

Our ref: TO00000419728

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Mr Andrew March

GRO-C

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24 June 2009

Dear Mr March,

Thank you for your letter of 5 June to Andy Burnham about the Government's response to Lord Archer's report. I have been asked to reply.

This Government deeply regrets that patients acquired serious infections as a result of NHS treatment some two or more decades ago, and extends every sympathy to the patients and their families who have suffered as a result of the very treatments which should have transformed their lives for the better.

The Department understands the sense of grievance that some people may feel as a result of what has happened, and that there are deeply-held opinions on the appropriateness and timeliness of decisions and actions taken many years ago. In his report, Lord Archer did not find the government of the day to have been at fault, and did not apportion blame.

I am sorry that you are unhappy with the new funding proposals for recipients of the Macfarlane and Eileen Trusts from 20 May 2009. The Chief Executive of the Macfarlane Trust is correct in saying that the Trust cannot turn down the additional monies from the Department of Health, to be used for the charitable purposes for which the fund was established. However, you can write to the Trustees declining to accept payment if you so wish.

You refer to Lord Archer's recommendation that payments should be at least the equivalent of those under the scheme which applies at any time in the Republic of Ireland. Payments made by the Republic of Ireland are a matter for that country and were introduced following a judicial inquiry which found failures of responsibility by the Irish Blood Transfusion Service and concluded that wrongful acts were committed.

The situation in the UK was different. Action was taken in 1985 to introduce heat treatment, which removed the risk of both HIV and of hepatitis C from blood products. Testing of all donations for HIV was introduced in 1985, and for hepatitis C in 1991 when suitable, effective tests became available. The establishment of the ex-gratia payment schemes in the UK was in recognition of the special and unfortunate position of those who were infected.

The Government is committed to ensuring that people with haemophilia, and others who have been infected with hepatitis C and/or HIV from blood and blood products, are well cared for, supported in their communities and fully informed about how best to look after their health. The Government gave very careful consideration to Lord Archer's recommendations and believes its final response is as positive as possible. The Government has published the final response on the Department of Health website at:

[www.dh.gov.uk/en/Publichealth/Healthprotection/Bloodsafety/index.htm](http://www.dh.gov.uk/en/Publichealth/Healthprotection/Bloodsafety/index.htm)

This includes details of the steps taken in response to each recommendation.

I hope this clarifies the Government's position on this matter.

Yours sincerely,

**GRO-C**

Dora East  
Customer Service Centre  
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