

Sent electronically only

8 June 2020

Dear Sirs,

#### Planning application F/4120 Daneshill soil treatment

I am writing to express my strong objection to the above planning application for a waste soil treatment plant to be located near to Daneshill Lakes Nature Reserve, between the villages of Ranskill and Lound.

I have some understanding of the historic use of the land in question and therefore the need and desire to cover this land with affordable earth and soil in order for it to be landscaped for the benefit of future generations. I do however question and object to the need for asbestos contaminated soil to be treated on the site and for the site to be used for a period of ten years to remove asbestos contamination from soil.

Whilst I am writing this letter in a personal, not professional capacity, it may assist those considering this application to have an awareness of my background in relation to asbestos and the management of such.

I was formerly one of Her Majesty's Inspectors of Health & Safety, working for the Health & Safety Executive before starting my own company providing independent expert opinion in relation to ongoing court proceedings. The vast majority of my work for the past ten years has been related to asbestos.

I have been instructed in over a thousand court cases involving the management of asbestos in circumstances where it has been alleged that individuals have been exposed to asbestos dust and have developed an asbestos related disease.

Asbestos is a unique industrial hazard insofar that it is capable of causing a fatal disease at very low levels. It has been widely known and accepted since the mid 1960's that the only level of asbestos where no risk of developing mesothelioma, an aggressive and invariably fatal form of cancer (of the pleura, peritoneum or, in rare cases, testicles) is nil. With the possible exception of radiation, I am not aware of any industrial hazard that can kill at levels well below the control limits.

In many of the cases I have been instructed in, individuals and sometimes those in their thirties and fourties have developed mesothelioma from extremely low levels of exposure to asbestos. Many of those individuals were exposed to very low levels of asbestos dust.

Examples of causes of mesothelioma in cases I have been involved in include:

- Shopworkers where displays were put up in stores which involved screws being inserted and removed by others from asbestos ceiling tiles;
- A store manager who was exposed to asbestos on two occasions when releasing a lift which had been overloaded and was present in the lift motor room which had an asbestos brake lining;
- A construction worker who, as a 15 year old apprentice, worked on the same construction site as others applying asbestos materials;
- A fashion designer that lived around a mile away from an asbestos cement factory during her childhood;
- School pupils that recall asbestos mats being used in science lessons and being in a poor condition;
- A school pupil that entered the area below the stage in the school hall where asbestos materials were present;
- A solicitor who had been present when maintenance engineers had serviced and maintained a storage heater which contained asbestos; and
- A Dentist who had used asbestos paper when making castings for crowns.

Behind every single case, there is a family that has lost a loved member as a result of the inhalation of what many would consider to be trivial or very low levels of asbestos, including chrysotile (white) asbestos which many today still consider to be safe. It is not.

There are many aspects of the application which cause me concern as I do not think the risks associated with asbestos exposure have been considered in anywhere near enough detail by those agencies writing reports in support of this application.

The Air Quality Impact Assessment immediately causes me concern as it contains the following quote which is completely at odds with what is known about asbestos:

"Prediction is very difficult, especially about the future." Niels Bohr, Danish physicist (1885 - 1962)

Sadly, where asbestos is released, we know from thousands of deaths annually in the UK each year (estimated 7,000) that where people are exposed to asbestos dust, a significant number will die. This is therefore a most unfortunate quote to use, when discussing what is probably the most hazardous industrial dust which has ever been identified.

The papers also appear to suggest that asbestos is not carried on the wind for long distances and only considers there to be a hazard to the residents of Daneshill Caravan Park and Loundfield Farm. Again this theory is not supported by history.

The epidemiology and history does however show a much higher prevalence of mesothelioma in areas where asbestos dust has become airborne.

For example, the medical reports for the London Borough of Barking show a higher rate of mesothelioma for those that lived within several miles of the Cape Asbestos factory. There is a higher incidence of mesothelioma for people that live on the island of Cyprus, where an asbestos mine operated historically. In the Aviaries area of Leeds, asbestos dust was found in significant amounts in areas which were near to the old J W Roberts asbestos manufacturing site.

Asbestos dust is known to be carried for up to long distances and it could easily travel to much larger populated areas than Daneshill Caravan Park and Loundfield Farm on a windy day. Whilst Lound is around 1.5 km away from the proposed site, other larger towns and villages, including Blyth and Retford itself are within the range where elevated levels of asbestos could arise in those areas in the event of a prevailing wind if it is released from the soil picking operations.

Whilst the application papers suggest only a small risk of exposure to asbestos dust to residents of Daneshill Caravan Park and Loundfield Farm, there is an underlying tone in the paperwork which I find to be distasteful.

Whilst I am sure that this was not deliberate, my reading of the application is that the residents of the Caravan Park in particular should not have the same rights as if this happened to be a small leafy hamlet on the doorstep of the site. It is almost as if the Planning Committee can disregard their safety on the basis that this is a caravan park.

This is not the case as everyone should be treated equally and it is completely irrelevant as to whether Daneshill Caravan Park is the home to people from a particular community or Royalty. If anything, any decision should ensure in particular that the vulnerable in society and those which otherwise would not have a voice are protected. I know from my previous enforcement background with HSE and carrying out interventions involving similar developments that this could apply to some of those living on that particular site.

Additionally, the application makes no mention of the fact that there is a well visited nature reserve in close proximity to the site in question (Daneshill Lakes) or that asbestos dust can easily travel and be deposited much further away from that site.

I note that some of the applications refer to soils containing some asbestos materials which are considered to be too hazardous to be carried out on site. These include soils which contain loose asbestos fibre, asbestos pipe lagging debris and asbestos insulation board (AIB) debris. See 5.2.4 of Appendix C to the planning application.

The reason for this is not specified but presumably this relates to the friability of those asbestos containing materials and also type(s) of asbestos present in them. Crocidolite and Amosite (both amphiboles) are considered to carry a greater risk of developing mesothelioma than Chrysotile (serpentine).

There is no mention of sprayed asbestos and no mention of the fact that many other asbestos materials contain amphibole (crocidolite and/or amosite). It is well known that sprayed asbestos contains very high levels of crocidolite (typically 85%) and results in the highest releases of asbestos dust reported in various studies, such as those considered by Surgeon Commander Peter Harries of the Royal Navy during studies carried out during the late 1960s.

Additionally, in the event that the asbestos cement materials are to be contained within the contaminated soil, there is no mention of the fact that many asbestos cement materials contain crocidolite and/or amosite (both amphibole types of asbestos).

It is a common misconception that amphibole asbestos was only added to specialist asbestos cement materials such as high pressure pipes. Crocidolite and/or amosite were routinely added to many asbestos cement materials because it resulted in faster manufacturing rates. This is confirmed in historic literature from Cape Asbestos and also in the Selected Written Evidence to the UK government's Advisory Committee on Asbestos (1977).

Whilst a matter for medical opinion, I am aware that the three types of asbestos that were widely used in the UK historically (crocidolite, amosite and chrysotile) all pose different risks of developing mesothelioma. The potential risk was considered by Hodgson & Darnton of the Health & Safety Executive and their studies, based on epidemiology reported a relative risk of 500:100:1 for crocidolite, amosite and chrysotile respectively.

A significant amount of the chrysotile imported into the UK was contaminated with tremolite asbestos, which is another type of amphibole and this then increases the risk of exposed persons developing mesothelioma. Amphiboles are much shorter, sharper fibres when viewed under a microscope. Serpentine (chrysotile) is a thinner, more flexible fibre and often looks like a snake when viewed under a microscope (hence the term serpent(ine)).

The procedure which is alluded to in the planning application is that asbestos contaminated soils are transported to site, where they are then sampled and either accepted or rejected if the asbestos content is too high.

This process relies therefore too heavily on the human element of decision making and human error. Experience says that samples of soils are only as good as that part of the material which is sampled. The potential is that many areas are free from heavy asbestos contaminants and therefore pass the sample when large amounts of asbestos contaminants are formed in other parts of the soil.

I have reported in cases where asbestos lagging was deliberately concealed within scrap metal, in the bottom of skips and sold onto third parties for recycling. The clean metal was placed at the top of the skip, on the top of asbestos debris. There is a real prospect that those disposing of soil would attempt to conceal more hazardous materials within the soil being processed on site.

Once the soil has been tipped it presumably is very difficult to reject without releasing asbestos dust at concentrations well above the detection limit of 0.01 f/ml (which incidentally does not represent and should not be considered to be a safe or acceptable level of exposure to asbestos dust). The application makes no account of this and simply assumes that any policies or procedures will prevent this from taking place. I can say with a high degree of confidence that it will not.

To give an illustrative example as to why 0.01 f/ml should not be considered to represent a low level of asbestos exposure, this figure is expressed in terms of millilitres of air. 0.01 f/ml is the same as 10 fibres per litre of air (1000 ml = 1 litre). An average person, at rest, inhales around 8 litres of air a minute (based on 1997 MRC guidance). A person exposed to asbestos dust concentrations of 0.01 f/ml will inhale 115,200 asbestos fibres every 24 hours or 42 million asbestos fibres in a calendar year. They will inhale over 420 million asbestos fibres in a 10 year period that this application runs over. That level of asbestos release is unnecessary and unsound.

I have seen no evidence whatsoever that the applicant has attempted to measure asbestos dust concentrations in the villages surrounding the site before any works have been undertaken or thereafter. This to verify whether its activities are releasing asbestos dust into the air. Without any such tests, how can local communities be re-assured that the activities proposed are safe?

I would have thought it reasonable for the applicant to have measured ambient asbestos dust concentrations at specified points in advance of this application, including in each local area where residential properties are present and on enough occasions to be a representative sample of those areas. This would include Daneshill Caravan Park, Loundfield Farm, Mattersey, Lound, Everton, Clayworth, Gringley, Ranskill, Retford, etc.

In the event of a successful application (which I clearly am not in favour of), then a condition could be placed that asbestos dust concentrations are closely monitored in those areas to determine whether local residents are being exposed to asbestos dust at levels above those currently present in the ambient atmosphere in those areas.

This and an insurance policy which means that in the event that an individual is unfortunate enough to develop mesothelioma in later life they can choose to seek compensation from the applicant or any corporate successor if they can establish the necessary tests relevant to a civil claim. Currently the causation test is whether their risk was 'materially increased' as a result of exposure to asbestos dust. This is a matter for the Court but the government's IIDB guidance identifies material exposure to asbestos dust as:

"Exposure to asbestos, asbestos dust or any admixture of asbestos at a level above that commonly found in the environment at large."

In relation to the local area, clearly a baseline would also assist the applicant in being able to show whether the activities proposed, if the application is successful, did not increase the level of asbestos dust in the local environment. There is no such proposal in the application.

In every incident I investigated during my career with HSE, often using Advanced Investigation Methods (AIMS), the underlying cause of those incidents invariably were failures in understanding of the hazards, commercial pressures and the British culture of trying to do work as quickly and easily as possible. Where systems put safety 'barriers' in the way, those barriers (i.e. policies and procedures) were and are often bypassed to make life easier.

Whilst these matters cause me deep concern in relation to the application, I would question the need for asbestos sorting operations to be carried out at that site at all.

In the management and planning of Health & Safety, there is a well-known and widely accepted hierarchy of control measures.

The first question when considering a potentially hazardous operation is whether the risk can be eliminated by not carrying out the work at all. In my view the answer to this obvious and there can be no justification for the sorting of asbestos contaminated soils on this site which is in too close a proximity to residential areas.

I would much rather see other waste material such as inert compostable waste (i.e. brown bin waste) used and this covered in the non-asbestos containing top soil when the site is landscaped. Smells and aromas do not tend to kill people, asbestos however does.

Whilst HSE and the wider government uses a model where there is an acceptable societal risk for the placing of essential hazards such as petrochemical works (mainly those risks are related to incidents such as fire/explosion risks). It can be easily argued that the processing of chemicals and refining of oil are essential tasks for the society in which we live.

The sorting / removal of asbestos contamination from soil before that soil is used for landscaping purposes seems to me to be a much weaker example of an essential operation for the society in which we live.

It is further the case that Epidemiology, whilst having a place in any decision making process, does not take into account the risk to susceptible individuals. Mattersey, Everton, Lound and other local villages have a high amount of children as they are excellent places to bring children up. The risk to children is greater than the risk to older individuals. This is mainly due to the fact that the asbestos

inhaled will remain in their lungs for much longer than it would for older people. Whilst mesotheliomas can develop within 10 years of exposure, the majority of mesotheliomas are known to develop 30 – 50 years or more after exposure.

It is therefore the case that, whilst many adults will have died from other causes, children will not and it is their generation who are at most risk from this application.

I hope that this provides the Planning Committee with a summary of my concerns and reasons why I do not think that this application should be approved. I would of course be more than happy to provide the Applicant or Committee with any public domain literature which is in my possession which supports my views.

I would like to take this opportunity to thank those on the Planning Committee for the time spent considering my views, which I am sure are shared with other residents in local villages.

In the event that the Planning Committee wish to consider granting the application, then I believe that as a minimum, strict conditions should be placed on the site to arrange for atmospheric monitoring of asbestos dust to be carried out in various locations and an insurance policy to be in place at all times that covers future potential claims for asbestos related disease. This in addition to very stringent precautions and close supervision at the site itself.

Naturally it may also be in the best interest of the applicant to have such in place as, in the event it can demonstrate comprehensively that the concentrations of asbestos dust did not increase because of the proposed activity, then any claim for damages will almost certainly fail.

I also believe that such evidence of monitoring and insurance should be retained for a period of one hundred years after the last date that the site operates. This to take into account the potential maximum life expectancy of those who could be affected by its operations.

Please accept my apologies if this letter jumps around a bit. This is due to having a very high workload and additional responsibilities / pressures on a personal level due to the Covid-19 pandemic and a member of my close family in our household being immunosuppressed.

Many thanks once again for considering my concerns. Please also find attached a copy of the signed slip requesting that I be able to attend any planning meeting relating to this case.

Yours sincerely



Mr C H Chambers



#### TO BE NOTIFIED OF COMMITTEE DATE

Application reference F/4120



I would like to be notified if this application is to be reported to Committee as I may wish to attend and/or register to speak.

