Witness Name: William Wright Statement No.: WITN2287019 Exhibits: WITN2287020 – WITN2287086 Dated: 15th April 2021

INFECTED BLOOD INQUIRY

EXHIBIT WITN2287048

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Joe FitzPatrick MSP Minister for Public Health, Sport and Wellbeing The Scottish Government St. Andrew's House Regent Road Edinburgh EH1 3DG

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18 Dec 2020

SCOTTISH GOVERNMENT CONSULTATION ON MATTERS RELATED TO INFECTED BLOOD.

Dear Minister,

Further to the First Ministers letter of 13 October 2020, reference 202000089439, in response to my letter 16 September 2020 I am following up in seeking to meet with you as she indicates. Further matters, that have since arisen in addition to those discussed in our exchange of letters, suggest that we need to meet as a matter of urgency.

In recent days, it has come to light that Scottish Government have been introducing new measures which we only learned of by chance or at the last minute, in which the survivors and families of the contaminated blood and blood products disaster are likely to have an intense interest.

Firstly, we became aware by chance of the Health Ministers announcement of steps taken toward the appointment of a Patient Safety Commissioner. I was then more than surprised to see that inputting committees have recently been set up by Scottish Government largely on the narrow base examined by the Cumberlege Review into three particular treatment disasters, however much each tragedy merits attention.

You will appreciate that the infected blood community have built up literally decades of experience of an NHS treatment disaster which has killed hundreds of Scots, left others in lifelong distress, families bereft and grieving and is now the subject of the biggest judicial Inquiry ever conducted within the UK. You will also appreciate our proven willingness to work with Government at all levels to offer positive input to making forward progress in learning from past lessons.

Looking at the composition of the Specialist Reference Group it is difficult to see how any of its membership can draw first-hand on the ongoing lessons available from the fatal consequences of the ongoing infected blood disaster. None of its membership will be recognised by the survivors of infected blood or their families.



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We would be grateful for supply of all the minutes of the Specialist Reference Group and any papers that it is has so far considered and the thinking that has gone into them.

Secondly, we learned by phone call from your officials, of the relaxation of the arrangements for donation of blood, one working day before the announcement was made on Monday Dec 15. While we in principle recognise and welcome the improvements to the scope for giving blood, it appears that the process has failed to seek representation from those receiving blood or blood products, particularly those severely injured as a result of treatment.

Several campaign groups representing those wishing to give blood were heavily involved in the UK review of the donor rules whereas there were none from groups who had been so grievously affected by receipt of blood and blood products. Those with such horrendous experience of receiving blood and blood products surely have as much of an interest in this matter as particular donor groups. We can explain our position in that respect when we meet.

We recognise the latter matter was a UK initiative and in both that process of modernising donor arrangements and the appointment of a Patient Safety Commissioner in Scotland we see some merit.

However, given the damning new evidence now coming to light during the present Infected Blood Inquiry of past government, agency and medical failures in how they reacted to patients injured by the NHS, we are keen to examine with you how Government is now approaching issues of firstly patient safety and secondly blood donation and use.

I am copying this letter to the Chair of the present UK Inquiry. Given that it is not envisaged it will report until at least well into 2022, might I suggest it would be in our respective interests if we do not await its conclusions and take steps toward resolving some of the shortcomings it is likely to expose, particularly with respect to public health and patient safety.

Can I suggest that you also invite the Chair of the Scottish Infected Blood Forum Joyce Donnelly to join us when we meet, presumably via remote web type means.

I look forward to hearing from you.

All the best,

Yours sincerely,

GRO-C

Bill Wright Chair, Haemophilia Scotland



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