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SELF SUFFICIENCY IN BLOOD PRODUCTS

1. There were several action points arising from the meeting with MS(D) and MS(PH) on Wednesday following Lord Jenkin's starred question about contaminated blood products. (I attach a copy of the Hansard extract).

FOI cases

2. Lord Warner asked for a draft letter to send to Lord Jenkin and to Lord Morris explaining that the Department had now told Mr Robert Mackie that we would reply by 20 June to his FOI request for release of the papers referred to in the report on self-sufficiency. MS(R) asked that the letter should make clear that a large number of the documents cited in the self sufficiency report had already been made public. A draft is attached.

Documents

a) Handling of documents returned by solicitors

3. Both Ministers requested that we should give high priority to examining the files which had been returned to the Department by Blackett, Hart and Pratt (Solicitors). While I have reprioritised the work of existing staff in the Division, the work which is required to examine the returned documents, together with several other related tasks, represents a major undertaking. I have urgently requested additional staff from the Business Partnership Team. We have also arranged with Sol to commission an initial analysis of what the returned papers

contain to be carried out by an independent legal expert (panel counsel).

4. Lord Warner pointed out that Baroness Barker had asked what steps the Department would be taking to ensure that the returned documents would be adequately protected. We have raised this point with SOL who have given assurances that the returned documents are being held securely.

b) Documents which have been destroyed

5. More generally, we propose to produce a definitive list of all of the documents which have been destroyed (there are two sets) which will also set out when they were destroyed, the circumstances of the destruction and the likelihood of the documents returned by Blacketts being copies of the destroyed documents. We will also list the documents (of which there are thousands) recently released in Scotland.

Demand for a Public Inquiry

6. Ministers felt that it was becoming increasingly difficult to resist holding a public inquiry. MS(PH) was particularly concerned that this issue should not be forced in England because of decisions in Scotland.
7. We have consulted Dr Aileen Keel DCMO in Scotland. Advice from SE officials to Scottish Ministers continues to be strongly against a public inquiry. The Executive is examining the validity of a vote in the Scottish Parliament Health Committee in support of a public inquiry. It is understood that the casting vote of the Chairman may be disallowed.
8. We are consulting the Patient Safety and Investigations branch about the steps that might have to be gone through in considering whether to hold a public inquiry.
9. I will report back as soon as possible setting out a programme of tasks in this area and a timetable for this work to be completed

GERARD HETHERINGTON