ORAL STATEMENT ON INFECTED BLOOD MONDAY 10 JANUARY 2011 CHECK AGAINST DELIVERY

Mr Andrew Lansley:

With permission, I would like to make a statement on hepatitis C and HIV infected blood.

Mr Speaker, what happened during the 1970s and 80s – when thousands of patients contracted hepatitis C and HIV from NHS blood and blood products – is one of the great tragedies in modern healthcare.

It's desperately sad to recall that during this period the best efforts of the NHS to restore people to health actually consigned so many to a life of illness and hardship.

As the current Health Secretary, and on behalf of Governments extending back to the 1970s, may I begin by saying how sorry I am that this happened, and to express my deep regret for the pain and misery that many have suffered as a result.

THE REVIEW

It is now almost two decades since the full extent of the infection was established, and two years since the independent inquiry led by Lord Archer of Sandwell reported.

The majority of Lord Archer's recommendations are in place, as are programmes of *ex gratia* payments, administered by the MacFarlane Trust and the Eileen Trust for the HIV infected, and the Skipton Fund for those with hepatitis C.

But significant anomalies remain, and I pay tribute to Lord Archer, to other Noble Lords, and to Hon. Members from all parties, for highlighting them.

In October, my Hon. Friend the Member for Guildford announced a review into the current support arrangements:

- To look at reducing the differences between the hepatitis C and HIV financial support schemes;
- And to explore other issues raised by Members during the recent backbench debate, including prescription charges and wider support for those affected.

We also asked clinical experts to advise on the impact of hepatitis C infection on a person's health and quality of life, and to consider whether an increase in financial support was needed.

And my Hon. Friend [the member for Guildford] met with representative groups to understand the impact these infections were having on people's lives. She also met

many Rt. Hon and Hon Members, in both Houes, who have been strong advocates on behalf of those affected.

NEW FINANCIAL PAYMENTS TO HEPATITIS C INFECTEES

We've now considered the findings of the clinical expert group, and accept that the needs of those with advanced liver disease from hepatitis C merit higher levels of support.

At present, the amount of money paid to this group depends on the seriousness of the infection.

There are two stages at which the Skipton Fund will make a payment.

The first is when the person develops chronic hepatitis C infection.

At this point, a person is eligible for a Stage 1 relief payment, currently a lump sum payment of £20,000.

Some may reach a second stage of developing advanced liver disease such as cirrhosis or cancer, or requiring a liver transplant.

They then become eligible for a Stage 2 payment – which is currently another lump sum payment of £25,000.

Under new arrangements we will introduce, this second stage payment will increase from £25,000 to £50,000.

This will apply retrospectively, so if a person has already received an initial Stage 2 payment of £25,000, they will now get another £25,000 lump sum bringing the total to £50,000.

In addition to this, we will also introduce a new, annual payment of £12,800 for those with hepatitis C reaching this second stage. This is the same amount as those who were infected with HIV receive.

Those infected with both HIV <u>and</u> hepatitis C from contaminated blood will now receive two annual payments of £12,800 if they meet the Stage 2 criteria – one payment for each infection, along with the respective lump sums.

And all annual payments made – both to those so infected with HIV and those with hepatitis C – will now be uprated annually in line with the Consumer Prices Index to keep pace with living costs.

DISCRETIONARY PAYMENTS

Mr Speaker, we know that some of those infected with HIV or hepatitis C from NHS blood and blood products face particular hardship and poverty.

Those infected with HIV can already apply for additional discretionary payments from the Eileen Trust and the MacFarlane Trust.

But no equivalent arrangements are in place for those infected with hepatitis C.

So we will now establish a new charitable Trust to make similar payments to those with hepatitis C who are in serious financial need.

These payments will be available for those at all stages of their illness, based on individual circumstances.

Discretionary payments will also be available to support dependants of those infected with hepatitis C, including dependants of those who have since died.

Again, this will echo the arrangements in place for those infected with HIV, and enable us to give more to those in greatest need.

ADDITIONAL SUPPORT FOR ALL INFECTEES

And we must also ensure that those infected through NHS blood and blood products get the right medical and psychological support.

I can therefore announce two further measures.

Firstly, that those infected with hepatitis C or HIV will no longer pay for their prescriptions.

They will now receive the cost of an annual prescription pre-payment certificate if they're currently charged for prescriptions.

Secondly, the representative groups raised the issue of counselling support for those infected with blood and blood products.

We fully recognise the emotional distress they have experience.

As a result, we will provide £300,000 over the next three years, allowing for around 6,000 hours of counselling to help these groups.

POSTHUMOUS CLAIMS

Mr Speaker, whilst we focus on those still living with infections, we must also recognise the bereaved families of those who have died.

At present, no payment can be made to those infected with hepatitis C who passed away before the Skipton Fund was established.

This is a source of understandable distress for those who survive them – and it's something we now want to put right.

I can therefore announce that, until the end of March 2011, there will be a window of opportunity where a posthumous claim of up to £70,000 can be made on behalf of those infected with hepatitis C who died before 29 August 2003.

A single payment of £20,000 will be payable if the individual had reached the first stage of chronic infection.

And another single payment of £50,000 will be made if their condition had deteriorated to the second stage where they suffered serious liver disease or required a liver transplant.

We will work with the Skipton Fund and various patient groups to publicise this new payment to those who may benefit.

These new payments, which will go to the individual's estate, should help more families get the support they deserve.

TOTAL FINANCIAL PACKAGE

Mr Speaker, taken together, these announcements represent a significant rise in the support available to those affected by this tragedy.

Putting an exact figure on the package is difficult, as there is some uncertainty about how many will be eligible, and how their illnesses may progress.

However, we believe these new arrangements could provide from 100 to 130 million pounds worth of additional support over the course of this parliament.

All payments will be disregarded for calculating income tax and eligibility for other state benefits, including social care.

And whilst these changes only apply to those infected in England, I will be speaking to the devolved administrations to see if we can extend this across the UK.

CONCLUSION

Mr Speaker, today's announcements cannot remove the pain and distress these individuals and families have suffered over the years.

But I hope these measures can at least bring some comfort, some consolation and perhaps some closure for those affected.

And I commend this statement to the House.