Science Advisory Group (SAG) for the review of potential environmental contamination in Grenfell and North Kensington

Advice to Grenfell Tower Fire Ministerial Recovery Group

Minutes of Meeting #2 – 20 December 2018

Overview

At its second meeting, SAG considered home-grown plants; the merits of health screening, including biomonitoring; public communication and transparency around data from the review of land; the contractor's initial proposals for the soil investigation; and a draft paper by Prof Stec.

Conclusions and recommendations

1. Additional expert advice was sought on the risk of uptake of contaminants in home-grown plants. SAG agreed that this is expected to be very low considering plausible methods of uptake. Current advice to wash and remove skins from home-grown produce is appropriate in SAG's view. However, uptake may need to be reviewed, dependent on specific results from soil sampling as part of the soil investigation.

2. SAG advises that health screening is only of value to the public when data from testing can be meaningfully interpreted at an individual level, and treatment can be offered in response to any findings to benefit the individual's health. Currently, screening would not provide meaningful data to indicate the effects of the fire on individuals' health in a way that could be acted on to the benefit of the individual. A screening programme might itself raise further anxiety because it might imply a level of concern for health that is not warranted by the evidence. Every screening mechanism produces some level of false positives, and it is unclear what action would be taken in such instances.

3. SAG advises that biomonitoring (measurement of chemical compounds in the body) of the community would be of research interest, but is not relevant to public health management today. It would require an independent, epidemiological controlled study approved by an ethics committee and scientific review and informed consent (as it involves taking samples for reasons other than the treatment of the individual). SAG would be supportive of well-conducted research undertaken outside of this soil investigation.

4. SAG recommends that where members of the community present with symptoms that suggest further investigation is necessary clinically, this should be carried out. SAG endorsed spirometry (lung inhalation testing) in older children, monitoring of cardiovascular health and enhanced monitoring of respiratory and mental health for those presenting with symptoms.

5. SAG would benefit from paediatric expertise with a focus on respiratory conditions.

6. The soil investigation will be conducted under Part 2A of the Environmental Protection Act, which provides a means for local authorities to deal with unacceptable risks posed by land contamination to human health and the environment. For the purpose of this investigation, and determining whether contaminant levels found pose an unacceptable level of public risk, SAG recommends that more than a 'yes' or 'no' answer be given about whether land is contaminated or not. The contractor should give a detailed view of the level of risk and contamination, regardless of the category (1 to 4) into which the land may fall under Part 2A.

7. SAG recommends that the contractor should provide SAG and the public with the underlying data, the associated uncertainties and the assessment of the risk to public health represented by that data. The data should be contextualised and explained in language that would be readily understood by the public. Risk categorisations for human health (e.g. 'high', 'intermediate', 'low') should be developed by Public Health England, and should be clear and consistent from a clinical perspective.

8. SAG requested further detail on the literature review proposed by the contractor. SAG also requires a more detailed sampling plan for any pilot study (or phase two sampling) to have confidence in the proposed approach. SAG advises that the plan should be available to the public, and that public engagement activities should take place before any sampling begins, rather than in parallel.

9. SAG advises that there could be 'hotspots' of contamination deposited around where debris from the tower was found or still remains. Community engagement should be undertaken by the Multi Agency Partnership (MAP) or contractor to establish where debris fell and to enable searches in these locations. Analysis of samples by microscope may help the contractor to understand where particulates are present, how they were spread during or after the fire and where they ended up.

10. SAG advises that the contractor should receive details of effluents and contaminants from Prof Stec to inform what substances will be tested for in each sample taken and what analytical methods should be used to effectively test for these.

11. SAG reviewed a draft paper by Prof Stec which is under review for publication in a peer-reviewed journal. The paper informed SAG's view on priorities for the soil investigation and confirmed that the contractor's outline methodology for the investigation is appropriate for assessing the risks in more detail. The methodology will be discussed further when more detail is available from the contractor.

Actions

ACTION 2.1 – SAG Secretariat to share any new information from Met Office with SAG once produced.
ACTION 2.2 – Prof Whitty to confirm with NHS England that, as part of their data capture, they are capturing broader occupational/lifestyle data, as this could impact health measurements from individuals.
ACTION 2.3 – Prof Whitty to feed back to NHS England and PHE on the recommendation for spirometry and enhanced respiratory testing.
ACTION 2.4 – SAG Secretariat to establish what screening was done following 9/11, when and for how long, and feed back to SAG.
ACTION 2.5 – SAG Secretariat to arrange for a paediatric specialist to join SAG to assist future discussions on potential health impacts.
ACTION 2.6 – Prof Whitty to carry action forward to next meeting once initial data are available.
ACTION 2.7 – Prof Stec to produce a list of effluents.
ACTION 2.8 – SAG to review specific wording around Part 2A and categorisation of land in the EA specification for the tender action. SAG Secretariat to recirculate the specification.
ACTION 2.9 – SAG Secretariat to ask the contractor to share its secondary source list for the literature review.
ACTION 2.10 – Prof Stec to provide additional detail besides ACTION 2.7 to cover contaminants.

ACTION 2.11 – SAG Secretariat to request a more detailed community engagement plan via MHCLG.
ACTION 2.12 – SAG Secretariat to seek more details from the contractor on the sampling strategy both for the pilot study and for the Tier 2 assessment.
ACTION 2.13 – SAG Secretariat to ask the contractor to provide details of what will be tested for as well as all relevant accreditation.
ACTION 2.14 – SAG Secretariat to feed back to the EA to ensure that the raw data is made publicly available as part of the final report, and that documentation records this requirement.
ACTION 2.15 – SAG Secretariat to ask PHE to produce a draft of risk categorisations and definitions for SAG to review before this is applied to any results from the study or any public communications.
ACTION 2.16 – Dr Rubin to provide his comments on the local residents' questionnaire to MHCLG, via SAG Secretariat.
ACTION 2.17 – SAG Secretariat to set up a meeting between selected SAG members and MHCLG comms team in January 2019.

Members
Sir Patrick Vallance, chair
Dr Lindsay Bramwell
Dr Alexandra Freeman
Prof Ragnar Löfstedt
Dr Paul Nathanail
Prof Sir Anthony Newman Taylor
Dr James Rubin
Prof Sir Munir Pirmohamed
Prof Anna Stec
Prof Chris Whitty (in his capacity as Deputy Chief Medical Officer)

Apologies
Prof Robert Mokaya
Prof Len Levy

Others
Prof Andrew Curran (HSE Chief Scientific Adviser)
Government Office for Science secretariat