



Cabinet Office

Catherine Nalty &lt;catherine.nalty@

GRO-C

**Follow up to April 7**

4 messages

**Ruth Spellman** <maybury9@

GRO-C

15 April 2022 at 13:17

To: Catherine Nalty &lt;catherine.nalty@

GRO-C

Cc: Ruth Spellman &lt;maybury1408@

GRO-C

Dear Catherine,

Thank you for the update on the Inquiry so far and also the outline timetable going forward. It was also important to be reminded of all those cases which have come forward since the Inquiry began who have been impacted by the toxic legacy of contaminated blood.

You said that there is an opportunity to contribute to the closing statement of the Inquiry and that the closing statements will primarily come from the legal teams representing the victims. I shall be sending my views to Collins Solicitors who represent me but I would also like you to receive my conclusions and recommendations based on my personal thoughts and feelings, having given evidence in 2019 and with the benefit of the powerful evidence given by so many others who have been implicated or affected.

As I said on the call on April 7th, it's important that the Inquiry impact is not diluted by the passage of time, by more recent events such as the Covid epidemic or distracted by the complex issues of what would or would not constitute 'compensation'.

The Inquiry has done amazing work to establish the facts as far as possible, and to set the record straight for the benefit of the living and generations to come. And it's hugely important that it sees the light of day with maximum impact on policy makers, practitioners and the way we handle public health concerns and complaints in future.

We still need to ensure that the UK has enough blood to meet our needs and that it is tested by the best available means and therefore free from viruses like Hep C. The progress we have made since the Covid epidemic and the advances we are making in immunology will be worth very little unless the right lessons are learned from this Inquiry.

Some of the other critical questions are :-

1. Who knew what and when,
2. The extent of deceptions and denials which have hampered any constructive investigation or redress so far,
3. The extent of failures by the medical establishment, including those attributable to individuals and organisations named in the Inquiry,
4. The extent of other failures in the way people were treated, including the absence of practical and psychological support to those who were affected, their primary carers and family members,
5. The culpability of the officials/ public servants whose duty it was to respond to people affected as concerns were raised, and failures in disclosure of information to patients and families.
6. The insufficiency and inconsistency of and between the schemes of support which persist to the current day,
7. The particular accountability of senior civil servants and ministers over at least 30 years to take timely and appropriate action and their collective failure to take any responsibility until the Inquiry was commissioned. Even now there is a culture of denial amongst some of our most senior leaders which is apparent in their evidence to the Inquiry.

1. The destruction of public records which make claims and counter claims more difficult to prove

What continually haunts all of who have been involved is the living legacy of the contaminated blood scandal. The way events of 30 plus years ago are still affecting the lives of victims, spouses, siblings, children and grandchildren as well as those who are still living with life threatening diseases from being given contaminated blood.

Financial hardships including career sacrifices, loss of employment and pension rights, anxiety and stress caused by endless hospital visits, tests and treatments which have affected patients, their carers and families and turned family life 'upside down'. And of course the inter generational impact. These consequences have been evidenced during the Inquiry and answers to the questions raised, commitment to clear remedial actions and compensation are all critical to achieving closure for all the victims.

In my view the compensation awarded needs to reflect the gravity of the oversights and inadequacies which have been evidenced, their consequences, and the sacrifices people have made irrespective of whoever they are or wherever they live in the UK and an award needs to be implemented as soon as possible.

I hope this is a helpful summary and that you will be able to feed it into the process

With very best wishes