner by which characteristics of the social and physical environments act to influence the health of the population. Previous work I have led in this field includes research on the environmental determinants of accidental injuries, and various projects examining the relationship between access to health services amongst rural populations and health outcomes.*

*I moved to the Norwich Medical School in Autumn 2012, having previously been based in the School of Environmental Sciences at UEA.*

- g. With all due and proper respect to Professor Jones, we invite the ExA to consider whether Professor Jones' areas of expertise meet the complex requirements for assessing the health and wellbeing impact of the proposed project. They do not engage with the complex issues concerning method and methodology we have raised here and in previous submissions. In particular, they deploy a formulaic methodology – the framing of the problem – which does not engage with health and wellbeing impacts. Professor Jones' experience in using geographic information systems is indicative of a methodological approach which derives conclusions from high level secondary data rather than from collection and use of detailed primary data as would be indicated in the approach we have described in previous submissions to the ExA. Such approaches engage with the all-important detail of current and future implications of a large-scale project.
- h. Page 2 of the minutes report that “NCC Public Health representatives welcomed the methods as providing a consistent and transparent basis for explaining the public health implications of the project.” Once again, we say to the ExA that this is not so. The approach which was adopted was only consistent and transparent in not examining either the public health or the wellbeing implications of the project.
- i. We note here that the Director of Public Health, at that time Dr Louise Smith, was apparently not present at the meeting between NCC and RHDHC on 5 April 2022 or at any other meeting concerning health and wellbeing impacts of the project.
- j. We now draw to the attention of the ExA the content of Doc. No. C282-RH-Z-GA-00215 12.17 (Draft) which has only come to hand today, 23 May 2023. This is revealing because in table 13 page 47 of this document we find the following statement in row 2 column 1 wherein it is stated that “The potential impacts of the Projects on human health are assessed in Chapter 28 - Health [APP-114]. **The adverse impacts are**

**considered not significant in EIA terms** (our emphasis). The cumulative impact assessment also concluded no significant impacts on human health.” This confirms our view that assessment methodology was inappropriate to and unconcerned with a proper examination of the impacts on human health and wellbeing. **As we have suggested on many occasions, an environmental impact assessment (EIA) is inappropriate, and further evidence that considerations of human health and wellbeing have not been properly examined.** This view is shared by us and evidently by the Applicants themselves, note their judgement “The adverse impacts are considered not significant in EIA terms” and that they have not dealt with these matters in terms of health and wellbeing. And we invite the ExA to consider NCC’s statement in row 2 column 2 of the table. This confirms that they have given no substantial consideration to these issues in their discussions with the Applicant.

Table 13: Topics agreed, in discussion or not agreed in relation to human health

ID	The Applicant Position	NCC Position	Positi
<b>EIA – Assessment Methodology and Impact Assessment</b>			
1.	The assessment methodology for the Health impact assessment, as set out in <b>Chapter 28 - Health</b> [APP-114], is appropriate and based on best practice.	This was agreed at meeting between the Applicant and NCC Public Health on 6/4/22. It was restated at paragraph 10.1 in RR-064.	Agree
2.	The potential impacts of the Projects on human health are assessed in <b>Chapter 28 - Health</b> [APP-114]. The adverse impacts are considered not significant in EIA terms. The cumulative impact assessment also concluded no significant impacts on human health.	NCC Public Health agrees that there are unlikely to be any significant, long term adverse health impacts from the proposal compared to baseline conditions (paragraph 10.1, RR-064).	Agree
<b>Points raised by Norfolk County Council Relevant Representation [RR-064]</b>			
3.	Norfolk County Council provided comments about public health in Relevant Representation [RR-064]. The Applicant provided responses in REP2-039, lines 68-70.	NCC accepts these responses and has no further comment. If public concern about electromagnetic fields (EMF) arises the Applicant will address it through Project communication channels.	Agree
4.	In PD-012, the Examining Authority puts two questions to NCC regarding mitigation and assessment scope (Q2.6.4.6 and Q2.6.4.7 respectively).	The NCC Public Health team has responded to the Examining Authority. The NCC Public Health team confirms that it requests no additional mitigation and expresses a willingness to continue engaging with the Applicant as needed.	Agree

- k. At the very last minute of preparing this report, we have succeeded in seeing copies of the following documents:
- i. Sheringham Shoal and Dudgeon Offshore Wind Farm Extension Projects Revision C Deadline 4 May 2023 Document Reference: 12.17
  - ii. Minutes of meeting, Subject Norfolk County Council Public Health and SEP and DEP: Re: Hearing 3 - Item 3 (iii) – Health, Date 26 April 2023, Time 1400-1500 attended by Jane Locke [JL] (NCC Public Health), Stephen Faulkner [SF] (NCC), Daniel Richards [DR] (Equinor), Ben Cave [BC] (Ben Cave Associates Ltd)
  - iii. Minutes of meetings of NCC Planning and Highways Delegations Committee 22 October 2022.

- l. In none of this extensive documentation is there any evidence that consideration of health and wellbeing impacts of the proposed project has moved in any way from its original inappropriate EIA approach to these matters. We refer in particular to the summative statement in the Minutes of the NCC Planning and Highways Delegations Committee of 22 October 2022, Section 5.
- m. Finally, we draw to the attention of the ExA and apologise for doing so once again, the failure of the Applicant to address the many questions we have posed in response to the request to us by the ExA chair, Ms Menaka Sahai, after the Public Examination in Norwich on 17 January 2023.

**FINALLY, WE TAKE THE LIBERTY OF NOTING THAT NCC HAS REQUIRED THE APPLICANT TO PAY FOR THE ADDITIONAL WORK IMPOSED UPON THE COUNCIL IN DEALING WITH THESE MATTERS, HOWEVER INADEQUATELY. WE WOULD REMIND THE EXA THAT C&SPC HAS RECEIVED NO SUCH SUPPORT IN PREPARING THE PRESENT AND ASSOCIATED DOCUMENTATION IT HAS SUBMITTED.**