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To Jeremy Hunt MP

Thank you for your e-mail of 14 October 2012, enclosing correspondence from your constituent, Mr Michael Dorricott, regarding the infection of British haemophiliacs with contaminated NHS blood/blood products.

As you may recall, this Government conducted a review of the support available to those affected in the Autumn of 2010. Prior to the review, people with chronic hepatitis C infection received a one-off lump sum of £20,000 from the Skipton Fund (ie a stage 1 payment), and those who went on to develop cirrhosis or liver cancer, received an additional one-off lump sum of £25,000 (ie a stage 2 payment). There was no further support than that. Now, those people who meet the stage 2 eligibility criteria, such as Mr Dorricott, receive a one-off lump sum payment of £50,000 plus an annual payment of £13,886 (the same as received by those infected with HIV). We also decided to uprate the annual payments for HIV and hepatitis C infection each year by the Consumer Prices Index. All of these payments are tax free and disregarded for benefits purposes.

We also recognised that people have been affected differently by their hepatitis C infections. To enable additional resources to be directed to those in greatest need, we established the Caxton Foundation to provide discretionary support to those affected by hepatitis C, based on need.

I appreciate that Mr Dorricott, and some other campaigners, are unhappy about certain aspects of the package that is now available. However, our approach has been to target resources at those who are suffering most as a result of their infection, and I think that is entirely proper.

The Caxton Foundation, has been helping many of its claimants by providing financial assistance. However, I understand that there have been some teething problems as it has developed its payment policies and processes. The Foundation has recognised this, and is continuing to work hard to improve the service that it provides to its beneficiaries.

The Department has also put arrangements in place to assess scientific evidence on hepatitis C infection as it emerges. The Department's expert Advisory Group on Hepatitis will keep the clinical and scientific evidence base under regular review, and their advice will be published. On 29

November 2012, Anna Soubry, the Parliamentary Under-Secretary for Public Health, will be meeting with a group of experts and representatives of campaign groups to discuss the clinical and scientific evidence base that underpinned the 2010 review.

As you can see, the changes that this Government has introduced have established a much more generous and comprehensive package of financial support than was available previously.

**ANNA SOUBRY**