

Haemophiliacs with Hepatitis C: Financial Assistance Scheme

2.45 p.m.

Lord Morris of Manchester: My Lords, I beg leave to ask the Question standing in my name on the Order Paper; and in doing so declare an interest, not a pecuniary one, as president of the Haemophilia Society.

The Question was as follows:

To ask Her Majesty's Government what further consideration they have given to introducing a financial assistance scheme for people with haemophilia and other National Health Service patients infected with hepatitis C by contaminated National Health Service blood products; and what action they are taking in this regard.

Baroness Andrews: My Lords, I am pleased to be able to report that my right honourable friend the Secretary of State for Health announced on 29th August that the Government have decided to establish a financial assistance scheme in England for people infected with hepatitis C as a result of being given blood or blood products by the NHS.

Lord Morris of Manchester: My Lords, I am most grateful to my noble friend who knows how evocative a moment this is for those who have worked for so many years—not least from both sides of this House—to achieve this major and welcome change of policy.

Can we be assured that the payments scheme, on the detail of which the Haemophilia Society looks forward to working with government, will cover dependants of the 212 haemophilia patients who have died of hepatitis C infection, as well as the 2,800 still living with the virus?

How many of the 2,800 now have advanced liver disease, including cancer and cirrhosis, due to the virus; and what number still await liver transplants as their only remaining hope of survival?

Finally, will the scheme take full account of what other schemes provide, such as those in Canada and Ireland, and of the £100,000 now available under our own Vaccine Damage Payment Scheme?

Baroness Andrews: My Lords, I am sure that the whole House would want me to start by congratulating the noble Lord on his outstanding record of promoting this social justice cause for haemophiliacs infected with blood products. Since the early 1980s he has played an outstanding role. He would probably want me to thank Ministers in this House who over the years have shown great sympathy

and support for this cause and who will be very pleased that it has been resolved in this manner.

In relation to his questions, I cannot give an assurance on any of the details at the moment because meetings are urgently taking place to discuss the scope and nature of the scheme, the inclusion of dependants, and so forth. I understand that there is to be a meeting between the Department of Health, the Macfarlane Trust and the Haemophilia Society.

On the number of people who have advanced liver disease, we do not hold those figures centrally, but I believe that about 20 per cent of chronically infected people may develop serious liver disease and that about 4 per cent might get liver cancer as a result. But these issues are being addressed in the Hepatitis C Strategy, which is in place.

In relation to other schemes, this scheme is not comparable. It is a unique scheme. It has been introduced on compassionate grounds. It is a financial assistance scheme. As such, that is exactly what it will deliver.

Lord Clement-Jones: My Lords, I join the noble Lord, Lord Morris, in congratulating the Government on their change of mind after many years on this subject and paying compensation towards those infected in this way. I also join the Minister in congratulating the noble Lord, Lord Morris, after his campaign, together with the Haemophilia Society, on finally securing this change of mind by the Government.

When the Government consider the details of the scheme, will they take into account the way in which the Macfarlane Trust operates for those haemophiliacs infected with HIV after being given blood products, in so far as they are able to claim for higher compensation if their condition deteriorates?

Baroness Andrews: My Lords, we are grateful for the noble Lord's support. I reiterate that this is a scheme of financial assistance, not compensation, because there was no liability. Given the knowledge and techniques available to the National Blood Service at the time, everything was done as it should have been.

On the noble Lord's question about the Haemophilia Society, the Macfarlane Trust and those who receive support from it, that will be on the table and discussed, along with many other issues.

Lord Campbell of Croy: My Lords, while welcoming the decision on *ex gratia* payments, can the Minister confirm that many people are still living who contracted hepatitis C from contaminated blood in the health service? How many of them are waiting for liver transplants, which are essential for their survival?

Baroness Andrews: My Lords, I am afraid that I do not have that information for the noble Lord. We do not collect statistics centrally, but I shall certainly return to the department to try to obtain that information—or at least an educated guess—for him.

Lord Ackner: My Lords, in deciding on the scale of compensation, will the Minister have regard to the provisions of the Criminal Injuries Compensation Act 1995? In particular, will she bear in mind that millions of pounds—last year it was £232 million—are paid out to victims of crime for whom the Government are in no way vicariously responsible, whereas here we are concerned with persons whom the health service has infected? Is she aware that under that compensation scheme, a figure is paid for the actual injury, and that to that is added loss of earnings or the ability to earn, as well as special expenses such as the cost of medical care that cannot be covered by the NHS, costs of adapting a house, and other such items?

Baroness Andrews: My Lords, I sympathise with what the noble and learned Lord says, but there is no comparison between what the Government are doing to provide *ex gratia* payments on compassionate grounds for financial assistance and the criminal injuries compensation scheme, which implies liability. As I said, there was no liability when this unfortunate event occurred. There was no test until 1991 for hepatitis C so, like every other country, in the early 1970s we could not know what was happening. The noble and learned Lord is comparing like with unlike, so I cannot give him the satisfaction that he seeks.