

Witness Name: Simon Hamilton

Statement No: WITN2339012

Exhibits: WITN2339013-

WITN2339043

Dated: 25th August 2020

INFECTED BLOOD INQUIRY

EXHIBIT WITN2339034

FROM THE MINISTER OF HEALTH



Mervyn Storey MLA

GRO-C

Castle Buildings
Stormont Estate
BELFAST, BT4 3SQ
Tel: 028 9052 2556
Email: private.office@health-ni.gov.uk

Your Ref:
Our Ref: CORR-1118-2020
Date: 28 February 2020

Dear Mervyn,

Thank you for your correspondence of 31st January 2020 regarding interim payments for those infected or otherwise affected by contaminated blood.

I recently met with groups representing infected and affected people in Northern Ireland to listen to their personal stories of the impacts of contaminated blood on their lives, to hear their concerns, and to update them on the latest position in relation to the ongoing review of the NI Infected Blood Payment Scheme.

Having met these groups I am acutely aware of the suffering they have had to endure physically, mentally, socially and financially. These impacts have been felt not only by those who have contracted blood-borne viruses through contaminated blood or blood products, but also by their loved ones who have experienced significant effects on family life, careers and mental health. I am very conscious that the divergence with England in terms of financial support has caused great hurt to victims of infected blood here in Northern Ireland. It is an issue which for many people is time-critical.

I am committed to ensuring that people in Northern Ireland who have been harmed by NHS blood or blood products continue to have proper access to the financial assistance that they need in order to mitigate the harms and allow them to live as normal a life as possible.

As you have highlighted in your correspondence, following a January monitoring round allocation of £1.03m to my Department, I announced on 27 January interim payments for infected beneficiaries of the NI Infected Blood Payment Scheme, ranging between £4,000 and £8,000 per person. These interim payments were intended as an immediate measure to address the hurt caused by the uplift in England and to alleviate the financial hardship that may be endured by those infected and/or affected by contaminated blood.

I was not in a position to allocate the full £1.03m at that point as I needed first to consider how to make the best use the remainder of the monitoring round allocation in addressing the needs of our beneficiaries. Whilst I welcomed this short-term funding, a non-recurrent allocation of temporary funding towards the end of a financial year is not sufficient to address all the issues sustainably. Consideration needs to be given to how this issue can be sustainably resolved going forward.

Financial support schemes across the UK vary significantly, and simply replicating the English regular annual payments to those infected may not necessarily best address the needs of our beneficiaries. As well as regular payments to those infected individuals, there are a number of other areas that need to be taken into consideration in any future reform, which would increase the additional costs of the NI scheme on a recurrent basis.

Therefore it is important that I give proper consideration to all aspects of the NI Scheme, and in due course the potential requirement to undertake further reform after the Infected Blood Inquiry has reported. This is expected in 2021.

When I met with groups representing victims here I gave them a firm assurance that the £1.03m allocated will be spent in full on support for victims of contaminated blood before the end of this financial year. I intend to meet with them again to ensure that their needs will be properly assessed in reaching any decisions regarding future financial support.

I am also committed to the wider ongoing review of all the support provided to victims in Northern Ireland to make sure all aspects of our support scheme best meet the needs of our beneficiaries here in Northern Ireland. Meanwhile, discussions are continuing between officials in the four UK countries on how we can achieve greater parity across the different UK support schemes.

Yours sincerely

I trust that you find this reply helpful.

GRO-C

Robin Swann MLA
Minister of Health