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By email: rich.newton@GRO-C

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Dear Richard, Ronan, Owen, Conan, Andy, Lynne, and Nigel,

Thank you for your letters of 20 May addressed to me and the Prime Minister, regarding the Government's response to the Infected Blood Inquiry. I am writing to you all in one response to both letters, and on behalf of the Prime Minister, to ensure that you all receive the same information, and can share it with your respective memberships.

First of all, I would like to acknowledge the feelings of many in the community that the progress made in the last year is not enough. As the Minister responsible, I will continue to work to ensure that those who have suffered as a result of this scandal receive not just compensation, but the full recognition deserved.

Through the powerful evidence given at the Inquiry's hearings, including from some of you, I have heard and understood the feeling of unhappiness with the Scheme as it stands. I would not want to anticipate the Inquiry's further recommendations, nor the Government's response to these in this letter. However, as I said in my oral evidence, I am committed to reviewing some areas of the Scheme, and I will look to work with the community as much as possible when doing so.

I am aware that over recent months, you will have received a number of communications about the 2025 Regulations from me and my officials, either through correspondence, or following engagement sessions. In this letter I have therefore provided some further detailed information on particular areas where I hope it will be helpful to you, which should be read alongside previous communications. Where you have raised an issue I have already committed to reviewing, I have noted that.

Criminal investigations

On establishing a criminal investigation, such matters are operational decisions for police forces to make based on their consideration of available evidence and viable lines of enquiry. The Government or the Infected Blood Inquiry do not have any role in such decision-making. I have been clear to Parliament that I stand ready to provide whatever evidence might be requested of the Cabinet Office and across Government to support any such investigation.

Given the nationwide scope of the Independent Blood Inquiry and in the absence of a clear lead police force, the National Police Chiefs' Council (NPCC) has engaged experienced senior investigators to conduct a review of available evidence. They have been assessing the extensive information provided by the Inquiry, who have been supporting the investigation fully; and legal advice, to aid in determining subsequent next steps.

Pharmaceutical companies

The Government understands that many in the community are concerned that legal action against pharmaceutical companies has not been pursued. The Government firmly believes that access to redress is fundamental in upholding justice and fairness in our society. People must have avenues to seek recourse when they have been wronged or harmed. We hope the Infected Blood Compensation Scheme provides some closure to those who have been wronged under some of those most devastating circumstances.

Consultation

I have heard from the community that a consultation on the Scheme would be the preferred way to move forward. I am keen to engage with key representatives of the community to understand further what can be done to alleviate the concerns expressed by you and others regarding the Government's delivery of compensation. We are awaiting the Inquiry's further report, and as I said in my oral evidence, my test for making substantial changes to the Scheme is that I would not want to cause further delay to the delivery of the Scheme to those who have been waiting years to receive recognition and compensation.

Tailored Supplementary Route

In my oral evidence, I committed to looking at the possibility of including a supplementary route for affected people. The outline set out in the letter addressed to me from Tainted Blood Siblings and Children is incredibly valuable and something I will keep in mind as I consider this option further. It is useful to see what the community envisages for this potential supplementary route.

Allowing legal representatives to submit claims on behalf of clients

As this concerns the delivery of the Scheme, this is a matter for IBCA.

As you will know, IBCA offers independent legal support for the first people making their claims. This free support only applies to an applicant's compensation claim, not to things that might come after someone's claim, like inheritance tax or probate.

IBCA is working with a group of approved legal companies that have previous experience of supporting the infected blood community and fully understand the compensation scheme's regulations:

- Collins Solicitors
- Leigh Day
- Milners Solicitors
- Thompsons Solicitors Scotland
- Watkins and Gunn

The support covers a number of things, including:

- help to confirm the information used to calculate your compensation is correct;
- advice on whether your compensation offer has been calculated correctly and whether you should ask IBCA to review the decision;
- support with an internal review, if an applicant requests one;
- offer to share information on an applicant's behalf, if IBCA asks for it.

Additional compensation where someone has died as a result of their infection

The Scheme recognises someone's death through the Injury award. Injury awards are higher where the severity of a person's infection means that the infection has caused or is expected to cause an early death in the future (i.e. HIV, Hepatitis B/C cirrhosis, Hepatitis B/C decompensated cirrhosis or liver cancer). This is to enable affected people to receive an award which acknowledges instances where the infection is likely to have led or will lead to an early death of an infected loved one.

Affected estates

The Government's position is that the estates of affected people cannot claim compensation on their behalf, unless the affected person sadly passes away already having accepted their offer from IBCA. This position was derived from Sir Brian Langstaff's recommendation that the estates of affected people should not be eligible to claim compensation on their behalf.

I understand that there are concerns about this, and that these arise in tandem with concerns about the speed of delivery. The 2029 date is not a target for when the bulk of affected payments should be made, but rather a backstop, as I would not want to close the Scheme before every person deserving of compensation has identified themselves and come forward to claim. As I said in my oral evidence to the Inquiry, I am open to considering this issue and a number of areas of the Scheme where doing so does not cause undue delay to the delivery of compensation.

Parity of tariffs across bereaved categories

I have heard the concerns regarding the tariffs for bereaved parents, siblings, and children, particularly in comparison to those for bereaved partners. Bereaved partners receive a higher amount of compensation to reflect their financial dependency on their partner.

It is absolutely right that the suffering of any parent of an infected person is recognised by the Compensation Scheme, regardless of whether that person was infected as a child or an adult. The proposal to pay higher compensation to parents of a child infected while under the age of 18 is based on the recommendation made by Sir Robert Francis' Compensation Framework Study and recognises the unique and heightened impact on parents in such circumstances.

Payments to those infected people registered with IBSS/AHOs

All of those paid so far by ICBA are IBSS-registered living infected people. However, further information is needed for a claim in many cases and it is vital that IBCA have the right information where needed. The Victims and Prisoners Act 2024 empowers IBCA to work with organisations to access this information to ensure claims are dealt with as swiftly as possible.

Going forward, IBCA is aiming to contact an average of 100 people to begin their claim every week. At that rate, they expect to have brought in to claim all those infected people who are registered with a support scheme this calendar year.

Financial loss award

Where an infected person has tragically passed away before they have applied to IBCA, the estate will be able to make a claim on the infected person's behalf. In that claim, financial loss from point of infection to point of death will be paid to the estate. Financial loss from the point of death to the estimated healthy life expectancy age of the deceased is paid to the affected dependents (bereaved partners and children who were under 18 at the time of death) registered with the Scheme.

This ensures the financial loss of an infected person for their full health life expectancy is recognised.

Support and arbitration for estate claims

In the case of a deceased person, compensation will be paid to the executor of a deceased person's estate, who will then be obligated to distribute compensation in accordance with their will.

If a deceased person does not have a will then statutory rules set out who should inherit. It is not for the Government to intervene with the wishes of the deceased person.

As I said at the start of this letter, I do not wish to pre-empt the Inquiry's recommendations nor the Government's response, but as always, I am grateful for these considered and thoughtful letters, and for the opportunity to understand further the granular detail of the changes the community would like to see made to the Scheme.

I would like to thank you for taking the time to write to me on these matters, and for your continued collaboration and approach to working with the Cabinet Office and myself. It is greatly appreciated and valued. As the Minister responsible, I am committed to doing all I can to deliver a Scheme that comprehensively recognises the harm done to people, and doing so as swiftly as possible, in order to bring some closure to the decades long fight for justice.

Yours sincerely,

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**RT HON NICK THOMAS-SYMONDS MP
MINISTER FOR THE CABINET OFFICE
HIS MAJESTY'S PAYMASTER GENERAL**