4.17 Deputy D.J. Warr of St. Helier South of the Minister for the Environment regarding PFAS (per- and polyfluoroalkyl substances) related medical assessments (OQ.206/2025):

Will the Minister advise what measures, if any, will be recommended to individuals who have undertaken P.F.A.S. (per- and polyfluoroalkyl substances) related medical assessments, resulting in intervention with medication or therapeutic phlebotomy to assist in minimising the possibility of ongoing exposure to P.F.A.S.?

Deputy S.G. Luce of Grouville and St. Martin (The Minister for the Environment):

As a result of report 3 from the Independent P.F.A.S. Scientific Advisory Panel, individuals who are eligible for P.F.A.S. clinical review are currently receiving, as the Deputy would think, individual and personalised advice from a doctor at the P.F.A.S. Clinical Service about the intervention and its effects. Report 4 from the panel is considering P.F.A.S. exposure across the whole Island, including environmental factors such as mains water supply, private water supply, food sources, soil, biosolids and other environmental factors. The specific recommendations in that report to reduce the amount of P.F.A.S. in the body will follow. That report will cover all Islanders and the report will not specifically target medically-assessed Islanders, who will be under their own clinical supervision from the P.F.A.S. doctors, but I am sure report 4 will have a great input for those doctors and provide them with more information as they treat these patients.

4.17.1 Deputy D.J. Warr:

I thank the Minister for his answer. I have got a report here, which is that the Jersey community blood test results for 2024 showed that 60 per cent of Islanders tested have a level that would warrant treatment according to the level the panel have deemed needing treatment. That 60 per cent is also not on borehole water. What does the Minister recommend these people should do?

Deputy S.G. Luce:

People should, if they are worried about P.F.A.S., contact the department. People who are under clinical review will follow the doctors' clinical advice, but I take the Deputy's point on board. I think in the first instance the people who have evidence of high P.F.A.S. levels need to speak to officers in my department and the Public Health Department about how they move forward. Certainly we are continuing to prioritise people with blood tests where they are required.