Part 2 Our list of Inaccuracies in the Review Outcome letter, submitted on September 10th 2020.

	Inaccuracy	Reason
1	Having considered the examples you have provided which you believe show [redacted]'s maladministration, we see these more as concerns about the level of service he provided during the investigation. This includes your concerns about the three month wait for him to ask you for evidence. What we are looking at when considering a review request is whether there is evidence that shows our final investigation decision is flawed. You have not shown however that this caused us to make a flawed decision or that the evidence you sent was not considered.	[redacted] never *asked* us for evidence. It is inaccurate for you to have used the wording: "This includes your concerns about the three month wait for him to ask you for evidence," because it wrongfully implies that [redacted] did in fact ask us for evidence, and he most certainly did not. We waited for three months for him to do so, and when he still had not done so by March 18th 2016, I sent him an email to the effect that as we had been expecting him to ask us for our evidence, and that as he had not done so, we were now sending it nevertheless. We did provide evidence which showed that [redacted]'s decisions were flawed and were not only about the level of service he provided. For example, the original complaint referred to DECT cordless phones, smart meters and other technologies, but he left these out of his report. He supported PHE withholding the WHO IARC classification from the public by not putting it on their website because of their poor excuse that the preamble was too long, even though they had managed to do so for a long list of other possible carcinogens. He failed to find fault with PHE misinterpreting the WHO IARC classification by ignoring the evidence for DECT cordless phone signals being a possible carcinogen and failing to inform the public of this. He completely ignored the conflict of interest associated with AGNIR members being part of ICNIRP etc. Again, our concern was not just about the level of service provided during the investigation. Our concerns included that the *failure to approach the investigation in the right spirit resulted in a flawed decision*. The fact that [redacted] never asked us for evidence, the lack of a meaningful discussion, his failure to liaise and to ask for appropriate

		information or clarification as he went along, the loss of linked complaints and down-playing of the number of complainants, all points to a failure to approach the investigation in the right spirit due to bias. We hold that as [redacted] failed under all four points of the Mustill (1985) case that this inevitably led to a flawed conclusion on his part. As we have said, all points against procedural fairness on his part are indicative of his predetermination **not** to find maladministration.
2	Under question three and four you asked why *'given that the AGNIR report was half owned by PHE and commissioned by them'*, [redacted] *'rejected it as our evidence base and refused to assess it'*. You explained that you would like us to assess the conflict of interest, independence and the conclusion of the report, rather than the science of the report. You said this is our public duty and this should have been done as a minimum to assess for maladministration. <u>You also said you did not agree that the conflict of interest associated with AGNIR was 'managed'</u> and <u>PHE incorrectly stated that the report was independent</u>. <u>Our approach in determining whether there is maladministration is to look at what happened and compare that with what should have happened.</u>	We referred to the 'conflict<u>s</u> (plural) of interest associated with AGNIR'. These included not only the involvement of PHE but also that members of AGNIR were members of ICNIRP, the group who wrote the guidelines which AGNIR were assessing. It was made clear to [redacted] that the conflict<u>s</u> of interest included members of AGNIR (including the Chair) also being part of ICNIRP. AGNIR were assessing whether there was evidence for effects below the guidelines which some of them were responsible for, which is a conflict of interest. [redacted] chose to ignore this. We corrected this in our response to his Provisional View, but he completely ignored it again in his final report. We notice that you have also ignored this important conflict of interest in your review decision letter and incorrectly referred to a single conflict of interest yet again. What happened is not what should have happened, with respect to PHE, AGNIR, [redacted] or yourselves. PHE stated that AGNIR was an independent scientific advisory group. As this was not the case it means that what should have happened did not happen. By your own definition this means there was maladministration.

3	We can look at whether an organisation has used its discretion reasonably but we will only question a discretionary decision if we think something has gone wrong in the decision-making process.	PHE *did not* use its discretion reasonably and something *did* go wrong in the decision-making process. For most aspects the majority of studies have described adverse effects. The balance of evidence in favour of harm therefore justifies precaution. In order for PHE to use their discretion reasonably they would need to inform the public about the existence of evidence of harm at the very least in order for those with safeguarding duties to be able to act in a way that will not cause harm to others. PHE responded to the AGNIR 2012 report with *"adverse effects below guideline levels have not been demonstrated"*. This was a factually incorrect statement which hid the evidence from the public. This led to a dramatic increase in involuntary radiofrequency exposures, including the compulsory and prolonged use of wireless devices by children in schools. What happened is not what should have happened. Giving the public and decision makers incorrect information is not using their discretion reasonably, it is being dishonest and hiding the evidence. This goes against their Code of Conduct; something has gone wrong in their decision-making process.
4	a) The difficulty we face in your complaint is that there is a difference of opinion between PHE and the complainants. PHE's conclusions on the electromagnetic fields is based on the evidence presented by scientific studies from the UK, EU, and the WHO. b) You and the other complainants have directed us to a different set of studies that show Wi-Fi is harmful. c) This does not mean that PHE have given the public incorrect information but I acknowledge you disagree with this view. However, the different views you and the other complainants express do not show	a) PHE's conclusions on electromagnetic fields were based on the evidence presented by selective scientific studies from the UK, EU, and the WHO. Many studies were omitted and their conclusions did not reflect what most of the studies had described. b) We have also directed to scientific studies from the WHO. The International Agency for Research on Cancer (IARC) based its assessment of radiofrequency electromagnetic fields as 2B possibly carcinogenic to humans[1,2] on studies which also included research into the effects of exposure to the 2.45GHz frequency used for Wi-Fi.

	that we were wrong not to uphold your complaint.	Although we did also mention other Wi-Fi studies which PHE had ignored, this was mainly for the purpose of highlighting the fact that PHE are not fulfilling their commitment "to carefully continue monitoring the emerging scientific evidence". c) PHE did give the public incorrect information about the WHO IARC classification and you have been given this evidence. For example, they incorrectly stated that the IARC classification only referred to mobile phones, when it was clearly also based on studies showing significantly increased risk of tumours associated with cordless phone use and the classification was for all radiofrequency radiation. [1]Non-Ionizing Radiation, Part 2: Radiofrequency Electromagnetic Fields, IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, No. 102 [2]According to Baan et. al. (Lancet Oncology, 2011 Jul;12(7):624-6), the 2B "possibly carcinogenic to humans" classification of radiofrequency electromagnetic fields by IARC "was supported by a large majority of Working Group members".
5	You complain that PHE's advice on the risks associated with Wi-Fi is wrong and instead it should be advising people (and schools in particular) that Wi-Fi is potentially dangerous. It seems to us that an individual's view on PHE's guidance to the public on electromagnetic fields depends very much on their own opinion of the potential dangers of electromagnetic fields.	Concern about the fact that people, and children in particular, are being forced to be exposed continuously[3] to a class 2B possible carcinogen is not just a matter of an individual's opinion. Because continuous exposure to a possible carcinogen constitutes cumulative exposure and therefore a possible increased cancer risk, this is an extremely serious concern. [redacted], and ipso facto, you yourselves, have shown maladministration here by delegating responsibility for this valid concern to a matter of "personal opinion", while failing to recognise that PHE do give advice all the time on exposures and intake

		on other substances, but is being selective when it comes to exposure to microwave radio-frequency radiation. [3]PHE attempted to belittle this concern by comparing the 2B classification of radiofrequency electromagnetic fields to some selective 2B possible carcinogens, such as certain oriental pickled vegetables. This was a misleading comparison because exposure to these substances is neither continuous nor enforced.