House of Commons: Written Statement (HCWS146)

Department of Health

Written Statement made by: **Parliamentary Under Secretary of State for Public Health (Jane Ellison)** on 20 Jul 2015.

Infected Blood

My noble Friend Lord Prior of Brampton has made the following written ministerial statement.

Before 1991, thousands of patients contracted HIV, hepatitis C, or both viruses, from treatment with NHS-supplied blood or blood products. This is aptly described by many as one of the great tragedies of modern health care and on the 25 March 2015 the Prime Minister apologised on behalf of the government to all those that were infected. I would like to start by repeating this sentiment and state, on behalf of this Government, how sorry we are for what happened and for the distress caused to those affected and their families.

In March, Lord Penrose published the report of his public inquiry into infections acquired in Scotland. As infection occurred before devolution, this is of relevance for the Westminster Government. Lord Penrose scrutinised events over a period of nearly 18 years between 1974 and 1991. The Report, together with over 5,000 documents from the period 1970-85 which have already been published by Government provides a comprehensive picture of events and decisions made. We have also committed to releasing all additional documents from 1986-1995 late this summer.

Lord Penrose made one recommendation: to take all reasonable steps to offer a hepatitis C test to everyone [in Scotland] who had a blood transfusion before September 1991 and who has not been tested for hepatitis C. In England, guidance to GPs has been issued over the years by the Department of Health, the NHS, and other health organisations which recommend that a hepatitis C test should be offered to patients who received a blood transfusion in the UK before 1991 or were treated with blood products before 1986. This can currently be found on the NHS Choices website. In light of Lord Penrose's recommendation, the Department will be acting to ensure that GPs are reminded of this duty.

The terms of reference of the Penrose Inquiry did not include financial support for those affected. However for some time we have been listening to the many concerns about the existing arrangements and have been considering how we might improve that support. Concerns have been raised by individuals that have been affected, MPs, and the All Party Parliamentary Group (APPG) on Haemophilia and Contaminated Blood, and include: the complex nature of the organisations, and the criteria for, and charitable nature of, some payments. I would therefore like to briefly acknowledge the work of all the MPs who have raised the profile of this tragedy. Most significantly, however, I would like to recognise the work of affected individuals, and their representatives, who have tirelessly campaigned for many years.

On the 25 March the Prime Minister also announced that £25 million would be allocated to ease transition to a reformed system of support for affected individuals. While no decisions have yet been made on how this money will be spent, I must emphasise that the money will not be used for administrative costs, but will be used appropriately to support any transitional arrangements once we have consulted on how a new scheme might be structured.

Transition to a reformed scheme remains a priority for this Government. Decisions on the overall DH budget from 2016-17 onwards will be determined as part of the forthcoming Spending

Review.

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While I understand that beneficiaries to the current schemes may be frustrated by this wait, this is an extremely complex and sensitive area and any reform plans must be carefully considered before a consultation can be launched.