Witness Name: Yvonne Staton

Statement No.: WITN0051001

Exhibits: WITN0051002

Dated: 31 August 2018

INFECTED BLOOD INQUIRY

FIRST WRITTEN STATEMENT OF YVONNE STATON

I, Yvonne Staton, will say as follows: -

1. I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 30 August 2018. I adopt the paragraph numbering in the Rule 9 request for ease of reference

1.1. My name is Yvonne Staton. My date of birth and home address is currently known to the Inquiry. I am a retired Blood Donor Carer Supervisor. I intend to speak about my role in this capacity from the early 1970's through to my retirement in 2015.

2. In 1971 I started working for the Yorkshire Regional Health Authority within the Leeds Regional Transfusion Centre located in Bridal Path, Leeds. I worked there as a Donor Attendant which was in effect a nursing auxiliary role. I left in 1972 but went back to work for the same center in 1976 and stayed until I retired in 2015.

2.1. My role throughout this time was always to take blood from volunteer donors. Over time the process for obtaining donor blood changed but the role was always the same. In about 2000 my role was re classified as a Donor Carer and then a Donor Carer Supervisor.

2.2. When I started, the Medical Director of the Centre was a Dr Derrick Tovey who retired sometime in the 1980's. I think he died around 2015. Dr Angela Robinson took over the role until she retired around 2008. I think she is still alive. Her Deputy took over as Medical Director who is

called Dr Peter Flannigan. He went on to run a blood Centre in New Zealand or Australia.

2.3. In the early days local GP's and other doctors would be employed to physically insert the needles as the Centre didn't have its own dedicated doctors. This later became the job of the nurse in charge and by the time I retired I had been responsible for some time to undertake the whole process, in effect like a phlebotomist.

2.4. Before the taking of blood was centralised to the National Blood Authority we would take blood and it was processed in our own laboratory in Leeds. The doctor would insert the needle and then we would measure out the required amount of whole blood into a glass bottle. Originally this was 420mils which later became 450mils. The bottle would be sealed with a wax seal, turned upside down and then every evening the blood was passed to the Leeds laboratory.

2.5. In the 1980's nurses were introduced to insert the needles and by that time we were using plastic containers to collect the blood which are still used today.

2.6. Back in the 1970's the only screening of potential donors was to establish if they had a cough or cold. It was very vague, but we did ask if they had visited any tropical areas, that was due to Malaria. Later the screening became more in depth and was more apparent after the issues with HIV became known. Then the questions were much more in depth. Certainly by the time I retired it was very intrusive. At one point we wouldn't take blood from practicing male homosexuals or people who had been sexually active in certain countries.

2.7. I occasionally worked at a separate centre where we used a different system where whole blood was taken, spun to extract the plasma and then the red cells were given back to the donor. This allowed the donors to be able to give blood more regularly. The process was called Apheresis. That centre was in Rawson Road, Bradford. Dr Robinson pioneered this process.

2.8. I would like to emphasis, in the early days the Centre was quite a primitive and dangerous place to work. From the lack of equipment through training and polices it was all very poor. Around the time the National Blood Authority took over from the Regional Authority was when things stated to improve.

3. I have been asked to explain how I came to be issued with my medical contact card. It was sometime in the late 1970's that I was issued my card which I exhibit as WITN0051002, by the then nurse in charge. This was before the logo changed which should be able to date the card. No explanation was given we were just told to carry it.

3.1. The wording on the back of the card although quite scary, was there in case of my needing emergency medical treatment. The wording stated '*The person named overleaf may be at risk from pathogenic substances contained in blood. In an emergency or unexplained illness this should be considered. If necessary contact the medical director at the Regional Transfusion Centre, Leeds'.*

3.2. To put things into perspective until we were taken over by the National Blood Authority, we had very little education around the dangers associated with taking blood. I was regularly covered in donor blood as the process was a bit basic and it was easy for blood to be spilt. The visiting doctors were quite blasé. They weren't careful and some thought nothing of throwing used local anesthetic needles at us at they thought it funny. We knew no better so didn't really worry. We didn't even have 'Sharps Bins'. We had to recap needles and place them in a plastic bag. They weren't reused but I don't know what happened to them.

3.3. Once the card was issued was started to think more about being contaminated by the blood but we still didn't get told what the issues could be. However, by then we did know about Hepatitis A and B, HAV and HBV. The nurse in charge came back to us about two weeks after being told to carry the card asking for its return stating it had been issued in error. She didn't explain any further as to what the error could have been.

3.4. However, some members of staff decided to keep theirs. I remember one stating she was keeping hers as later insurance and they were constantly being covered in blood. I think we were starting to recognise the dangers and just as we identified them the management removed the protection. I threw mine in a drawer and forgot about it. Nobody chased me to return it and it got forgotten until I heard about the Inquiry and then found it.

4. As part of my role with the Transfusion Centre I would regularly attend local prisons and youth borstals to take blood from prisoners. This was all pre the issues being identified with HIV. I have personally attended Hull, Wakefield Prisons along with several local Youth Borstals / Open Prisons. I can remember one of the Borstals was called Thorp Arch near Weathersby in Yorkshire, another I think was Everthorpe. The Borstals prisoners must have been over 18 years old as we were not allowed to take blood from anybody younger. It was an issue of consent.

4.1. Dr Tovey, who was the Director at this time instructed us to attend the prisons and take the blood from prisoners, as it was their, in his terms, 'Human Rights' to give blood if they wished.

4.2. We would go to the prisons every six months and set up the facilities to take donor blood. The prisoners loved to come and see us to give

blood. I think part of it was talking with ladies who would listen to how they were innocent of all crimes but also they were given tea and biscuits. We had to hide anything sharp and watch them closely as equipment would often go missing along with packs of tea and biscuits.

4.3. Prisoners often came to us in groups to give blood accompanied by a guard. Sometime they came alone if they were a 'Trustee' or considered safe or alone with a guard, if one of the classified sex offenders. However, everybody was welcome to give blood and no screening was undertaken regarding the donor other than the basics and it certainly wasn't documented as it is now.

4.4. Once HIV became an issue members of the team started to refuse to attend the prisons as we no longer felt safe. This would have been around 1983 or 1984. It took quite a fight including going over the head of the Director before they agreed that we would stop taking blood from prisoners. However, we continued to attend Borstals for at least a year after stopping attending Prisons. We were told the lads in the Borstals didn't pose the same risk. We disagreed and eventually the whole process stopped.

Statement of Truth

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

Signed GRO-C

Dated 04/09/2018