

Falconer S (Sandra)

From: Dora C (Christine)
Sent: 25 August 2000 12:10
To: Cunningham K (Kate)
Cc: Falconer S (Sandra); Bell DA (David); Keel A (Aileen); Towers LA (Lynda)
Subject: RE: UPDATED: Final Copy of the Haemophilia/Hep c Presentation Strategy

Kate

Copy as before + Dr Keel DCMO + Mrs Towers Sols

Thank you for sending the draft presentation strategy. Here are my comments. In general I think it is extremely helpful to have, and I concentrate only on the areas I think may be difficult.

Para 2: I preferred the handling we discussed, which was to give the haemophilia society advance sight of the report by a few days. We should first get their agreement not to discuss with the press until after they had spoken to the Minister. (If they renege, the Minister declines to meet them, full stop.) It is not going to be helpful to fob them off with a quick briefing by officials instead of a proper look at the report before they discuss it with the Minister. They have been waiting a long time for this. I think it would also be worthwhile flagging up the level of official involvement there would need to be in the Minister's meeting with the society, and indeed any meetings with the Health and Community Care Committee. Obviously I would have to be there, and I also think that we need a medical adviser (Dr Keel) and solicitors (Mrs Towers) there too.

Para 3: I am afraid I think offering the Deputy Minister as a liaison will be seen by the Health and Community Care Committee as the Minister herself ducking the flak. I think she should be prepared to meet them at least once since she was so personally involved in commissioning. Is this area of work actually being delegated to the Deputy Minister? (I ask on a point of information - we hadn't heard!)

Para 5: Hm, we shall need to find an eminent scientist. Trouble is, most people with an interest in the field will already have links with SNBTS or with the Haemophilia Directors. Any advice from Dr Keel would be welcomed!

Para 8: Minister has said she doesn't want "regret". Will have to stop at "sympathy".

Para 10: I think we have to be careful about saying "haemophiliacs were warned about the risk". Some haemophiliacs will have been warned about a risk, but it is clear from the correspondence that many haemophiliacs feel they weren't warned or that the warnings were inadequate. Better to recast this para as "Risk of liver disease mentioned in instruction leaflet which came with the product. Stopping treatment would itself have posed great risk to the patient's life and health."

I think we also need to have a line on the publication of the SNAP report (they have a bid for funding in the pipeline). I have asked Sandra to find out a bit more and supply you with some text

Thinking over the niceties of who should present the strategy to the Minister, I would be happy for you to send it since she asked you to produce it, and this is my last day before I go on leave for a week.

Happy to discuss any of this before close today; then in my absence please keep in touch with Sandra Falconer on the issue.

Thanks

Christine

-----Original Message-----

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Haemophiliacs & Hepatitis C Presentation Strategy

Monday 21 August 2000

Present: Christine Dora – Health Care Policy
Kate Cunningham – Media & Communications Group

Presentation Recommendations

The report to be prefaced with a layman's guide to findings and chronology (for media, health correspondents and MSPs).

Recommendation that the Haemophilia Society should meet with officials to be briefed on the contents of the report followed directly by a meeting with the Minister to discuss the report's findings.

The meeting with the Minister will be followed by the issue of the news release and a letter to the Health Committee offering the Deputy Minister as liaison in the matter. The SNBTS should also be contacted in advance of any announcement to allow them time to prepare lines and to issue their own low-key news release.

Copies of the news release and layman's guide to the report to be made available to special advisers and at the SPLP Resource Centre.

Health correspondents to be briefed on the precise chronology of plasma production work at the time. Briefing to be given by the same officials who brief the Haemophilia Society. Any eminent scientist willing to back our findings should be sought for third party endorsement.

Given the imminent end of recess, the recommendation is that the announcement be made when the Scottish Parliament reconvenes, on September 12 or 14.

Suggested Theme of Lines

The delay in the issue of the report and Ministerial decision due to very careful consideration

No apology for compensation refusal, only expression of regret and sympathy for the situation in which those infected find themselves.

At the time that haemophiliacs were at risk of infection from factor VIII, the priority of the SNBTS (and services UK-wide) was to identify and isolate the HIV virus which was seen to be a far greater risk.

Haemophiliacs were warned about the risk of contracting liver disease from Factor VIII but were aware that stopping treatment posed a far greater risk.

Scotland was self sufficient in producing plasma at the time, unlike the rest of the UK.

Clear lines on the difference in the situation between Scotland and England.