IBI July 2023 Hearings

Witness Statements

SECTION 1 - INDEX

List of questions provided to Shona Dunn under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. Please set out your name, address, date of birth and any professional qualifications relevant to your work as a senior civil servant.

2. Please provide a brief outline of your employment history.

3. Please provide a brief description of your roles and responsibilities (a) as Director General of the Economic and Domestic Affairs Secretariat at the Cabinet Office and (b) as Second Permanent Secretary at the Department of Health and Social Care (DHSC). Please include any role you have had with any committees, working parties or groups relevant to the Inquiry's Terms of Reference.

4. What awareness did you have of the then Prime Minister's (Theresa May) decision in July 2017 that there should be a public inquiry into the circumstances in which people were infected by blood and blood products, when you were a Director General in the Cabinet Office? What if any involvement did you have in that decision and/or in the setting up of the Inquiry? What if any consideration was given by you, or, to your knowledge, others within the Cabinet Office, to the possibility of compensation for those infected and affected?

5. When did you first give consideration, as Second Permanent Secretary at the DHSC, to the question of compensation for people infected and affected by the use of infected blood and blood products?

6. Please describe the steps you have taken as Second Permanent Secretary at the DHSC to understand the impact of waiting for recognition of individual

losses on people infected and affected by the use of infected blood and blood products.

7. Please describe, in as much detail as you are able to provide, the steps you have taken to satisfy yourself with the response of the DHSC to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation (in particular in the Second Interim Report of Sir Brian Langstaff).

Witness Name: Shona Dunn
Statement No.: WITN7714001
Exhibits: N/A
Dated: 05/07/2023

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF SHONA DUNN

Contents

Section 1: Introduction

I, Shona Dunn, will say as follows: -

1.1. My name is Shona Hunter Dunn. I was born on GRO-C 1969. My professional address is 39 Victoria Street, London, SW1H 0EU. In April 2021 I became Second Permanent Secretary at the Department of Health and Social Care ("DHSC") and I remain in this role to date. At an earlier point in my career, between June 2016 and October 2018, I also served as the Director General for Economic and Domestic Affairs in the Cabinet Office.

1.2. I am providing this statement in response to a Rule 9 request from the Inquiry, dated 5 June 2023, which asks questions which relate to both of these roles.

1.3. In responding to these questions, I would like to make clear my deepest sympathies for all those, infected and affected, who have been so seriously impacted by the Infected Blood tragedy. I acknowledge in particular the concern regarding the time it has taken for the Government to address their issues.

Section 2: Employment History

2.1. The following table outlines my employment history:

Table 1 – Employment History

Date	Organisation	Role
1995 - 2005	Department for Environment (and its re-organisations: Department of the Environment, Transport and the Regions; Office of the Deputy Prime Minister; Department for Communities and Local Government)	Policy adviser
2005 - 2006	Westminster City Council	Head of Policy
2006-2008	Department for Communities and Local Government	Deputy Director Sustainable Buildings
2008 - 2011	Department for Communities and Local Government	Director of Fire and Resilience
2011 - 2013	Department for Communities and Local Government	Director of Planning
2013 - 2016	Department for Education	Director General, Education Standards
2016 - 2018	Cabinet Office	Director General, Economic and Domestic Affairs Secretariat
October 2018 to Nov 2020	Home Office	Second Permanent Secretary
Nov 2020 to April 2021	Cabinet Office No. 10 Department of Health and Social Care	SRO Community Testing and Managed Quarantine Services
April 2021 to present	Department of Health and Social Care	Second Permanent Secretary

Section 3: Roles and Responsibilities

3.1. I have been asked to provide a brief description of my roles and responsibilities as Director General for Economic and Domestic Affairs at the Cabinet Office.

3.2. In my role as the then Director General for Economic and Domestic Affairs at the Cabinet Office, I led a team of officials who provided policy advice and briefing to the Prime Minister (PM), the Minister for the Cabinet Office and the Cabinet on the Government's economic and domestic policies. This was done by working with officials across government departments to bring advice together which could be considered by the PM, Cabinet ministers and Cabinet committees on issues that required collective agreement. I was also responsible for the Prime Minister's Implementation Unit, which, working with government departments, monitored and supported the implementation of the PM's top policy priorities across Government.

3.3. I confirm that in my role as the Director General for Economic and Domestic Affairs, I was not a member of any committees, associations, working parties, societies or groups relevant to the Inquiry's Terms of Reference.

3.4. I have been asked to provide the same description in relation to my role as Second Permanent Secretary at DHSC.

3.5. As the Second Permanent Secretary at DHSC I act as the Permanent Secretary's deputy in all Departmental matters. I carry particular responsibility for all strategy, finance and people related matters, and for the operation of the Department and its enabling functions. Being Second Permanent Secretary means I am also an additional Accounting Officer ("AO"). Some of the work I have undertaken consistent with my role as an additional AO relevant to this written statement is described further below at paragraphs 5.9 to 5.11. My involvement, in this role, with any committees, associations, working parties,

societies or groups relevant to the Inquiry's Terms of Reference, is set out in Sections 5, 6 and 7 of this written statement.

Section 4: Awareness of the decision to hold a public inquiry

4.1. I have been asked what awareness I had of the then Prime Minister's (Theresa May) decision in July 2017 that there should be a public inquiry into the circumstances in which people were infected by blood and blood products when I was a Director General in the Cabinet Office. I have also been asked what involvement I had in that decision and/or setting up of the Inquiry.

4.2. In my role as the then Director General in the Cabinet Office, it is possible that teams I oversaw were aware of, or involved in, the preparation of advice to the PM on the matter of the setting up of the Inquiry, and it is also possible that I was personally involved in some meetings at which such advice was discussed. However, I have no recollection of being directly involved in the preparation of such advice, nor do I recall being involved in any discussions specifically about the setting up of the Inquiry, or about the then Prime Minister's (Theresa May) decision in July 2017 that there should be a public inquiry into the circumstances in which people were infected by blood and blood products. Given the volume of documentation that would have passed through my office during this period, it is likely that numerous documents were copied to me, but unless my direct involvement was required, they may not have been brought directly to my attention. As part of efforts to recall the events that transpired during this period, I understand that Cabinet Office colleagues have searched the inbox records from my time as a Director General in the Cabinet Office and they have found no documents that suggest I had any involvement in the then PM's decision to set up the Inquiry or the setting up of the Inquiry at the time.

4.3. I have been asked what consideration was given by me or, to my knowledge, others within the Cabinet Office, to the possibility of compensation for those infected and affected. Given the above, I can confirm that I have no memory of giving any consideration to the possibility of compensation for those infected and affected by contaminated blood or blood products during this period. I can

also provide no information on who within the Cabinet Office might have given such consideration at the time.

Section 5: Consideration of compensation as Second Permanent Secretary at DHSC

5.1. I have been asked when I first gave consideration, as Second Permanent Secretary at DHSC, to the question of compensation for people infected and affected by the use of infected blood and blood products.

5.2. Under Section 3 of this statement, I have set out my roles and responsibilities as Second Permanent Secretary at DHSC. I would like to expand upon this to clarify my specific involvement in the DHSC work relating to Infected Blood.

5.3. I became Second Permanent Secretary at DHSC in April 2021. The Permanent Secretary, Sir Chris Wormald, had recused himself from anything related to the Infected Blood Inquiry in March 2021 due to a personal connection to a witness. The then Second Permanent Secretary dealt with all relevant matters that would otherwise have come to a Permanent Secretary level until his departure in April 2021. I took on his role at that point, and it was at this point that I became aware of the question of compensation for people infected and affected by the use of infected blood and blood products.

5.4. Before turning to the detail of my consideration of these matters, I wish to set out the nature of my role in more detail.

5.5. I have explained my role as Second Permanent Secretary in DHSC at paragraph 3.5. In relation to Infected Blood, my role is in line with what would be expected of a Permanent Secretary, and focuses primarily on matters of strategic significance to the Department. Day to day policy work on Infected Blood, including engagement with ministers, and with the Cabinet Office, has largely been led by the responsible Senior Civil Servants ("SCS"). The Permanent Secretary (and here by extension the Second Permanent

Secretary) retains overall responsibility for the work of the Department and its advice to ministers, but does not routinely clear or manage progress on each piece of advice, unless matters are specifically escalated to them. In general, the responsible SCS would put submissions directly to ministers where a ministerial decision was required or if ministers needed to be updated.

5.6. It may be helpful to offer a description of how this arrangement works in practice. My Private Office is routinely copied into all submissions to ministers as well as a large volume of other official material. As would be the case in Private Offices across Government, my Private Office staff review those documents and escalate to me only those which require my personal attention or decision in accordance with my responsibilities. Other material may be summarised for me but not all correspondence will be communicated to me. The fact that I am copied into an email does not therefore mean that I will have personally read that email, but there will be an email record of any comments or decisions I have made with respect to a specific document.

5.7. With respect to Infected Blood, I have empowered the responsible SCS with undertaking all day to day work including briefing ministers, as needed. However, I expect to be, and have been, consulted and briefed by colleagues on any aspects which have strategic implications for the work of the Department. My responses to the questions in Sections 5, 6 and 7 of this statement should be viewed in this light.

5.8. Returning then to the question that I have been asked by the Inquiry about my knowledge of the issue of compensation for those infected and affected:

a) My first recollection, as the new Second Permanent Secretary, of being aware of compensation as an issue is when the-then Secretary of State for Health and Social Care, the Rt Hon Matt Hancock, was preparing to give evidence on issues of financial and other forms of support to the Inquiry in May 2021. Although I was not involved in those preparations, I recall being present on one occasion when these matters were

discussed with him. As the Inquiry will be aware, Mr Hancock's oral evidence to the Inquiry included his comment that, *"…what I can say to you is that we will respect the outcome of the Inquiry and if the Inquiry points to compensation, as opposed to a support scheme, in the future then the Government will pay compensation."* (Mr Hancock's oral evidence on 21 May 2021, [INQY1000121] at 151:15-19).

b) On 20 May 2021, the Paymaster General, the sponsor minister for the Infected Blood Inquiry, also announced the appointment of Sir Robert Francis QC to carry out work looking at options for a framework for compensation, and asked him to report back to the Paymaster General with recommendations before the independent Infected Blood Inquiry reported to meet the Government's commitment to consider a framework for compensation. The terms of reference of this study were still to be finalised.

c) Once Sir Robert Francis had provided his report to the Cabinet Office, I was advised in my role as the Second Permanent Secretary in DHSC by the responsible SCS of the recommendations in Sir Robert Francis' Compensation Framework Study. The work on the Government's response to the report was being coordinated by the Cabinet Office and their Second Permanent Secretary.

d) I subsequently had a conversation with Sue Gray, Second Permanent Secretary at the Cabinet Office on 20 July 2022, where we discussed the need for a proposal for interim payments for infected and bereaved partners (explored in my written statement below) and that the decision as to who would fund interim payments was a cross-Government issue.

5.9. At times, my role as the relevant DHSC Accounting Officer for this work has required a closer engagement with the Government's response to Sir Robert Francis' study and Sir Brian Langstaff's recommendations and interim reports regarding Infected Blood compensation. When the Government decided to make an interim payment to those infected and bereaved partners registered on UK Infected Blood support schemes in August 2022, the responsible SCS

took forward work to implement this policy. This fell to DHSC rather than the Cabinet Office because it was determined that the swiftest route to making payments was to do so through the mechanisms established in NHS Business Services Authority for the administration of the England Infected Blood Support Scheme. The funding necessary to make payments would therefore flow through DHSC making me the relevant Accounting Officer.

5.10. Consistent with my role as AO, I provided an Accounting Officer assessment of the proposal. Such an assessment is often used as a means of establishing the degree to which a significant policy proposal or plan measures up to the following standards:

- Regularity: the proposal has sufficient legal basis, Parliamentary authority, and Treasury authorisation; and is compatible with the agreed spending budgets.
- Propriety: the proposal meets the high standards of public conduct and relevant Parliamentary control procedures and expectations.
- Value for money: in comparison to alternative proposals or doing nothing, the proposal delivers value for the Exchequer as a whole.
- Feasibility: the proposal can be implemented accurately, sustainably, and to the intended timetable.

5.11. On 16 August 2022 I wrote to Meg Hillier, Chair of the Public Accounts Committee (PAC) about the interim payments policy. This letter was necessary because of the long-standing convention that Parliament should be alerted when a Department is intending to do something that establishes a contingent liability. In my letter I made the Chair of the PAC aware of the Government's intention to announce interim payments to infected and bereaved partners in accordance with Sir Brian Langstaff's recommendation. I also set out my reasoning (supported by HMT) for our handling of the contingent liability that might arise as a consequence of the expectation such an announcement could

create with respect to a future compensation scheme. I responded to Ms Hiller's questions arising from my letter in a further letter of 28 October 2022.

5.12. As noted previously, notwithstanding my involvement in the above, the work on Sir Robert's recommendations (and on those made by the Chair in his Interim Report) during this period continued to be coordinated by the Cabinet Office.

5.13. My level of involvement on the issue of compensation began to increase once Cabinet Office-led Permanent Secretary meetings began. I attended the first of these meetings on 30 November 2022. At that meeting I committed to DHSC working closely with Cabinet Office colleagues as they developed their understanding of the practical, legal and financial aspects of the recommendations made by Sir Robert Francis, with the intention of enabling Government to be ready to respond when the Infected Blood Inquiry reported (expected then in the summer 2023).

5.14. Since then, I have represented DHSC at Cabinet Office-led Permanent Secretary meetings on Infected Blood compensation, as well as some 'trilateral' meetings with the Minister for the Cabinet Office. With the advent of a Small Ministerial Group of relevant ministers from across Whitehall I was made aware of the relevant papers for that group and have commented where appropriate. Some of these papers have been prepared by DHSC officials as a contribution to the overall work of the Group.

Section 6: Understanding the impact of waiting for recognition of losses

6.1. I have been asked to describe the steps that I have taken as Second Permanent Secretary at DHSC to understand the impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.

6.2. From the involvement I have set out in the other sections of this statement, and in particular from my engagement with Sue Gray and subsequently with officials and ministers who have worked on these issues for some time, I am acutely aware of the significant concerns of those infected and affected connected with waiting for recognition of individual losses. Since April 2021, I have been regularly updated by the Infected Blood Inquiry policy team within the NHS Quality, Safety and Investigations Directorate at DHSC on issues relevant to the Inquiry and the evidence it has been considering. The Department's interaction with the Inquiry has emphasised the concerns that the holding of this Inquiry came far too late; that the moral responsibility to those harmed had not been acknowledged; and that the issue of compensation has not been sufficiently addressed. I am aware of the strength of feeling on all these issues. I fully acknowledge the impact that must have on the daily lives of those involved and echo the comments made in DHSC's closing statement to this Inquiry on 18 January 2023 in respect of the Government's acceptance that there is a moral responsibility to those harmed through the receipt of infected blood and blood products provided by the NHS.

6.3. Consideration of the implementation of the recommendations requires a number of complex issues to be addressed (see Section 7 below). In my experience, all those involved in considering the implementation of the recommendations in relation to compensation are working quickly and effectively, and in full recognition of the importance of reaching conclusions as rapidly as they reasonably and responsibly can. I want to emphasise again, that

I recognise that those people infected and affected, who have lived with these issues for a considerable period of time, are an ageing and vulnerable group for whom swift action is vital.

Section 7: DHSC response to the Compensation Framework Study

7.1. I have been asked to describe the steps I have taken to satisfy myself as to the response of DHSC to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation, and in particular the Second Interim Report of Sir Brian Langstaff.

7.2. I have already noted that the Cabinet Office has coordinated the Government's response to the Infected Blood Inquiry, including the responses to the Compensation Framework Study by Sir Robert Francis and the Second Interim Report of Sir Brian Langstaff. As is the case for all policy areas, the decisions about the final response to recommendations lie with ministers and not with officials. As the recent response by the Rt Hon Jeremy Quin, the Minister for the Cabinet Office ("the MCO") to the debate on 22 June 2023 confirmed, the decision-making process in relation to the recommendations *"…remains in practical terms an extremely complex and demanding issue that requires a huge focus to resolve. No final decision on compensation has yet been made"* (see [Hansard: HC, 22.06.2023, Volume 734, Columns 971-1008] for this debate).

7.3. On 23 March 2022, the Secretary of State for Health and Social Care was advised that Sir Robert Francis had submitted the Compensation Framework Study ("the CFS") to the Cabinet Office, and ministers have been updated on developments since then. I have been involved in some meetings and copied into submissions, but the Cabinet Office has continued to coordinate on this issue throughout, not least as it is a cross-UK matter and the Cabinet Office are the sponsors of the Infected Blood Inquiry.

7.4. As noted above, notwithstanding the Cabinet Office's coordination, DHSC officials, including myself, have been involved in meetings at various levels to

discuss options for responding to the Inquiry's recommendations including matters relating to the CFS and the Second Interim Report.

7.5. Over the summer and autumn of 2022, the responsible SCS delivered the pressing policy work on the delivery of the recommendation for an interim payment to be made. As discussed above at paragraphs 5.9 to 5.11, I was involved, in my AO role, in communication with the PAC about the new contingent liability created by the interim payments. The interim payments were made in October 2022.

7.6. As set out in paragraph 5.13 above, from November 2022 there have been Cabinet Office-led Permanent Secretary meetings to understand the practical, legal and financial aspects of the proposals.

7.7. In his statement in Parliament on 15 December 2022, the MCO advised that the Government had intended to publish a response to Sir Robert Francis' study alongside the study itself, but the complexity and wide range of factors revealed in Sir Robert's work meant it was not possible to publish a comprehensive response at that stage. The Minister then referred to the work undertaken across Government to ensure that the interim payments recommended in Sir Brian Langstaff's interim report were made and said that *"…those interim payments were only the start of the process, and work is ongoing in consideration of Sir Robert's other recommendations"* (see statement at [Hansard: HC, 15.12.2022, Volume 724, Columns 1249-1251]).

7.8. In early 2023 the Infected Blood Small Ministerial Group (SMG) was set up. Trilateral ministerial meetings have also been set up to ensure a consistent approach across Government; these are ongoing.

7.9. The meetings described here and the underlying policy work supporting them are working to resolve a number of the complex issues relating to compensation

that arise from the recommendations. Although this is not an exhaustive list, these include:

- The form and location of any Arms' Length Body (ALB), including its sponsorship arrangement. If such a body were directly answerable to Parliament (as recommended), it would lie outside of the normal procedures for ensuring the scrutiny of and accountability for public expenditure; in the debate on 22 June of this year, the MCO alluded to this stating,

  > *"…Sir Brian's preference is for an arm's length body to be established in which the precise level of compensation under his framework would be determined by independent, legal and medical expert bodies. Sir Brian proposes that—I believe this is unique for anything like this scale—the ALB should report directly to Parliament rather than via a departmental accounting officer. While no decision has been made, were the Government to go down that route it would, as I alluded to in my previous statement, be a very significant step. It would also be extremely likely—the hon. Member for Putney (Fleur Anderson) referred to this—to require primary legislation, although I should also say that the same may well be required for other compensation routes."*

- How any arrangement would involve the Devolved Administrations. As the MCO said on 22 June 2023,

  > *"…we are mindful that health is a devolved matter. We are committed to working with those Governments to develop an effective response that delivers across the UK."*

- The financial commitments and potential contingent liabilities implied by recommendations; work on this is ongoing, but it is complicated by a number of uncertainties such as the numbers of potential claimants. As the MCO said at the debate, *"…Sir Brian's expert statisticians did their utmost to come to a conclusion on the numbers of those impacted. However, given the sheer complexity of the question and the lack of readily available data, they were still forced to produce a very wide estimated range of potential applicants";*

- Funding: Any costs associated with the compensation, whether delivered in the immediate term or further in the future, will require substantial new funding to be secured from Government funds. As the MCO said, *"Just as it is critical to ensure that any scheme works effectively for the victims, the House should expect the Government to work through the estimated associated costs to the public sector. Those estimates have not yet been finalised. Much work continues to be undertaken, but that is work in progress."*

- The need to resolve these policy and practical issues before the legislative basis for the payment of compensation is finalised. As the MCO said, "*It would also be extremely likely….to require primary legislation, although I should also say that the same may well be required for other compensation routes."*

7.10. As can be seen from this list, the ongoing issues are complex and indeed some are unprecedented. They involve different departments and different stakeholders and as such require input from many different teams and individuals. Work is required to ensure that any compensation scheme is fully costed, funded and effective in achieving its aims.

7.11. As set out at paragraph 5.13 above, I have attended a number of cross-Government meetings on these issues, as well as considering papers relating to DHSC's analysis. I have been asked about my assurance of the DHSC's response and have explained in this statement how I have engaged with this work, consistent with my role as Second Permanent Secretary and Accounting Officer. The most recent Government position is set out in the MCO's response to the debate mentioned above. The MCO has confirmed that the Government takes this very seriously. During the debate he said,

> *"The Government have made clear that they want the work to be done to ensure it is ready to respond to Sir Brian Langstaff's final report as soon as possible. I have also made clear that that does not preclude us from making an earlier statement if we are in a position to do so."*

And later, in his response, the MCO said,

> *"We are all determined to take it forward to make certain that we produce a just and equitable settlement. I am sorry that I am not in a position to say more to the House at this stage, but we will continue to update hon. Members as we go through the work on an extremely complex issue—I know hon. Members recognise that—which, above all, we need to get right for the victims".*

Statement of Truth

I believe that the facts stated in this witness statement are true.

GRO-C

Signed……

5 July 2023

Dated……

List of questions provided to Boris Johnson under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. When did you first give consideration as Prime Minister to the question of compensation for people infected and affected by the use of infected blood and blood products? What further consideration did you then give to this issue, prior to the Government's examination of the First Interim Report of the Inquiry (which was published on 29 July 2022)?

2. Prior to 29 July 2022, were you aware of any further consideration of compensation by your Ministers or officials during your time as Prime Minister? If so please provide details.

3. On 17 August 2022 you announced that the Government, having examined the First Interim Report "as a matter of urgency", would pay interim payments in accordance with the Report's recommendations. Having observed that it was "utterly appalling that families have had to fight for so long to be heard", you stated that "Today we are finally beginning to right that wrong". Would it be right to understand from your statement that your expectation was that these interim payments would be only the "beginning" and that further compensation would follow?

Witness Name: Boris Johnson
Statement No. WITN7702001
Exhibits: WITN7702002
Dated: 10 July 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF BORIS JOHNSON

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023.

I, BORIS JOHNSON, will say as follows: -

1. I was Prime Minister between 24 July 2019 and 06 September 2022. I have been asked when I first gave consideration to the question of compensation for people infected and affected by the use of infected blood and blood products. When preparing this statement Cabinet Office colleagues have conducted document searches in order to assist me in fully responding. Those searches have not revealed any documents to suggest that I considered compensation before the first interim report of this inquiry which was published on 29 July 2022. Even if I had not actively thought about compensation beforehand, I certainly gave careful consideration to it at that point.

2. Prior to the interim report being published, I cannot recall any particular consideration of compensation in respect of infected blood. I was of course aware that the inquiry was ongoing and that compensation would be considered once the inquiry had concluded and reported.

3. Whilst not specifically about compensation, I wrote a public letter to campaigner groups on 21 October 2019 in which I indicated that the Rt Hon Oliver Dowden CBE MP (in his role as Minister for the Cabinet Office ("MCO")) would keep me updated on the inquiry's progress and the issue of the disparity between the support available in the devolved administrations. I have been asked whether I received updates from Mr Dowden. Document searches conducted on my behalf within the limited time available have not identified updates. However, it must be noted that on 06 November 2019 the pre-election period commenced with a general election scheduled for 12 December 2019. During the pre-election period Members of Parliament ("MPs") must exercise caution in making announcements or decisions that might have the effect of being new or long-term in nature. The absence of updates to me during that time could have been related to the pre-election period we were in.

4. Following the general election and Mr Dowden's continued appointment at MCO I understand that Mr Dowden met with campaigners on 28 January 2020 and that on 12 February 2020 [**WITN7702002**] he wrote to me setting out the issues discussed at that meeting. I note that the following day there was a cabinet reshuffle, and the Rt Hon Penny Mordaunt MP became the Paymaster General and MCO, meaning that she assumed the role of sponsor Minister for the Inquiry.

5. I have been asked whether I received the letter from Mr Dowden and what consideration I gave to it. I cannot recall seeing the letter.

6. I note that Oliver Dowden's letter mentioned compensation and one campaigner mentioned a framework. I am aware that during Penny Mordaunt's posting as MCO she commissioned an independent framework compensation study.

7. Shortly after receipt of the inquiry's interim report, on 03 August 2022 I received a letter from 3 former health secretaries, the Right Honourable MPs Jeremy Hunt, Matt Hancock and Andy Burnham, urging me to authorise the interim compensation payments recommended by the Chair.

8. I am aware that the then Minister for the Cabinet Office ("MCO") and Paymaster General, the Right Honourable Michael Ellis QC MP wrote to the Chair on 16 August 2022 to confirm that the government accepted the Chair's recommendation in the interim report regarding interim payments.

9. On 17 August 2022 I announced that the government accepted the recommendation to pay £100,000 to each of the victims and to those who tragically lost their partners. The announcement was made via various government communication channels, including my official Twitter feed as the Prime Minister. I also have a personal Twitter account and my team re-posted the official 'tweet' and commented "*It is utterly appalling that the families affected by the infected blood scandal have had to fight for so long to be heard. Today, we are finally beginning to right that wrong.*" I have been asked whether my comments indicated my expectation that further compensation would follow. It is right that I believed that the interim payments were just that, interim, provisional. In the video message making the announcement I also mentioned that people could register with the blood schemes "*between now and the inception of any future scheme*", which is another indication that I felt the interim payments were the beginning, not the end.

10. I am pleased that I was in government when the first steps towards righting the wrong were taken. I have every sympathy for the infected and affected.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated _10th July 2023 _____

Table of exhibits:

Date	Notes/ Description	Exhibit number
12.02.2020	Letter from Rt Hon Oliver Dowden CBE MP to Prime Minister	WITN7702002

Witness Name: Boris Johnson

Statement No. WITN7702001

Exhibits: WITN7702002

Dated: 10 July 2023

INFECTED BLOOD INQUIRY

EXHIBIT WITN7702002

RF/ adv OS
PM, DHSC + CO

120512

Rt Hon Oliver Dowden CBE MP
Paymaster General and Minister for the Cabinet Office
Cabinet Office 70 Whitehall London SW1A 2AS

Rt Hon Boris Johnson MP
Prime Minister
10 Downing Street
London
SW1A 2AA

Our reference: MCO/00699

12th February 2020

Dear Prime Minister,

Update on the Infected Blood Inquiry

Soon after you became Prime Minister you asked me to take on the role of the Sponsor Minister of the Infected Blood Inquiry.

In this capacity, the Parliamentary Under-Secretary of State for Health, Nadine Dorries, and I recently met with 25 campaigners representing those infected and affected across the UK, to hear their views and listen to their concerns.

At this meeting I undertook to write to you setting out the issues raised in discussion and the subsequent programme of work underway. Please see an update below.

Attendees at this meeting spoke passionately of the suffering that both they and their loved ones had endured as a result of this tragedy, and their understandable desire for justice and closure. Whilst we may not be able to resolve all the issues they raised and, in some cases, action will necessarily follow the conclusion of the public inquiry, I believe there are some incremental and worthwhile steps we can take across Government to better support them during this interim period.

Parity of Support

A number of campaigners raised concerns regarding the significant disparities in support given to those infected and affected across the UK. The following were of particular note:

1. The welcome uplift in payments to primary beneficiaries in England made in April 2019, and the more recent announcement in January 2020 of £1m in funding for those in Northern Ireland, has had the unfortunate consequence of leaving the Welsh government as a notable outlier in this respect. It is vital that this is addressed as a matter of urgency.

2. Widows and bereaved partners were highlighted as a group suffering from particular hardship in light of the limited financial support offered outside of Scotland.
3. Within and between individual schemes, there are clear disparities and anomalies between the different categories of infected and levels of infection, for example between those infected with HIV versus Hepatitis C.
4. Finally, there was significant consensus amongst campaigners about the need for increased funding to deliver bespoke psychological support for those infected and affected. This has become particularly significant now that the Inquiry is underway and people are having to relive traumatic experiences to assist with this process.

The issue of parity across the UK is clearly complex; parity of financial payments is not the same as wider parity - in how beneficiaries are assessed, or parity of psychological support. It is also, of course, vital that each nation's individual scheme should be respected under Devolution, and any steps towards greater parity must therefore be done in consultation and consort with the Devolved Administrations.

However, it is clear that we must take further action here if the government is to make good the commitment made last July to achieve greater parity. To this end, I propose to:

1. Write to the Secretary of State for Wales requesting that he urgently engage the Welsh Government on uplifting payments to primary beneficiaries;
2. Write jointly with the Secretary of State for Health to the Devolved Health Ministers requesting urgent engagement at official level on proposals for achieving greater parity; and
3. Write to the Chief Secretary to the Treasury to pass on the desire of campaigners that the Treasury should fund this. This will be complemented by a letter from the Secretary of State for Health to the Treasury requesting funding to improve parity as part of their Budget 2020 bid.

The Parliamentary Under-Secretary will also speak to Claire Murdoch (NHS England's Mental Health Director) on what can be done to improve psychological support.

Compensation

There was a call from a number of attendees for the Government to pay compensation now, following the model adopted in the Republic of Ireland. The Parliamentary Under-Secretary and I reaffirmed the Government's current position on this issue, namely that we should wait until the Inquiry reports before considering compensation.

One campaigner asked Ministers to consider their proposal on a framework for compensation, prior to the Inquiry reporting. I have asked my officials and officials in the Department of Health and Social Care to consider this proposal.

English Infected Blood Support Scheme and Benefits Assessments

Finally, a number of attendees noted concerns relating to the English Infected Blood Support Scheme (EIBSS) in particular, including the capability of staff, process/administrative errors and burdensome assessment processes. Similar frustrations were raised in relation to DWP benefits assessments.

It seems right that, at a minimum, we should examine this. The Health Minister and I have therefore undertaken that:

1. DHSC officials will work with NHS Business Services Authority to review EIBSS processes;
2. Following engagement at official level, I will write to the Minister for Disabled People, Justin Tomlinson, to explore the possibility of 'passporting' infected persons through the benefits system.

The above is by no means exhaustive, and a number of other individual issues were raised by attendees in discussion. I have attached the full meeting minute behind for your information.

I hope this note provides a helpful update. I have instructed my officials to continue to work closely with those in Number 10 and DHSC to actively follow up on the areas agreed with campaigners, and I will ensure your officials are kept regularly updated.

Yours ever,

GRO-C

Rt Hon Oliver Dowden CBE MP
Paymaster General and Minister for the Cabinet Office

List of questions provided to Jeremy Hunt under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. When did you first give consideration as Chancellor of the Exchequer to the question of compensation for people infected and affected by the use of infected blood and blood products?

2. Please describe the steps you have taken to understand the current impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.

3. Please describe, in as much detail as you are able to provide, the steps you have taken as Chancellor of the Exchequer to satisfy yourself with the response of the Government to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation (in particular in the Second Interim Report of Sir Brian Langstaff).

4. Please confirm when the Government intends to provide a substantive response to the Second Interim Report.

Witness Name: Rt Hon Jeremy Hunt

Statement No.: WITN3499034

Exhibits: WITN3499035 – WITN3499036

Dated: 05.07.23

INFECTED BLOOD INQUIRY

SECOND WRITTEN STATEMENT OF Rt Hon Jeremy Hunt MP

I, Jeremy Richard Streynsham Hunt, will say as follows: -

Section 1: Introduction

1. I am currently the Chancellor of the Exchequer and have been since 14 October 2022. I make this statement pursuant to a 'Rule 9' request from the Inquiry dated 5 June 2023, which asked me questions regarding my involvement in the matters under investigation in my capacity as Chancellor to date.

2. I have previously made a written statement dated 28 June 2022 and given oral evidence to the Inquiry on 27 July 2022, where I answered questions regarding my period in office at the Department of Health and Department of Health and Social Care as it became.

3. I have not set out my career and government roles in this statement, which were outlined in my previous statement.

4. As I said in my previous statement in June 2022, this Inquiry is about an historic injustice, and I have been acutely conscious of giving timely recognition to its victims.

5. The government has accepted the moral case for compensation. I have received updates and advice from my officials in my capacity as Chancellor. These concern live, ongoing policy issues, upon which ministers have not yet come to a decision. It would not be appropriate to share these documents with the Inquiry at this stage in line with the longstanding constitutional convention preserving the protected space required to permit full and frank discussion of policy in the course of formulation. The information contained is subject to change and further discussion and will be reviewed upon consideration of the recommendations of the Inquiry.

6. The government will confirm its response to the recommendations of the Inquiry after a final report is published in the autumn, as has previously been set out by the Minister for the Cabinet Office in his statement to the House of Commons on 19 April 2023, and subsequent statement on Thursday 22 June 2023. The relevant decision, and reasons for it, will then, of course, be provided to the Inquiry and published.

Section 2

7. **I have been asked when I first gave consideration as Chancellor of the Exchequer to the question of compensation for people infected and affected by the use of infected blood and blood products.**

8. As Chancellor, I have continued to stay well informed on the progress being made on the decisions around a compensation scheme, particularly following the publication of the Second Interim Report by Sir Brian Langstaff.

9. Ministerial responsibility for these issues primarily lies with the Chief Secretary to the Treasury, Rt Hon John Glen MP. This reflects the usual Treasury ministerial structures, where the Chief Secretary takes day-to-day responsibilities for spending issues such as these. The specific role of the Chief Secretary in this matter has included undertaking meetings with other government ministers and Treasury policy officials to make progress on decision-making for a compensation scheme (this most recently included a Small Ministerial Group meeting chaired by the Minister for the Cabinet Office on 14th June) and replying to relevant correspondence and Parliamentary questions.

10. I have received regular advice from my officials updating me on the progress DHSC and Cabinet Office are making on considering the policy options for a compensation scheme.

11. On 22 February this year I received advice on the fiscal implications of the policy options being considered. I noted my officials' updates and in particular their emphasis on the imperative to act quickly for the benefit of the infected and affected and to respond meaningfully to the public inquiry, whilst recognising the wider economic and fiscal context.

12. Since then, I received advice on 18 May this year, updating me on the latest of policy options being considered for a compensation scheme. I also received a note on 21 June, which my officials prepared for No.10, outlining some of the more technical, fiscal considerations.

13. As I set out above, given these are live policy issues and the details within the advice are not yet confirmed, I have not provided these submissions as exhibits.

14. In addition to the advice of my officials, I review an updated Treasury scorecard – which sets out an estimated impact of potential measures on public finances across the forecast period – most weeks, and particularly frequently during processes for fiscal events, most recently for the Autumn Statement 2022 and Spring Budget 2023. I know, from the aforementioned advice from officials and the preparations that are made for the Small Ministerial Groups attended by the Chief Secretary, that DHSC is progressing analysis quickly to refine these estimates.

15. The government is considering the recommendations of the Compensation Framework by Sir Robert Francis and the Second Interim Report of Sir Brian Langstaff within the UK's wider macroeconomic context, and the government's enduring commitment to the sustainability of public finances. Treasury officials are working closely with DHSC and Cabinet Office to ensure that any fiscal or economic implications of a compensation scheme are duly considered as one of many factors informing a final decision.

16. **I have been asked to describe the steps I have taken to understand the current impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.**

17. As I emphasised in my statement last year, I have been acutely conscious of the impact on those infected and affected and the need to recognise injustice done to victims, since first contact with my sadly late constituent Mike Dorricott in 2007. I deeply regret that Mike was unable to obtain justice whilst alive.

18. In terms of the current impact of waiting for recognition, I understand particularly from having met other constituents, GRO-A and GRO-A, that it is imperative that the government acts quickly to give the infected and affected the certainty they need over this issue, and I am confident that the government is doing so.

19. **I have been asked to describe the steps I have taken to satisfy myself with the response of the Government to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation particularly in the Second Interim Report of Sir Brian Langstaff.**

20. The Compensation Framework Study by Sir Robert Francis was published during my time as a backbencher. Shortly after, on 3 August 2022, I wrote to the Prime Minister Boris Johnson along with former Health Secretaries Matt Hancock MP and the Rt Hon Andy Burnham, urging immediate action on interim payments to victims and bereaved partners [WITN3499035]. Interim payments to infected people and bereaved partners then began to be paid in October 2022 – shortly before I became Chancellor.

21. On 15 December 2022, in my capacity as chair of the Cabinet Committee on Home Affairs, I wrote to the Minister for the Cabinet Office to confirm the Committee's clearance to announce the Government's acceptance of the 1st and 19th recommendations of Sir Robert Francis KC's compensation study – including acceptance of the moral case for compensation. This letter can be found at WITN3499036.

22. I welcome the publication of the Second Interim Report of Sir Brian Langstaff earlier this year. As I have outlined above, I have been kept up to date by my officials through regular updates on how the government is carefully considering the recommendations of both reports.

23. **I have been asked to confirm when the Government intends to provide a substantive response to the Second Interim Report.**

24. The Government is considering the recommendations of the Second Interim Report carefully. HM Treasury officials are working closely with colleagues in the Cabinet Office and Department of Health and Social Care, who are leading on the analysis of the recommendations. Ministers currently meet regularly to discuss this issue through

Small Ministerial Groups as referenced, as mentioned most recently on 14 June. The Chief Secretary and my officials will continue to be closely involved in this process.

25. As stated previously, the Government will respond to the recommendations of the inquiry following the publication of its' final report in the autumn. I will continue to take a close interest in the final outcome of the report.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 05/07/2023

Table of exhibits:

Date	Notes/ Description	Exhibit number
03.08.22	Letter to the Prime Minister signed by Rt Hon Jeremy Hunt, Rt Hon Andy Burnham and Matt Hancock MP urging immediate action on interim payments	WITN3499035
15.12.22	Letter from the Chancellor to the Minister for the Cabinet Office confirming clearance to announce the Government's acceptance of two of Sir Robert Francis's recommendations	WITN3499036

Rt Hon Boris Johnson MP
Prime Minister
Number 10 Downing Street

3rd August 2022

Re: Infected Blood Interim Payments

Dear Prime Minister,

We are writing to urge you to authorise the making of interim payments to all victims and all bereaved partners of victims of the infected blood scandal with immediate effect. As recommended by the Infected Blood Inquiry Chair, Sir Brian Langstaff, on 29th July those payments should be worth at least £100,000 per award.

As Health Secretaries with a combined period in office of 10 years we passionately believe that this is the vital next step towards justice for those who have suffered dreadfully over the decades as a result of this scandal. The victims and their families deserve nothing other than the complete and immediate acceptance of Sir Brian's recommendation. To refuse to do so would simply continue the injustice thus far handed out by the state to a group of innocent victims condemned to years of suffering and neglect.

Any delay to such payments, for instance by arguing that we need to wait for the inquiry to finish, for a new Prime Minister, or for Parliament to return, will sadly almost certainly see more of the victims die before they see justice. Already more than 400 people have died since the inquiry started. With some estimating that one infected person is dying every four days waiting until even the end of the year when the Inquiry hearings are concluded would mean another 40 people would die. That number would likely be above 100 if the government waits until the inquiry has reported in full. This is simply unacceptable and will cause yet more harm to a group of exceptionally vulnerable people.

You have the opportunity to leave a lasting and positive legacy and start to put right a terrible injustice that others before you have failed to do. We urge you to grasp that opportunity before it is too late for yet more victims and their families.

Yours sincerely,

GRO-C

Rt Hon Jeremy Hunt MP

GRO-C

Rt Hon Matt Hancock MP

GRO-C

Rt Hon Andy Burnham MP

HM Treasury, 1 Horse Guards Road, London, SW1A 2HQ

Rt Hon Jeremy Quin MP
Minister for the Cabinet Office and Paymaster General
70 Whitehall
SW1A 2AS

15 December 2022

Dear Jeremy,

INFECTED BLOOD: WRITE ROUND TO AGREE ACCEPTANCE OF THREE RECOMMENDATIONS IN THE COMPENSATION FRAMEWORK STUDY BY SIR ROBERT FRANCIS KC

The letter from Rt Hon Jeremy Quin MP of 5 December 2022 seeking clearance from the Home Affairs Committee for the HAC to accept recommendations 1, 4 and 19 made by Sir Robert Francis KC in his Compensation Framework Study, published by the Government on 7 June.

A response was received from the Secretary of State for Health and Social Care and the Chief Secretary to the Treasury. All other members of the Home Affairs Committee were content. This letter confirms that you have policy clearance from the Home Affairs Committee for:

1. recommendations 1 and 19; and
2. to formally accept that there is a strong moral case for compensation, as articulated in Sir Robert's first recommendation building on Government's acceptance of the case for interim compensation payments announced on 17 August.

You can proceed on the conditions that:

a. CO lead discussions around affordability and secure any associated funding with HMT.
b. Recommendation 4 is not accepted at this stage but can be accepted once further work has been done on it, along with the other recommendations on

which the Government has yet to decide.

c. The Minister for the Cabinet Office works closely with officials from HM Treasury and the Department of Health and Social Care in preparing materials for announcement, including the text of the announcement itself.

I am copying this letter to the members of the Home Affairs Committee, the Private Secretary to the PM, and the Cabinet Secretary.

Best wishes,

GRO-C

RT HON JEREMY HUNT MP
Chancellor of the Exchequer

List of questions provided to Kit Malthouse under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. Please describe your role as Chancellor of the Duchy of Lancaster in relation to the Government's decision-making in response to the First Interim Report of the Infected Blood Inquiry, the announcement on 17 August 2022 that interim compensation payments would be made, and the arrangements for their subsequent payment.

Witness Name: Christopher Laurie "Kit" Malthouse
Statement No: WITN7713001
Exhibits: None
Dated: 04 July 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF CHRISTOPHER LAURIE "KIT" MALTHOUSE

I, Christopher Laurie "Kit" Malthouse, WILL SAY as follows: -

1. I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 05 June 2023.

2. My name is Christopher Laurie "Kit" Malthouse, and I was born on GRO-C GRO-C 1966. My address is C/O The Government Legal Department, 102 Petty France, Westminster, London SW1H 9GL. My political and personal background can be read at https://www.gov.uk/government/people/kit-malthouse.

3. I welcome the opportunity to assist Sir Brian Langstaff and his team with this inquiry into infected blood. I will endeavour to assist as much as I possibly can. It should be noted that it is unlikely I saw all documents which were copied to me in my roles; such documents are routinely circulated for information to civil servants in the relevant department in preparing briefing and tend only to be shown to Ministers as necessary. This is simply because of the sheer volume of paper involved.

4. I can confirm that I am not a member of, nor have I been involved in any committees, associations, parties, societies, groups, or organisations relevant to the Inquiry's Terms of Reference. I do not have any business or private interests which are relevant to the Inquiry's Terms of Reference.

5. I have not provided evidence or been involved in any other inquiries, investigations, criminal or civil litigation in relation to the human immunodeficiency virus ("HIV") and/or hepatitis B virus ("HBV") and/or hepatitis C virus ("HCV") infections.

6. I was promoted to Chancellor of the Duchy of Lancaster on 7 July 2022, the day the then Prime Minister announced his intention to resign, and held the

post until 6 September 2022, when I was appointed Secretary of State for Education.

7. I have been asked to describe my role as Chancellor of the Duchy of Lancaster in relation to the Government's decision-making in response to the First Interim Report of the Infected Blood Inquiry ("IBI"), the announcement on 17 August 2022 that interim compensation payments would be made, and the arrangements for their subsequent payment.

8. On 29th July, Sir Brian Langstaff wrote to the Rt Hon Michael Ellis MP, Minister for the Cabinet Office, who had been leading on this issue for the government, laying out his recommendations as to payment of compensation. In the letter he said:

> *"I recommend that:*
>
> > *(1) An interim payment should be paid, without delay, to all those infected and all bereaved partners currently registered on UK infected blood support schemes, and those who register between now and the inception of any future scheme;*
> >
> > *(2) The amount should be no less than £100,000, as recommended by Sir Robert Francis QC."*

9. It was shaping up to be an exceptionally busy summer with various, severe civil emergency and other issues to deal with as well as the backdrop of the Conservative leadership election and preparing for a new administration. Nevertheless, in discussion with my Special Advisers over the weekend that followed, and through them with No.10 Downing Street, we took the view that we should make fulfilling Sir Brian's recommendations a priority.

10. At the time the IBI was being dealt with by Minister for the Cabinet Office. I took the view he needed more political assistance to get it over the line. Prospective recipients were dying all too frequently, and I could see no good reason for delay; rather there was a moral imperative for speed. I decided therefore to assume the lead.

11. From the beginning of August, I held a series of meetings, formal with officials, (including Sue Gray, then second Permanent Secretary of the department) and informal with my Special Advisers and Private Office, to discuss the issues, various obstacles and what tactics would be required to achieve our objective.

12. We sought assistance from 10 Downing Street from the outset. The Prime

Minister was very supportive.

13. I think it would be fair to say that I exerted maximum pressure through the Cabinet Office. I made it clear that I wanted to make an announcement as soon as possible, including a specific and not too distant deadline by which all payments would be made.

14. I raised the issue and the need for speed with the Secretary of State for Health in a bilateral meeting on 3rd August, and it was agreed that our teams would work together at a senior level to resolve any obstacles to payment from a DHSC perspective.

15. On 5th August I convened a cross government meeting to deal with any problems or complexities and give a very firm steer to other departments. Sue Gray led for the Cabinet Office and happily everyone was keen to proceed as swiftly as possible.

16. Concerns were expressed at the meeting on several issues, the most important of which were:

    (1) Whether it was appropriate for an outgoing administration to take the decision, and whether any decision taken would be maintained by the incoming administration.

    (2) It was necessary to clarify the taxation and benefits status of any payments, in order that recipients of payments were not subject to additional tax liabilities, or deemed to be subject to less advantageous treatment in terms of their entitlements to benefits, particularly means-tested benefits.

    (3) The issue of double recovery in the event of further compensation payments.

    (4) The method of payment and a realistic deadline by which payment should be made.

    (5) There were also issues about the complexity of identifying and then making payments to partners and bereaved family members.

    (6) Obtaining HM Treasury approval in a timely manner.

17. Further work and legal advice was commissioned with a clear steer that the payment deadline should be the end of October 2022, and that I wished to make an announcement within a matter of days.

18. Throughout the days that followed my Special Advisers and Private Office kept me up to date with progress, and there were informal meetings with officials.

19. Following an intense period of work by officials in the Cabinet Office and other departments, including expediting obtaining the relevant clearances and approvals and we were in a position to make an announcement.

20. On 16th August the Minister for the Cabinet Office wrote to Sir Brian Langstaff informing him of our intention to accept his recommendations in full and make payments to those infected and bereaved partners by the end of October 2023.

21. On 17th August a public announcement was made, and I did the morning media round the same day explaining the government's decision.

22. On 5th September, when the House of Commons returned from recess, a written ministerial statement was laid in both Houses of Parliament.

23. On 6th September 2022 I ceased to be Chancellor of the Duchy of Lancaster and took up the office of Secretary of State for Education. Thereafter I had no further involvement.

Statement of Tru

I believe the facts

GRO-C

Signed: _____

Dated: 040723.

List of questions provided to Theresa May under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. On 11 July 2017 you announced an inquiry into "the contaminated blood scandal", which you described as an "appalling tragedy which should simply never have happened". You set out your aim that the victims and families would "finally get the answers and justice they have spent decades waiting for." What consideration did you give at that time to the question of compensation for people infected and affected by the use of infected blood and blood products? Was it your expectation that compensation could be part of the "justice" that they had "spent decades waiting for"?

2. What (if any) subsequent consideration did you give, during your time as Prime Minister, to the possibility of compensation for those infected and affected?

3. Were you aware of any further consideration of compensation by your Ministers or officials? If so please provide details.

Witness Name: Theresa May
Statement No.: WITN7700001
Exhibits: Nil
Dated:

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF THE RIGHT HON THERESA MAY

I provide this statement in response to a request under Rule 9(1) and (2) of the Inquiry Rules 2006 dated 5 June 2023.

I, Theresa Mary May, will say as follows: -

1. My full name is Theresa Mary May. My date of birth is GRO-C 1956. My address is c/o The Government Legal Department, 102 Petty France, Westminster, London, SW1H 9GL.

2. Cabinet Office colleagues have assisted in providing relevant documents to me, where such documents exist. I confirm that I have had opportunity to review all documents. I have prepared this witness statement with support from the Government Legal Department. I shall endeavour to assist the inquiry as much as I can recognising the sensitive subject matter and importance of it.

Rule 9 Request

3. I have been asked questions relating to my time as Prime Minister. I was Prime Minister between 13 July 2016 and 24 July 2019. Specifically, I have been asked about the consideration which I gave to compensation for those who had suffered due to infected blood.

4. My Office was involved in communications concerning the correct form of inquiry (i.e. statutory or non-statutory), which department should sponsor the inquiry and how the inquiry should be constituted. My involvement with the question of compensation was relatively limited.

5. In July 2017 I announced an inquiry into 'the contaminated blood scandal [RLIT0001168]'. I stated at the time and continue to think that this was an 'appalling tragedy which should simply never have happened'.

6. I was aware that the Department of Health ("DH") (as it was at the time) had run a consultation on Infected Blood Support: special category mechanism between March and April 2017. I liaised with DH to request they reinstate components of the 2016 scheme sourcing the additional funding required for this from existing budgets, in order to ensure that the infected and affected continued to receive support.

7. Alongside this, a consultation was running seeking views on the form, scope and sponsorship of the inquiry. That process was due to come to an end on 18 October 2017 and shortly afterwards I confirmed that Cabinet Office would sponsor the inquiry.

8. On 08 February 2018 Sir Brian Langstaff was appointed as Chair of the inquiry and in March 2018 a consultation in respect of the inquiry's terms of reference launched. No doubt the inquiry is familiar with the timeline thereafter with hearing commencing on 30 April 2019. This announcement only applied to payments in England. The start of the hearings coincided with me announcing that the government would increase the financial support for those infected and affected by increasing the regular annual payments from a total of £46m to £75m.

9. A press release [RLIT0002051] on gov.uk on the same day included my comments: "*The start of the inquiry today is a significant moment for those who have suffered so much for so long, as well as for those who campaigned and fought so hard to make it happen.*

I know this will be a difficult time for victims and their families – but today will begin a journey which will be dedicated to getting to the truth of what happened and in delivering justice to everyone involved."

The press release also indicated that in January 2019 the then Minister for Mental Health (Jackie Doyle-Price) and the Chancellor of the Duchy of Lancaster (David Lidington) met with the Infected Blood Inquiry team and 12 infected and affected representatives to discuss the need for improved financial support and the desire for equal support across the 4 UK nations.

10. Whilst the inquiry has asked me questions about compensation, I note that my intention when I announced the inquiry was for the victims to receive the answers they deserved about how the scandal happened. Since the inquiry started, my involvement was related to financial support, which is of course different to compensation.

11. I am aware of the then Minister for the Cabinet Office Michael Ellis KC's written ministerial statement [RLIT0002052] on 31 March 2022 in which he confirmed that the government had received the report of Sir Robert Francis KC, who had been appointed to carry out a study to look at options for a framework for compensation for people infected and affected by infected blood.

12. I remain concerned for those infected or affected by this appalling tragedy and hope that this statement will be of assistance to the Inquiry.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 6. July 2023

List of questions provided to Penny Mordaunt under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. On 13 July 2020, in your capacity as sponsoring Minister of the Infected Blood Inquiry, you wrote to the then Chancellor of the Exchequer (Rishi Sunak MP) setting out your belief that it was "inevitable that the Government will need to provide substantial compensation", and that the Government should "begin preparing for this now". Please explain why you believed that the payment of substantial compensation was an inevitability and what you hoped to achieve by proposing that the Government should begin preparing for it at that stage.

2. What if any response (written or otherwise) did you receive to your letters of 13 July 2020 and 21 September 2020, either from the Treasury or from elsewhere within Government?

3. Please explain what led to the announcement of the compensation framework study on 25 March 2021.

4. What was your expectation, at the time of commissioning the compensation framework study, as to what the Government would do once it had received the study?

5. On 25 May 2023, in response to a question from Deirdre Brock MP, you stated, in relation to the "appalling scandal" of infected blood, that "we must put it right. There is not just the original injustice that was done to those people, many of whom were children at the time, but the further layers of injustice that have happened with regard to their financial resilience, as many of them lost their homes and were not able to work, facing the appalling stigma and hardship that came with that. We have to put that right."

a. Have your views on how to put it right changed since you wrote the letter dated 13 July 2020?
b. What is your understanding of the impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products?

Witness Name: Penny Mordaunt
Statement No. W7701001
Exhibits: Nil
Dated: 4 July 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF RT HON PENNY MORDAUNT MP

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023.

I, PENNY MORDAUNT, will say as follows: -

1. I am currently Lord President of the Council and Leader of the House of Commons but I have been asked questions by this inquiry relating to my time as Paymaster General between 13 February 2020 and 16 September 2021, when I was also the sponsoring Minister of the Infected Blood Inquiry. In that capacity, I wrote to the Chair of the inquiry on 21 May 2020 to reaffirm the government's commitment to the inquiry and my commitment to ensuring that the inquiry had all the resourcing required to complete its work as quickly as possible.

2. I recognised that this was one of the biggest treatment disasters of the NHS, involving a huge number of people having been affected by this, be it as an infected person or families of those infected ("the affected"). This was a cause that I fully supported (and still do) as did my predecessors and one which I thought would be better dealt with as quickly as possible, as further delays were likely to cause more injustice for those who had already suffered and were being denied justice.

3. It was also apparent from speaking to my predecessors and various campaign groups that we, as the government, needed to urgently address the disparity in financial support being offered across the four UK nations. It was thought that this should be considered to address the fairness in any awards and should be across the board, addressing the broader issues of both the infected and the affected. From my investigations it did appear that there was a severe disparity of assisting bereaved families, including partners who appeared to be severely disadvantaged. One of my main concerns was to bridge this gap and work together with campaigners, ministers and other government departments towards finding a fair solution so all the infected, bereaved families and partners would have equal access to justice and financial support.

4. From my investigations it was apparent that different parts of the UK were setting up and/or had set up different devolved schemes, all of which needed assessing and to become more uniform.

5. The Inquiry had already begun and financial support and payments were already being made to those infected and affected when I took on my role. Due to the disparity and the lack of access to funds for partners not married and the bereaved/those affected, many were suffering financial hardship as a result of this disaster and it was my strong belief that it would be sensible to address these issues and to work towards finding a compensation framework to assist all of those who have been infected and affected by this. I anticipated that the Chair of the Infected Blood Inquiry would make recommendations about the levels of financial support that should be offered. At that time, I believed it would be inevitable that the government would need to provide substantial compensation.

6. I was working alongside other government departments and ministers, and a number of actions had been agreed that included, reducing and resolving the disparities (and, if possible, eliminating the disparity in financial support,) to reach an agreement to award fair and reasonable financial support and/or a compensation framework across the board to assist with their financial struggles

and hardship. Any fair compensation scheme introduced would go a long way to alleviate their hardship.

7. It was also my opinion that there was likely to be an award of substantial damages to address the injustice suffered by all those infected and affected.

8. Having come to this conclusion I wrote to the then Chancellor of the Exchequer, the Rt Hon Rishi Sunak MP on 13 July 2020 **[WITN5665005]** setting out my thoughts that it was inevitable that the government would be likely to pay out substantial damages to all those affected, and that it was sensible to start preparing for this now. It was my opinion that if we started preparing for it and working out a compensation scheme, this would demonstrate that we, the government, recognised the seriousness of this disaster and the severe impact that this was having and had had on so many victims and their families, partners etc. and that we were taking active steps to progress matters. I wanted concurrent activity in this area. I did not want the Inquiry to conclude and then us to have to start another year or mores work on a scheme. I wanted to avoid every possible delay for those infected and affected.

9. I believed that experience of other Inquiries suggests that early action could provide victims with compensation as soon as possible and save the government significant legal costs. I believed that I had the best chance of getting both the Treasury and the Department of Health to grip the issues, if they saw them as part of a wider problem they had to solve, namely other liabilities they were carrying.

10. I did not receive a response to that letter. My letter ended by indicating that I would keep Mr Sunak and other interested ministers (copied) updated on progress.

11. I then wrote again to Mr Sunak on 21 September 2020 **[EIBS0000705]** and informed him that the people affected by this tragedy were now receiving ex-gratia financial support, and non-financial support through the Infected Blood Support Schemes of the four UK nations. The use of infected blood occurred

before the devolution of government across the UK and Ministers and previous Prime Ministers have committed to address the disparities of financial support across the UK.

12. My officials worked with the Department of Health across the four UK nations to provide some estimated costings for England, Scotland, Wales and Northern Ireland over 5 years. I re-iterated the Chair's comments about addressing the disparities between the schemes and alleviating hardship.

13. I had asked the Chancellor for his views as to how he thought that this may be funded and whether this could be added to the 2020 Comprehensive Spending Review. I do not recall receiving a response to that letter and searches conducted on my behalf have not revealed a response.

14. Following discussions with officials, I decided that it was sensible to seek independent advice, and a compensation framework study should be set up to provide independent advice to the government regarding the design of a workable and fair framework for compensation for individuals infected and affected by the Infected Blood scandal.

15. I appointed an independent reviewer to carry out a study, looking at options for a framework for compensation, and to report back with recommendations. The Terms of Reference ("ToR") in the study were finalised in consultations between the independent reviewer and those infected and affected. The terms of the study included consideration of the scope and levels of compensation, and the relationship between a compensation framework and the existing financial support schemes in place.

16. I announced the study in the Infected Blood: Victim Support debate on Thursday 25 March 2021 **[RLIT0001498]**. I wanted to provide reassurance to campaigners, so it was important that the announcement made it clear that the independent study was alongside, and not instead, of work towards addressing the UK-wide disparities, was designed to give advice and recommendations on potential solutions and that a final decision on compensation would not be taken

until the study had unpicked the complexities of the issue and after the Inquiry had concluded and delivered its recommendations and findings.

17. Sir Robert Francis KC was appointed to conduct the independent study. The ToR were agreed for the study to give independent advice to the Government regarding the design of a workable and fair framework for compensation for individuals infected and affected across the UK and to achieve parity between those eligible for compensation, regardless of where in the UK the relevant treatment occurred or places of residence.

18. While the study was to take into account the difference in current practice and/or law in the devolved nations, it was not asked to consider whether delivery of the framework should be managed centrally or individually by the devolved administrations.

19. The study was intended to focus on the plight of victims and to be aware of the need to demonstrate a duty of care to the infected and affected, whilst balancing that with the need to address the UK-wide disparities. The idea behind the study was designed to give advice and recommendations on the potential solutions and practicalities of the work involved, and with a view to setting up a compensation scheme which was a fair framework of compensation across the board.

20. It was crucial to understand the importance of separating the study from the Inquiry and avoiding duplication. There was a need to have the consent and support of the infected and affected communities. It was recognised that some campaign groups had opposing ideas and support for establishing a framework for compensation that was not universal among the campaigners. In order to secure their support, it was suggested that the ToR for the study should be agreed after consultation with the main infected and affected campaigners and charities. The ToR for the study were published on 23 September 2021.

21. I have been asked what my expectation was when commissioning the study, as to what the government would do once it received the study report. As is set out in the report, the study would be submitted to the government and the Inquiry

and it would set out recommendations together with advice on options for the government on a compensation framework design.

22. To uphold transparency the study was published, despite the risk that the government might decide not to follow some and/or all of the recommendations of the study.

23. On 25 May 2023, I confirmed in my reply to a question from Deirdre Brook MP in relation to the appalling scandal of the infected blood that I believed that we, as the government, should put right. I still agree that there is not just the original injustice, including to those who were children at the time, but the further layers of injustice that have happened with regards to their financial resilience, as many have lost their homes and were not able to work, facing appalling stigma and hardship that came with that. We have to put it right and I still firmly believe that.

24. I have been asked by the Inquiry if my position has changed in any way since I wrote my letter to the Chancellor on 13 July 2020. I still believe that this needs to be addressed in a reasonable, fair and just manner, without disparity between areas or parts of the four UK nations; all people infected and affected should be entitled to have access to the same financial support, compensation and in addition, to access to psychological assistance and help as part of the compensation scheme.

25. As I expressed very early on, when I first took the role as sponsor Minister for the Infected Blood Inquiry, it was my belief then and it is still my belief now that it is better to deal with this matter as soon as practically possible to alleviate the disparities between the financial support being offered to the infected and affected across the four UK nations and the quicker we address the wrongs that have occurred and provide proper, fair, uniform financial support to all those infected and affected the better.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 5th July 2023

Table of exhibits:

Date	Notes/ Description	Exhibit number

Witness Name: Jeremy Quin
Statement No.: WITN7526001
Exhibits: None
Dated: 21 November 2022

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF RT HON JEREMY QUIN MP

I provide this statement in response to a request under Rule 9(1) and (2) of the Inquiry Rules 2006 dated 25 October 2022.

I, Jeremy Quin, will say as follows: -

Section 1: Introduction

1. My name is Jeremy Mark Quin. My date of birth is GRO-C 1968. My address is C/O The Government Legal Department, 102 Petty France, Westminster, London SW1H 9GL. I completed my education reading history at the University of Oxford and then started my career in the financial sector, which continued until I was elected to Parliament in 2015. I served, on secondment, as senior corporate finance adviser to HM Treasury 2008-2009.

2. I first stood as an election candidate in the 1997 general election and was elected Member of Parliament for Horsham in May 2015. After serving a period as a Parliamentary Private Secretary, I was appointed to the Government and have held the following posts:

July 2018	Member of the Whips' office as Government Whip, subsequently as a Lord Commissioner and then Comptroller of HM Household
December 2019	Parliamentary Secretary in the Cabinet Office
February 2020	Minister of State at the Ministry of Defence
September 2022	Minister of State at the Home Office
25 October 2022	Paymaster General and Minister for the Cabinet Office

3. I confirm that I am not, nor have I ever been a member of any committees, associations, parties, societies or groups relevant to the Inquiry's Terms of Reference.

4. I can also confirm that I have never provided evidence to, nor been involved in, any other inquiries, investigations or criminal or civil litigation in relation to human immunodeficiency virus ("HIV") and/or hepatitis B virus ("HBV") and/or hepatitis C virus ("HCV") infections and/or variant Creutzfeldt-Jakob disease ("vCJD") in blood and/or blood products.

5. Whilst I have only recently been appointed to my current role, I shall endeavour to assist the inquiry as much as I can, recognising the sensitive subject matter and importance of it.

Section 2: The Francis report

6. I was appointed Minister for the Cabinet Office on 25 October 2022 and my Ministerial portfolio, including the role as the Sponsor Minister for the Infected Blood Inquiry, was confirmed thereafter. In this role, I am supported at Ministerial level by the Parliamentary Secretary for the Cabinet Office, Alex Burghart MP.

7. Upon my appointment I was provided with an oral briefing from the Cabinet Office Inquiries Sponsor Team, which I received on 27 October 2022. The briefing covered the background and work of the Inquiry so far, but also covered the issue of interim compensation payments which were being made that same

week. This included the background to the Government's acceptance of the Chair of the Inquiry's recommendation to pay interim compensation to infected and bereaved partner beneficiaries registered on the four national support schemes, and the work officials across Government and the devolved administrations of the UK had been doing to enable payments to be made by 28 October, which included ensuring that mechanisms were in place to ensure that the payments would be disregarded for tax and benefits purposes. The briefing also covered the wider recommendations of the *Compensation Framework Study* written by Sir Robert Francis KC.

8. Since the Government announced on 17 August that it was accepting Sir Brian's recommendations for interim compensation, officials in the Cabinet Office have been working with colleagues from HM Treasury, Department of Health and Social Care, Ministry of Justice, Department for Work and Pensions, Department for Levelling Up, Housing and Communities, HM Revenue & Customs and the Scottish, Welsh, and Northern Irish Departments of Health to ensure that arrangements were in place to enable the payments to be exempt of tax and disregarded for the purposes of benefits. On 30 September my then predecessor wrote to Ministerial colleagues seeking their agreement to the proposals which had been developed to enable the payments to be made by the end of October.

9. The consideration and decisions required to deliver interim compensation impact on many of the recommendations in the *Compensation Framework Study*, such as delivery, administration, oversight, scope, and statutory and/or legislative requirements - all of which were under active consideration by officials prior to the Inquiry's 29 July report, and remain so through a network of cross-government working groups.

10. Sir Robert's study was commissioned in May 2021 by the then Paymaster General, in order to, "*provide the Paymaster General with advice on potential compensation framework design and solutions which can be ready to implement upon the conclusion of the Inquiry, should the Inquiry's findings and recommendations require it*". Work continues across Government and with the

active participation of the Devolved Administrations, to consider Sir Robert's recommendations, his evidence to the Inquiry, and the views of infected and affected witnesses, so that Government can respond swiftly to any recommendations relating to compensation in the Inquiry's final report.

11. Sir Robert's recommendations for establishing medical and legal panels to consider compensation cases, and an arms-length body to administer a future compensation scheme needs to be considered alongside his other recommendations. The type and shape of the mechanism for administering any future scheme largely depends on the scope of the scheme itself, and so it is not possible to reach conclusions about the machinery for delivery, remotely from his other recommendations. Officials are giving the recommendations thorough consideration but at this stage no decisions have been taken on what a final scheme might look like, nor have options been presented to me at this stage. The Department is keen to develop solutions holistically, and this remains an area of ongoing policy development.

12. Cross Government work, coordinated by the Cabinet Office, will consider Sir Robert's *Compensation Framework Study* as part of its wider work in preparation for the Inquiry's final report. This work includes for example consideration of other national and international compensation schemes, their scope, and methods of administration, principles of eligibility scope and delivery; the work will also include preliminary cost estimates.

13. The interim compensation payments made in response to the Inquiry's interim recommendations are the start of a process, not the end of one. Government is committed to supporting the many people affected by the infected blood scandal. While the Government cannot pre-empt the Inquiry's findings, the preparatory work already underway will present options to allow the Government to respond more quickly to any recommendations related to compensation in the Inquiry's final report.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 22nd November 2022

List of questions provided to Jeremy Quin under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. Please describe the steps you have taken as Paymaster-General/Minister for the Cabinet Office to understand the impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.

2. Please describe, in as much detail as you are able to provide, the steps you have taken to satisfy yourself with the response of the Government to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation (in particular in the Second Interim Report of Sir Brian Langstaff). Please also answer the specific questions set out below.

3. In your witness statement dated 21 November 2022 [WITN7526001] you stated (paragraph 11) that at that stage "no decisions have been taken on what a final scheme might look like, nor have options been presented to me at this stage".
    a. Have options now been presented to you? If so, please indicate the broad nature of those options; if not, please explain why.
    b. Have decisions now been taken as to "what a final scheme might look like"? If so, please provide details; if not, please explain why.

4. On 5 December 2022 you wrote to the Chancellor of the Exchequer stating that work was under way to provide a full response to the Compensation

Framework Study "with the intention of completion by May 2023". Given the expectation in December that the work would be completed by May:

- Please confirm that the work is now complete and provide details of the outcome of that work.
- If the work is not complete, please explain why.

5. Your witness statement dated 21 November 2022 [WITN7526001] described colleagues in the Cabinet Office working with colleagues in other Departments on the interim compensation payments (paragraph 8). Your statement also described cross government work, coordinated by Cabinet Office, to consider the Compensation Framework Study (paragraph 12). Your statement to the House on 15 December 2022 described the convening of a cross-departmental group at permanent secretary level. Please confirm how many cross-government meetings have taken place at the level of permanent secretaries and/or ministers and the broad nature of each meeting since the Government first received the Compensation Framework Study.

6. Please explain what consideration has been given by you/the Cabinet Office to interim compensation for bereaved parents and bereaved children, about which you noted in your Oral Statement on 15 December 2022 the view of the Inquiry Chair that the moral case for their compensation was "beyond doubt".

7. Please confirm when the Government intends to provide a substantive response to the Second Interim Report.

Witness Name: Jeremy Quin
Statement No. WITN7526002
Exhibits: WITN7526003
Dated: 05 July 2023

INFECTED BLOOD INQUIRY

2ND WRITTEN STATEMENT OF RT HON JEREMY QUIN MP

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023.

I, Jeremy Quin, will say as follows: -

Section 1:

1. I have previously provided a witness statement to this inquiry in which I set out the nature of the introductory briefing I received from the Cabinet Office ("CO") Inquiries Sponsor Team (please see paragraph 7 of **WITN7526001**). I took up my current role on 25 October 2022. I have been asked what steps I have taken to understand the impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.

2. I have read the study produced by Sir Robert Francis and the interim reports issued by the Inquiry and am grateful to both for their assiduous interaction with the community in undertaking their work. On 30 November 2022 I met Dame Diana Johnson and Sir Peter Bottomley, the co-Chairs of the All-Party Parliamentary Group ("APPG") on haemophilia and contaminated blood. Dame Diana and Sir Peter described the frustrations felt by the infected and affected community, and the importance they placed on Sir Robert's recommendations.

3. I held a second meeting with Dame Diana and Sir Peter on 6 June 2023. I am also most grateful to them for chairing a meeting held in the Houses of Parliament on 7 March 2023, where I was able to meet and talk to more than 30 representatives from the infected and affected communities, and listen to their views on compensation, including about the anxiety and frustration they feel while the wait for final compensation continues. I have received over 90 letters from Members of Parliament writing on behalf of infected and affected constituents, and heard views expressed on behalf of their constituents in two statements I have made in the House of Commons (on 15 December 2022 and 19 April 2023) and in responding to a debate in the House on 22 June 2023. In addition, on 7 June 2023, I met virtually the Devolved Administrations (the Health Ministers of Scotland and Wales and the Permanent Secretary of the Department of Health of the Northern Ireland Executive). I hope that I can say that I have a deep understanding of the strength of feeling amongst the people directly affected by the tragedy, and the need to find a resolution for them as quickly as possible.

4. I have been asked more specifically about paragraph 11 of my first statement in which I confirmed that "*no decisions have been taken on what a final scheme might look like, nor have options been presented to me at this stage*". I can confirm that the ongoing cross-government work is looking in detail at the compensation scheme proposed in the Inquiry's second interim report and the study produced by Sir Robert Francis KC and other options.

5. Work is continuing and has not concluded. Some of the issues with which we are contending in finalising options for a government decision I set out in my response to the Parliamentary debate on 22 June. These include consideration of the best way to effectively deliver compensation across the UK, including whether primary legislation is necessary, and working through the estimated associatead costs for the public sector.

6. I wrote to the Chancellor of the Exchequer on 5 December 2022. That letter was written under cover of collective responsibility ahead of my update to the

House of Commons on 15 December 2022, and would not usually have been made public. I have been asked about that letter in which I confirmed that work was underway to provide a full response to the compensation framework study. I can confirm that work was being progressed with the intention of being able to respond as soon as possible after the publication of the Inquiry's final report, then expected from June 2023 or to make an earlier statement on progress in respect of Sir Robert's study if possible. I exhibit a copy of that letter at the inquiry's request [**WITN7526003**] noting that it is already in the public domain.

7. I can also confirm, as stated above and highlighted in the debate of 22 June 2023, that this work is not complete. There are a significant number of issues to resolve including those outlined in the debate and noted in paragraph 4 above.

8. Having enhanced my understanding of the issue in November 2022, I was keen to set a challenging internal deadline to complete consideration of the Sir Robert Francis study's recommendations by May 2023, as set out in my letter of 5 December 2022. That timetable had to be revised in recognition of the complex interconnections between the different recommendations and the need to agree a position across government that will understand the fiscal consequences and deliver a trusted and effective scheme. Official meetings were formulated at a senior level under the Chair of the then Second Permanent Secretary to the Cabinet Office. The first meeting of senior officials was held on 30 November 2022 and the second on 2 February 2023. After an initial focus on an update statement to Parliament, on 15 December 2022, I was keen to maintain momentum. In early January 2023 I asked for more frequent briefing from CO officials. It was also agreed that the Department for Health and Social Care ("DHSC") would establish a new team to undertake analysis of the cost and scale of implementing a scheme (as envisaged in my last witness statement). Recognising the benefits of officials' work being overseen through a coordinated approach at ministerial level, I sought the Chancellor of the Duchy of Lancaster's agreement to stand up a Small Ministerial Group ("SMG") bringing together the relevant departments at that level. The Group's terms of reference are to:

i. Prepare and oversee the execution of government action in relation to the Infected Blood tragedy;
ii. Build on work at official level by providing cross-government coordination on the response to Sir Robert Francis KC's report, the further interim report of the Inquiry related to compensation, and the delivery of compensation to victims of infected blood; and
iii. Coordinate the government response to the Inquiry report when received.

9. The SMG met for the first time on 22 February 2023, and has met four times since (with meetings on 8 March, 3 May, 23 May and 14 June 2023). Representation at the SMG usually includes, but is not limited, to His Majesty's Treasury and the Department of Health and Social Care. Following the establishment of the SMG, I also increased the CO resources focussed on the response to the Inquiry helping to support the wider government response. The Second Permanent Secretary resigned on 2 March and her role was replaced by the CO Permanent Secretary and the enhanced CO team. The SMG is supported by cross-Government meetings of senior officials where necessary. This group is held at Permanent Secretary level, and has met three times (on 2 March, 27 March and 26 April 2023). I also met Scottish and Welsh Health Ministers and the NI Department of Health Permanent Secretary on 12 June 2023 to discuss the second interim report[1].

10. Finally, I have been asked when the government intends to provide a substantive response to the second interim report. I have outlined above some of the ongoing work since the second interim report and the compensation framework study. CO is characteristically a convening department, that is to say that CO pulls together the relevant departments which are required to deliver a particular piece of work. I have no doubt that the final report from the inquiry will be of great assistance to the government in deciding its response to all aspects of the Infected Blood scandal, taking into account the many competing factors facing departments and in the wider context of public spending. The

[1] https://www.gov.uk/government/publications/joint-communique-on-the-infected-blood-inquiry

government is taking positive steps towards ensuring it is ready to respond once the inquiry's final report is received.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 3/7/2023

Table of exhibits:

Date	Notes/ Description	Exhibit number
05.12.2022	Letter from Rt Hon Jeremy Quin MP to Chancellor of the Exchequer	WITN7526003

Witness Name: Jeremy Quin

Statement No. WITN7526002

Exhibits: WITN7526003

Dated: 05 July 2023

INFECTED BLOOD INQUIRY

EXHIBIT WITN7526003

Jeremy Quin MP
Minister for the Cabinet Office and Paymaster General
Cabinet Office 70 Whitehall London
SW1A 2AS

Rt Hon Jeremy Hunt MP
Chancellor of the Exchequer
HM Treasury
1 Horse Guards Road
London SW1A 2HQ

5 December 2022

Dear Chancellor,

INFECTED BLOOD: WRITE ROUND TO AGREE ACCEPTANCE OF THREE RECOMMENDATIONS IN THE COMPENSATION FRAMEWORK STUDY BY SIR ROBERT FRANCIS KC

I am writing to the Home Affairs Committee to seek clearance to:

I. accept recommendations 1, 4 and 19 made by Sir Robert Francis KC in his Compensation Framework Study, published by Government on 7 June (see Annex A).
II. formally accept that there is a strong moral case for compensation, as articulated in Sir Robert's first recommendation, building on Government's acceptance of the case for interim compensation payments announced on 17 August.

I am seeking clearance ahead of an announcement outlining planned cross-Government work over the coming months in consideration of infected blood compensation on [15 December]. Responses are required by 5pm Monday 12 December 2022.

Background

The Infected Blood Inquiry is an independent public statutory inquiry established to examine the circumstances in which men, women and children treated by national Health Services in the United Kingdom were given infected blood and infected blood products, particularly since 1970.

The Compensation Framework Study by Sir Robert Francis KC was commissioned by the then Paymaster General, Penny Mordaunt MP (at the time the sponsor Minister for the Inquiry), to provide the Government with advice on potential compensation framework design and solutions which can be ready to implement upon the conclusion of the Inquiry, should the Inquiry's findings and recommendations require it. The study was published on 7 June 2023.

On 17 August, the Government accepted in full the recommendations made by Sir Brian Langstaff, Chair of the Infected Blood Inquiry, in his interim report published on 29 July, that:

(1) An interim payment should be paid, without delay, to all those infected and all bereaved partners currently registered on UK infected blood support schemes, and those who register between now and the inception of any future scheme;
(2) The amount should be no less than £100,000, as recommended by Sir Robert Francis QC.

The Government has already accepted the interim recommendation. This was agreed via:

- Private Office to Private Office agreements with the impacted departments - HMT, No10, DHSC and DWP- on 16 August 2022. ,. This was to accept the recommendation of the infected blood inquiry to pay interim compensation to victims of the infected blood scandal. Members of the then Domestic and Economic Implementation Committee were also sent a for information letter on 16 August 2022.
- A write round entitled 'Confirming The Mechanisms For Making Interim Compensation Payments To Victims Of Infected Blood' on 30 September 2022. This went to (previous version of) HAC and BEIS, FCDO, Mod, Scotland/NI/Wales Offices.

Government met its commitment to making the interim payments to certain beneficiaries by the end of October 2022. By committing to, and paying interim compensation to infected and bereaved partner beneficiaries, Government has implicitly accepted the strong moral case for compensation, but formally accepting this will send out an important and reassuring message to the victims of infected blood, as Government continues to work in consideration of Sir Robert's recommendations. It is my intention to announce this in an oral statement, updating Parliament on the work Government is doing in response to Sir Robert Francis's study on infected blood compensation so that we are ready to respond to the independent Inquiry when it reports next summer.

Sir Robert's study was commissioned in order to provide the Government with advice on potential compensation framework design and solutions, which can be ready to implement upon the conclusion of the Inquiry, should the Inquiry's findings and recommendations require it. We fully expect Sir Brian to build on his interim recommendations and make further such recommendations, and we must be ready to respond positively and swiftly to them. To that end, Cabinet Office officials will establish cross-Government working groups to take forward separate work strands related to the study. This work is being led and overseen by a group of Permanent Secretary level of relevant departments, chaired by Sue Gray, the Cabinet Office second Permanent Secretary, with the objective of completing its work by May 2023, to allow time for consideration/enactment of any legislation necessary, before the Inquiry publishes its final report.

Notwithstanding the payment of interim compensation, there is a very low level of trust of HMG among campaigners. I recently met the Co-Chairs of the APPG for Haemophilia and Contaminated Blood who vociferously made the point that on this issue, in their view, HMG tends to be very reactive. Having received the Francis Study in March (and through a WMS having initially indicated that a full response would be issued by July), the Government will be criticised for not having made more progress or provided a full response. A full response is not possible before cross-Government work in consideration of Sir Robert's detailed recommendations is complete, and this will take some time – work is underway with the intention of completion by May 2023, ahead of publication of the Infected Blood Inquiry's final report, expected in July 2023. However, I still think it is important to provide reassurance via an oral statement, reference progress made and the Government's determination to be well prepared for the publication of the Langstaff Report, expected in

mid-2023. The obverse is also true - a failure to make a statement will increase mistrust and may even foster the erroneous view that HMG is not intending to respond appropriately to Sir Brian Langstaff"s recommendations.

It is therefore my intention to update Parliament as this work progresses, providing as much detail as I can on specific areas of work, including, where possible, formal acceptance of other recommendations, as workstrands are completed, seeking collective agreement where necessary. I will of course keep colleagues updated as this work progresses.

I would like to be as forward leaning as possible when I announce our acceptance of the moral case for compensation. Many of Sir Robert's 19 recommendations require the careful cross government consideration, which is already underway. In my view though, there are two recommendations, recommendation 4 and recommendation 19, that come with no cost, would show our determination to progress this work, and could be accepted alongside recommendation 1.

Recommendation 1 states that:

"The Government accepts that there is a strong moral case for a publicly funded scheme to compensate both infected and affected victims of infected blood and blood products infected with HCV or HIV, and that infections eligible for compensation be reviewed in the light of developing knowledge."

Recommendation 4 recommends that:

"*the scheme should, so far as possible, avoid legalistic and adversarial concepts of the burden and standard of proof: establishing eligibility under the scheme should be either:*

a) *automatic in the case of infected persons already accepted for eligibility under the support schemes; or*
b) *a collaborative process in which:*
    - *the applicant is sympathetically supported by the scheme in obtaining any required information and documentation;*
    - *in general a presumption is applied that statements of fact made by an applicant are correct;*
    - *applicants are not required to repeat information already provided to the support scheme*
    - *eligibility is accepted if the information available points towards eligibility and there is no strongly persuasive evidence which contraindicates eligibility*"

Recommendation 19 recommends that:

"The proposals within the report should be reviewed by the Government in the light of the recommendations and findings of the Inquiry, and periodically thereafter, and reported on to Parliament". The first clause essentially simply recapitulates the purpose for which the study was commissioned, and the second and third clauses add entirely sensible Parliamentary oversight.

Timing

I attach the full list of Sir Robert's recommendations at Annex A. I would welcome colleagues' agreement to proceed on the basis outlined and to make an oral statement in

Parliament before Christmas recess accepting recommendations 1, 4 and 19 **by 5pm Monday 12 December**. This is in addition to recommendation 14, which has been accepted and acted upon.

I am copying this letter to members of the Home Affairs Committee, Cabinet Secretary and Sue Gray.

Yours sincerely,

GRO-C

RT HON JEREMY QUIN MP
MINISTER FOR THE CABINET OFFICE AND PAYMASTER GENERAL

List of questions provided to Rishi Sunak under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. What consideration did you give as Chancellor of the Exchequer to the question of compensation for people infected and affected by the use of infected blood and blood products?

2. When did you first give consideration as Prime Minister to the question of compensation for people infected and affected by the use of infected blood and blood products?

3. Please describe the steps you have taken as Prime Minister or earlier to understand the impact of waiting for recognition of individual losses on people infected and affected by the use of infected blood and blood products.

4. Please describe, in as much detail as you are able to provide, the steps you have taken to satisfy yourself with the response of your Government to the Compensation Framework Study by Sir Robert Francis and the Inquiry's recommendations about compensation (in particular in the Second Interim Report of Sir Brian Langstaff).

5. Please confirm when your Government intends to provide a substantive response to the Second Interim Report.

Witness Name: Rishi Sunak
Statement No.: WITN7712001
Exhibits: None
Dated: 4th July 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF THE RIGHT HON RISHI SUNAK MP, PRIME MINISTER

I provide this statement in response to a request under Rule 9(1) and (2) of the Inquiry Rules 2006 dated 5 June 2023.

I, Rishi Sunak, will say as follows: -

1. Whilst I have held various roles with government, I have been asked questions relating to my time as Chancellor of the Exchequer ("CX") and as Prime Minister ("PM"). I was CX from 13 February 2020 until 05 July 2022. I became PM on 25 October 2022.

2. I have prepared this witness statement with support from the Government Legal Department. Cabinet Office and His Majesty's Treasury ("HMT") colleagues have assisted in providing relevant documents to me, where such documents exist.

3. I cannot recall giving consideration to the question of compensation for people infected and affected by the use of infected blood and blood products during my time as CX, nor have I been provided with any documents which suggest that such consideration was given. I have been made aware of documents

WITN5665005 and **EIBS0000705** which are letters dated 13 July 2020 and 21 September 2020 from the Rt Hon Penny Mordaunt MP in her role as Paymaster General. It is unclear as to whether I saw either of these letters. It is not uncommon for correspondence addressed to ministers to be reviewed/filtered by their staff and it is my understanding that the first letter from Penny Mordaunt was reviewed by my staff and considered to be 'for information' rather than something which required a response from me. I understand that a holding response was sent in response to the second letter and I do not know if anything else happened thereafter.

4. I have been asked when I first gave consideration as PM to the question of compensation. I cannot recall exactly when I first considered this, but as PM I receive regular updates on various ongoing matters across government and I understand that work is underway across government and is being conducted by the Rt Hon Jeremy Quin MP, Minister for the Cabinet Office ("MCO") and Paymaster General, which includes chairing a Small Ministerial Group ("SMG") with HMT and the Department for Health and Social Care ("DHSC") colleagues. I understand that the SMG was set up to consider the compensation framework study of Sir Robert Francis KC and the second interim report of the Chair to this inquiry. The MCO would be able to provide further information in respect of the SMG and its work but I can say that the government is committed in responding to this inquiry's final report when it is published and I understand that work is underway across government to ensure that a substantial response on a full compensation scheme can be included. I am aware of the complexities of preparing an adequate compensation scheme, including the likely need for primary legislation. As is the usual process for managing policy decisions, this work is being led by other Ministers and I will be sighted in relation to the scope of the scheme and intended response at the appropriate stage when they have a formal set of recommendations to make based on their expertise.

5. I can only imagine the impact of waiting for recognition of individual losses on those infected and affected by the use of infected blood and blood products. As other PM's have said it is a tragedy which should not have happened and we must right the wrong. The interim payments were made as quickly as possible

and my government is taking every step to prepare to respond appropriately to the inquiry's final report.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 4/2/23

List of questions provided to Nadhim Zahawi under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023

1. Please describe your role as Chancellor of the Exchequer in relation to the Government's decision-making in response to the First Interim Report of the Infected Blood Inquiry, the announcement on 17 August 2022 that interim compensation payments would be made and the arrangements for the payments to be made.

2. Please describe your role as Chancellor of the Duchy of Lancaster in relation to the arrangements for the interim compensation payments to be made.

Witness Name: Rt Hon Nadhim Zahawi
Statement No.: WITN7715001
Exhibits: nil
Dated: 4th July 2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF Rt Hon Nadhim Zahawi

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 5 June 2023.

I, Nadhim Zahawi, will say as follows: -

Section 1: Introduction

1. I was Chancellor of the Exchequer between 5 July 2022 and 6 September 2022 and Chancellor of the Duchy of Lancaster between 6 September 2022 and 25 October 2022. I make this statement pursuant to a 'Rule 9' Request from the Inquiry dated 5 June 2023, which has asked me questions regarding my involvement in the Inquiry in my capacity as a previous Chancellor of the Exchequer and Chancellor of the Duchy of Lancaster.

2. I know from my own discussions with constituents who are victims of the infected blood scandal just how traumatic their heart-breaking experiences have been, and I was proud to campaign as an MP on their behalf and continue that work as a government minister.

3. No level of compensation will ever make up for the appalling treatment and circumstances that those affected by this scandal and their families have had to endure, as I said previously in a press statement on 22 October 2022, I but I hope the interim payments we made when I was in office began to offer some recompense.

Section 2

4. **I have been asked to describe my role as Chancellor of the Exchequer in relation to the Government's decision-making in response to the First Interim Report of the Infected Blood Inquiry, the announcement on 17 August 2022 that interim compensation payments would be made and the arrangements for the payments to be made.**

5. On 8 August 2022 I received advice from my officials informing me that Cabinet Office and DHSC had requested HMT's approval to make an announcement in response to the Infected Blood Inquiry's interim recommendations. This advice was also provided to the Chief Secretary of the Treasury. The scope of this advice included the funding of interim payments, devolution implications and the tax treatment of interim payments. The issues contained in this advice were still live and were actively being considered by my officials.

6. On 12 August 2022 I received further advice from my officials on outstanding issues relating to the announcement including the treatment of benefits, treatment of tax and contingent liability.

7. On 16 August 2022 I received further advice recommending final approval for the announcement with which I agreed.

8. On 16 August 2022 I approved the announcement from Cabinet Office and DHSC that confirmed the Government's acceptance of the Infected Blood Inquiry's recommendations, namely, an intention to make payments of £100,000 by the end of October 2022 to infected people and bereaved partners currently registered on the support scheme; an intention to exempt these payments from tax and benefits and an intention to make new funding available for these processes, including to the Devolved Administrations.

9. **I have been asked to describe my role as Chancellor of the Duchy of Lancaster in relation to the arrangements for the interim compensation payments to be made.**

10. On 22 October 2022, I made a joint press statement with Cabinet Office, DHSC and Will Quince MP in my capacity as the Chancellor of the Duchy of Lancaster.

11. The statement confirmed that infected individuals and bereaved partners who were registered with any of the four UK infected blood support schemes would receive letters confirming a £100,000 interim compensation payment along with details of how the money would be paid. The statement further confirmed that payments would not be subject to any tax or national insurance deductions, nor would they affect any financial benefits support an individual was receiving.

12. The statement further highlighted that interim compensation payments were expected to reach £400 million for the whole UK, with agreement also reached for payments to be made through schemes in Scotland, Wales and Northern Ireland as well as those in England.

Statement of Truth

I believe that the facts stated in this witness statement are true.

Signed GRO-C

Dated 4th July 2023