



"Re: Fw: Response for Disability Now by 10am tomorrow"

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**Patrick
Hennessy/POLICY/DOH/GB**
16/06/2008 19:07

To William Connon/PD-PMD/DOH/GB **GRO-C** Ashley
Rogers/OIS/DOH **GRO-C**

cc
bcc

Subject: Re: Fw: Response for Disability Now by 10am
tomorrowE619F06B8AE9DAB58025746A005213C3

History: ☐ This message has been forwarded.

A few minor additions are attached.



Disability Now 16 June.doc

Patrick Hennessy
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William Connon/PD-PMD/DOH/GB

William Connon/PD-
PMD/DOH/GB

16/06/2008 16:03

To Ashley Rogers/OIS/DOH [GRO-C] Patrick
Hennessy/POLICY/DOH/GB [GRO-C]

cc

Subject Re: Fw: Response for Disability Now by 10am tomorrow 📎

1. **Patrick** - would you confirm that the attached is acceptable as the Government line on The Archer Inquiry. Note deadline of 10 am tomorrow.

"Lord Archer is chair of a non-governmental public inquiry into contaminated blood and blood products. The inquiry was opened on the 27th March 2007 and is not expected to issue its findings until the summer of this year. We now expect this to be extended until around the end of the year.

Successive Secretaries of State have resisted calls for a government backed public inquiry into how patients became infected with hepatitis C following NHS treatment with blood and blood products prior to the introduction of heat treatment to eliminate the hepatitis C virus, on the following grounds:

- A full judicial inquiry would be a major, costly and time-consuming exercise that would depend on the recollections of the remaining witnesses about events that took place over twenty years ago.
- There is no evidence that any wrongful practices were employed. The release of a significant number of papers, with a minimal number withheld on confidentiality grounds, can provide much of the information sought by interested parties.
- An inquiry would not add significantly to our current understanding of how the blood supply became infected with Hepatitis C, or the steps needed to deal with problems of this kind now or in the future.
- A public inquiry could undermine public confidence and affect the donor population, thus putting at risk the supply of blood to the NHS.
- There are many conflicting demands upon NHS resources, and it was felt that the current ex gratia payment scheme (the Skipton Fund) should be aimed at assisting those currently living with hepatitis C as a result of this treatment.
- It should be noted that the no-fault compensation to haemophiliacs infected with HIV through contaminated blood products was based on the assessment that those who contracted AIDS would die within two years. With the improved treatment of AIDS, many people have lived longer than this.

- In addition, the Department has released copies of all documentation for the period in question (1970-85) to the inquiry team and to the public and these are on the DH website.

The Department is fully co-operating with the Archer inquiry. Officials have met with Lord Archer and colleagues on 25 April 2007, 19 September 2007 and 12 June 2008.

Ashley - provided Patrick is content I am happy for this to go to Disability Now

William G Connon
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GRO-C

Ashley Rogers/OIS/DOH

Ashley Rogers/OIS/DOH

16/06/2008 15:07

To William Connon/PD-PMD/DOH/GE GRO-C
cc

Subject Fw: Response for Disability Now by 10am tomorrow

Hi William,

Is it possible to get a response to the below?

They need it by 10am tomorrow.

Best regards

Ashley

Ashley Rogers
Press Officer - Newsdesk
Department of Health Media Centre
Direct line GRO-C
Newsdesk GRO-C

Celebrating the 60th anniversary of the NHS
For news about the NHS - past, present and future - visit www.nhs.uk

----- Forwarded by Ashley Rogers/OIS/DOH on 16/06/2008 15:02 -----

"Sunil Peck"

<sunil.peck GRO-C

To <ashley.rogers GRO-C

GRO-C

16/06/2008 14:47

cc

Subject Response for Disability Now by 10am tomorrow

Hi Ashley,

As discussed, please could you let me have a DH response to why government representatives failed to appear at the public inquiry chaired by Lord Archer into the contamination of haemophiliacs with NHS blood. Also, would you accept that government's absence reflects a failure to take the plight of the victims seriously?

As agreed, I'm pasting the contents of the relevant press below.

Cheers

Sunil - GRO-C

HAEMOPHILIA SOCIETY 'DEEPLY DISAPPOINTED' AT LACK OF PUBLIC EVIDENCE FROM DoH AT ARCHER INQUIRY

Tomorrow (12.06.08) the Independent Public Inquiry into contaminated blood and blood products will hold its final hearing.

The Chief Executive of the Haemophilia Society, Chris James said: -

"The Haemophilia Society is deeply grateful to The Rt Hon The Lord Archer of Sandwell QC and his colleagues for undertaking this vitally important investigation

and for all their efforts over the 15 months they have been taking evidence.

"Regretfully the Inquiry's commitment to uncovering the truth has not been matched by the Department of Health. The actions of Government in response to

this worst ever disaster in the history of the NHS have been criticised by many of the witnesses, including the Haemophilia Society, during the course

of the Inquiry. Notwithstanding the Inquiry's success in securing documents and private meetings with officials we are deeply disappointed that the Government

hasn't asked to attend a public hearing of the Inquiry and give evidence.

"Whilst many seriously ill people living with disabilities have travelled hundred's of miles to give evidence, Ministers have not been prepared to cross

the road.

"Many extremely brave people have come forward and given powerful evidence including highly painful personal information. The Haemophilia Society had hoped

that common respect for their loss or admiration of their courage would have been enough

to persuade for the Government to match their candour by appearing at a hearing.”

ENDS

Notes: -

list of 1 items

- Detail of the final hearing of the Archer Inquiry can be found on the Inquiry website at:
http://www.archercbbp.com/files/press/70_last%20hearing.doc

list end

Dan Farthing
Communications Manager
The Haemophilia Society
T: GRO-C
www.haemophilia.org.uk

Caring for people with bleeding disorders

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