

**A message from Sir Robert Francis, Chair of the Infected Blood Compensation Authority.**

I want to thank you for your readiness to be involved in this series of engagement sessions. These meetings are intended not only to provide background and information on the rationale behind the Government's proposed compensation scheme, but also they are, as I set out in my [statement of intent](#), to provide the opportunity to seek your views and those of the community you represent on the proposed compensation scheme. Given the statutory requirements to produce the regulations under which the Scheme will function by 24 August, time is short, and I need to have the benefit of your views as soon as possible.

These meetings provide an important step to ensure the finer detail of the compensation scheme is informed by you in time for the final legislative step, as set out in the Victims and Prisoners Act. There will be 5 sessions in total spanning over the next couple of weeks. Further information on the format and the dates are included in the invite and accompanying documents.

The Government's document, attached within the invite, sets out the proposed compensation scheme, which has been developed by the Government with input from the Infected Blood Inquiry Response Expert Group, chaired by Professor Sir Jonathan Montgomery.

I am keen that the forum offers a safe place for open and frank discussions. To help achieve this I ask those attending these meetings not to repeat outside the meeting what anyone else says in a way which identifies who they are or whom they represent. Of course everyone remains free to express their own views in any way they wish.

It is vital to understand if you and the communities you represent consider that these proposals are fair and reflect the principles recommended by Sir Brian Langstaff's report. From the general feedback we have seen to date and now taking on board the contents of the Government's document, I propose we focus the sessions on specific themes and questions, in particular I would like to put forward and seek your views on the questions below.

1. Future of the current Support Schemes
  - a. The proposed Scheme will compensate for both past and future losses suffered as a result of infected blood. This includes future care costs and the financial loss suffered as a result of infection. Given this proposal, what considerations should be made in regard to support scheme payments?
2. Severity Bands Operation
  - a. Do you consider that the severity bands proposed are verifiable through an objective assessment of readily available evidence, and meet the aims of minimising the burden on applicants and enabling prompt processing of claims? Are there any practical considerations which need to be taken into account?
3. Care and Financial Loss Awards
  - a. Do the descriptions of the care requirements and financial impacts in the Core Route Profile reflect the majority of cases as intended?

- b. Could you give examples of an exceptional case?
  - c. What should be the trigger points for engaging the supplementary process?
  - d. What should the supplementary route look like to ensure that this adequately meets the needs of genuinely exceptional cases?
4. Evidence Requirements
- a. *Infected* Entry criteria: What types of evidence should be considered to evidence an eligible infection (direct and indirect infection)? What evidence is hard to access?
  - b. *Estate* Evidence for the infection of the deceased: What types of evidence should be considered to evidence an eligible infection of a deceased infected person?
  - c. *Infected or Estate* Severity Bandings: What types of evidence should be considered to evidence an infection severity band?
  - d. *Infected or Estate* Supplementary routes - Financial Award: What types of evidence should be considered to evidence eligibility for higher financial loss via a supplementary route?
  - e. *Infected or Estate* Supplementary routes - Care Award: What types of evidence should be considered to evidence eligibility for higher care award via a supplementary route?
  - f. *Affected* Eligibility - Carers - What types of evidence should be considered to evidence eligibility as a carer?
5. Equalities Impacts
- a. Would these proposals result in any difference in treatment between people based on any protected characteristic (e.g. race, sex, sexual orientation)?
  - b. If yes, in what way?

I am aware this may not cover everything you or the community may wish to discuss, and if there is anything else you would like me to consider, please do let me know via your RSVP

I will be making my report to Ministers in early July. Naturally those attending one of the engagement meetings will be free to send us written responses to the following email address [ibcaenquiries@cabinetoffice.gov.uk](mailto:ibcaenquiries@cabinetoffice.gov.uk)

The wider community including all those who have registered an interest via the IBCA web page, will also of course be aware of the engagement meetings and questions which I am asking. They can write to me at any time on this or on any other matter relating to the work of the IBCA at the following email address [ibcaenquiries@cabinetoffice.gov.uk](mailto:ibcaenquiries@cabinetoffice.gov.uk)

My intention is that I will put forward the findings from these important engagement sessions and my recommendations to the new ministers immediately following the General Election. A high level summary of our discussions will be sent to you following the last session.

I hope you will be able to join me, David Foley and Professor Sir Jonathan Montgomery for what I believe is one of the most fundamental parts to designing a scheme that meets the concerns of the infected and affected communities.