

Friday, 5 March 2021

(10.00 am)

ROGER EVANS, continued

Questions by MS RICHARDS

SIR BRIAN LANGSTAFF: Good morning, Mr Evans.

A. Morning, Sir Brian.

SIR BRIAN LANGSTAFF: You are where you were yesterday, I take it?

A. Yes, I have moved in the meantime but I'm back.

SIR BRIAN LANGSTAFF: I would hope so. You're in the same lack of company?

A. Yes, absolutely. I've spoken to nobody about the Inquiry since yesterday.

SIR BRIAN LANGSTAFF: You are speaking to exactly the same group of people as were in this room yesterday and I imagine that there will be around 200 or so people who are watching remotely as we speak. So it's very much as it was yesterday.

Now, just before we finished, I was looking for a document to ask you about. Soumik, do we have that document and can we put that up on the screen.

Now --

MS RICHARDS: Just go a bit further down the page, Soumik.

SIR BRIAN LANGSTAFF: What I want to ask you about is the last large paragraph. It's the one which begins:

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certainly endeavoured to -- as I said to Ms Richards yesterday, for the staff to make it very clear to beneficiaries why they had been -- if they had not been allocated money the reason for that and if they were, unless it was very -- unless it was straightforward to explain any nuances which there were.

I think we also talked a little yesterday about some disgruntlement amongst beneficiaries, which I think was justified. I think it came up at a Partnership Group meeting that there had been delays and communications had become less good between the office staff and the beneficiaries. Whether Ailsa Wight is referring to that, that's all I can postulate really.

SIR BRIAN LANGSTAFF: The delay doesn't seem to be what she's referring to. She seems to be having the idea that it's the approach on the basis. So somehow, from somewhere, she has got the view that the Board is not or the charity is not at the moment assessing charitable need in a consistent and transparent way.

Now, do you have any knowledge of where that view might have come from?

A. Well, there was some significant dissatisfaction between about 2012 and 2014 of the decision-making

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"This, together with the changing policy on reserves ..."

The second sentence reads:

"This means that there is a requirement to clearly define the basis on which the Board assesses the charitable need of its beneficiaries in a consistent and transparent way, and payments adjusted accordingly."

This suggests that she had a view that the Board wasn't doing that. Would you like to comment?

A. Well, I will do my best. I don't recall that as an issue of conversation but it appears to be so. I cannot think of the situation, certainly whilst I was chair, that we weren't endeavouring to be, I quote, "consistent and transparent". Of course, there were always situations where some beneficiaries might feel that they were not being treated as well as colleagues, particularly when they were asking for money from the NSSC. Whether it refers to that I wouldn't be sure. But it could do.

Certainly I cannot think, in my time and certainly before that when Christopher Fitzgerald was the chair, that there were any latent situations where we weren't doing both those things.

As far as transparency is concerned, we

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approaches of the NSSC, and I was not aware of this at first because, as chair, as we alluded to yesterday, I did not attend the NSSC meetings when they were making decisions on funding and it wasn't apparent what I've just said when they reported to the Board.

This was picked up when there was, as I said just now, Sir Brian, some dissatisfaction amongst some of the beneficiaries. As far as major payments which were being made, the regular payments was a very clear, consistent system, as far as I recall. This would presumably have related to what decisions were being made at the NSSC and I imagine the Department, either we made them aware of it or they discovered -- or they heard about it from somewhere else. I'm being a bit general but I don't think I can be more specific unfortunately.

SIR BRIAN LANGSTAFF: Do I understand from what you are saying that this particular sentence, in this particular paragraph, didn't suddenly alert you to a possible problem which you needed to ask the chief executive to address?

A. I cannot remember the sequence of events but, once we became aware that there was this dissatisfaction with the way the NSSC was operating, we changed the NSSC membership and established the Grants Committee, which

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1 is referred to elsewhere. So once we knew there was
 2 an issue we took action on it, the chief executive and
 3 myself.
 4 **SIR BRIAN LANGSTAFF:** The final point on this. I haven't
 5 seen and I don't know if there is any response to this
 6 particular point in this letter by email. Do I take
 7 it that you didn't write back and say "No, you've got
 8 it wrong, we do actually define the basis clearly and
 9 transparently" or, for, that matter, you might have
 10 responded saying "We're going to look at that and
 11 review our procedures"?
 12 **A.** I can't recall whether we did that or not. It may
 13 well be that we fed that back informally to the
 14 department in discussions or meetings but I'm
 15 postulating when I say that. I think my particular
 16 concern was to get it right for the beneficiaries and
 17 for them to be more satisfied with the way we were
 18 dealing with their applications.
 19 **SIR BRIAN LANGSTAFF:** Yes, thank you very much.
 20 **MS RICHARDS:** Mr Evans, before I ask you some further
 21 questions about the Trust's decision-making process in
 22 relation to grants and means testing, can I just
 23 return to an issue from yesterday which is the status
 24 of the Trust's reserves as a matter of fact.
 25 Could we look at MACF0000026_086, please.

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1 July discussion. The Board has obviously considered
 2 now a report about investment strategy and it says:
 3 "... they had discussed the option of moving
 4 the funds that MFT knew it would need to draw down
 5 over the next two and a half years into a lower risk
 6 portfolio, whilst retaining the remainder ... in the
 7 existing portfolio."
 8 Then it refers to, the very bottom of the page:
 9 "However, because of [top of the next page]
 10 frequency with which the funds would need to be drawn
 11 down -- approximately quarterly, and the fact that
 12 this would need to be done over a relatively short
 13 time-frame of two and a half years -- Robert advised
 14 that the fund manager fees would more than offset any
 15 interest obtained."
 16 Then there's further discussion about what's
 17 going to be done with the investment, and then cash
 18 proceeds to be held in a notice account with Lloyds
 19 Bank, and so on. Discussion of whether to have some
 20 gilts and bonds, or corporate bonds or the like, and
 21 then there's approval of a new investment policy.
 22 In light of that, would you accept that the
 23 reserves were under the Trust's control and being
 24 managed in accordance with an investment policy,
 25 rather than having to be requested from the Department

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1 These are the minutes of a board meeting,
 2 28 July 2014, and if we go to the bottom of the second
 3 page, under the heading "Investments", you'll see
 4 there the minutes record the attendance of
 5 a Mr Merrifield from Sanlam Private Investments to
 6 discuss the Trust's investment portfolio, and
 7 reference is made to that having been requested in
 8 light of the plan to reduce the level of reserves.
 9 There's then a discussion about the composition of the
 10 investment portfolio, the equities and bonds held by
 11 the Trust, in the context of the reserves, and then
 12 there is a discussion about wanting a less high-risk
 13 investment policy, if I can put it that way, because
 14 of the possible need to call on the reserves.
 15 Then we can see the top of the next page says:
 16 "The proposed general fund of £750,000 to
 17 £1 million could, however, be retained in the existing
 18 portfolio."
 19 So that's a reference, as I understand it, to
 20 the ambition to reduce the reserves to a figure along
 21 those lines. Then if we just go to the following
 22 Board meeting, MACF0000022_003, you will see these are
 23 the minutes of a board meeting 27 October 2014.
 24 Again, if we go to the bottom of page 2, you'll see,
 25 under the heading of "Investments", reference to the

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1 of Health?
 2 **A.** Yes, I would. I was going to clear this up with you
 3 anyway because I was wrong yesterday. I must have had
 4 a mental aberration but, looking at papers afterwards
 5 and reflecting, it was obvious any funds invested
 6 through investment companies, et cetera, must be funds
 7 we had. So yes, I misled you on that. My apologies
 8 for that.
 9 **Q.** Thank you.
 10 I've just been asked to give the reference, for
 11 the transcript, to the document that you were asking
 12 about, Sir Brian. The problem with that is I don't
 13 have the reference to the transcript, but if the
 14 transcribers want to pick it up, you gave the correct
 15 reference, sir, at the end of yesterday evening. We
 16 were just look looking at the wrong page at that time.
 17 **SIR BRIAN LANGSTAFF:** Yes, it was MACF0000024_146.
 18 **MS RICHARDS:** Thank you.
 19 **SIR BRIAN LANGSTAFF:** I think it is at page 6 of that.
 20 **MS RICHARDS:** Thank you. We don't need to put it back on
 21 screen but we now have the reference on the
 22 transcript.
 23 Mr Evans, I want then to return to the issue
 24 about the Trust's decision-making process,
 25 particularly in relation to grants. I'd asked you

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yesterday about exceptional circumstances and what appears from the documents and the evidence that the Inquiry has considered so far is that from around 2010 or 2011 to around the middle of 2014, the criterion being applied by the NSSC was the exceptional circumstances criterion, and we looked at a document, for example, from September 2013 when that was being discussed yesterday.

Does that accord roughly with your recollection?

A. Yes, it would and it's not unrelated to what I said to Sir Brian just now.

Q. Now, I think you said yesterday that the exceptional circumstances test had been formulated by the NSSC without reference to the Board. Did that concern you when it came to your attention?

A. Well, yes, it did, yes -- very much so -- and that is when we, as part of the other issues which I was talking about just now, once it became clear that the NSSC was not working properly, we took action to change it, including changing the membership.

Q. Now, again yesterday we looked at the minutes from January 2013 -- that's the Mishcon letter meeting -- but also, you will recall, and I think you have referred to it this morning, that's the meeting at

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versions of the office guidelines at various earlier dates but I don't want to go through all of them.

If we go to the third page, please, Soumik, you'll see it sets out there, and this is in the first paragraph, that this is a document:

"... intended for internal use only -- it will not be distributed to beneficiaries. A summary of the key areas in which grants will and will not be considered will be produced separately as guidance for grant applicants."

That's the document I showed you a moment or two ago.

Then if we go over the page, you'll see there begins a series of items or matters for which grants can be sought with a maximum figure, details of what might be granted, and what's going to be required in terms of the detailed information for each item.

Can you help us with this: why was this full document, which provided rather a lot more information than the summary, for internal use only? Why weren't beneficiaries simply given sight of this full document?

A. I cannot remember. What I would be confident of is that we gave guidance to the beneficiaries on what they should need to know in order to put in

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which the Partnership Group report reveals unhappiness about lack of clarity, lack of transparency, lack of certainty as to what can be applied for, by way of grant. So that's January 2013.

If we look next at MACF0000171_049, you'll see this is a short document, which -- this is a draft that was presented to the Board. I don't think we have the very final version but it says:

"From May 2014, the Macfarlane Trust is introducing new guidelines for grants."

Then we can see what was intended to be published, on this page and the page that follows.

Are you able to assist us with why it took from January 2013 to May 2014 for guidelines to be produced to be made available to beneficiaries?

A. No, I can't recall. I hadn't realised -- I'd forgotten -- I must have known but I'd forgotten until you drew it to my attention just now that that was the situation.

Q. Then --

A. It must have been an issue with the beneficiaries but I cannot remember at this juncture.

Q. Then if we go to -- forgive me for a moment -- MACF0000171_042, these are the office guidelines from the same date. There obviously had been various

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applications. But I do agree with you, looking at the document now, that I cannot -- and having read it in preparation for my interview, I cannot see any reason why we shouldn't have given it to them. But I cannot recall why we didn't.

Q. Thank you.

Then if we could look at MACF0000022_008.

These are the minutes of a Grants Committee meeting 5 November 2014. You're not present but this is during your chairmanship. If we go down the page to the heading "Policy Issues", it said this:

"Collectively, it was agreed that it would be difficult to devise clear criteria in relation to the effect that disposable income should have on office grant applications. The office were given the authority to assess the income and expenditures individually, and refer any cases to the Committee where there was difficulty to establish charitable need; these should be sent via round-robin."

Now it would appear from this, and I think it's consistent with the evidence that we heard from Ms Barlow, that by this time exceptional circumstances has been jettisoned as a criterion, the search is for charitable need, and that is assisted by consideration of the individual's disposable income.

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1 How, with absence of any clear criteria or
2 other guidance, and a requirement for individual
3 assessment, how was consistency and fairness ensured
4 or capable of being ensured in the decision-making
5 process?

6 A. Well, I think prior to this a problem had been -- and
7 I think we may have talked about it yesterday -- about
8 assessing total income of households when grants were
9 coming in and applications were coming in and we were
10 being somewhat rigid in terms of deciding who
11 should -- what somebody should be allowed -- should
12 have and it was sometimes somewhat controversial as to
13 what income we were taking into account.

14 I think this was most probably about giving
15 a little bit of freedom in terms of assessing the
16 situation of individual applicants rather than having
17 a formula which was too rigid.

18 Q. Would you accept that it might be difficult for
19 applicants to know if it was worth making an
20 application in the absence of any kind of guidance of
21 criteria as to what might be taken into account or
22 regarded as disposable income?

23 A. Well, we would never have discouraged an applicant
24 from putting in -- a beneficiary from putting in an
25 application. We certainly would not have done that.

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1 issues, then we would endeavour to help them in terms
2 of dealing with that.

3 What we wouldn't have done is just to have been
4 very hard-hearted and say, "No, we're not going to
5 help you". So -- yes, I think that's all I want to
6 say on that.

7 Q. We can take the document down, thank you.

8 Was it part of the Trust's thinking in
9 approaching applications that it wanted to avoid
10 fostering dependency?

11 A. Well, latterly it was, yes.

12 Q. How --

13 A. Do you want me to say a bit more about that?

14 Q. I'd like to understand what it meant in practice?

15 A. Well, I hope this answers the question you're asking.
16 I think I said yesterday that I had some unease when
17 I was on the NSSC about the intrusion we were really
18 making into individuals' lives and I was very keen and
19 played my part in getting the increase in the regular
20 payments for individuals. So then they could make
21 their own decisions on lifestyle basically.

22 Prior to that, we were, when I first came on to
23 the committee, being really quite intrusive in terms
24 of looking at what people did with their money and
25 where the money came from, which I thought was

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1 Certainly the membership of the committee by this time
2 was one of a propensity to want to be as helpful as
3 they possibly could and I would be -- clearly I can't
4 talk about individual cases -- it was a long time
5 ago -- but I would be confident that they would
6 have -- did what they could to help and would err on
7 the side of generosity. If they needed any more
8 information they would have sought it from the
9 applicant.

10 Q. Do you know whether, as part of the assessment that
11 either the office workers or the Grants Committee or
12 presumably, on appeal, the Board might be taking into
13 account, would the decision-maker be looking at what
14 the applicant said they were spending their outgoings
15 on and making judgments about whether what the
16 applicant was doing was reasonable?

17 A. Well, no two case -- no two applications were the
18 same, of course. I don't think we would have made
19 a judgment about reasonableness. We certainly
20 wouldn't have done that. If, say, someone had
21 submitted an application for us to pay off some debts,
22 perhaps they were threatened because they'd not paid
23 the council tax or energy bills or whatever, if the
24 information they submitted to us showed that maybe
25 they were giving priority to less important, desirable

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1 certainly not the modern way of doing it and was
2 actually somewhat demeaning to the individuals.

3 So we moved towards that, which of course did
4 have some -- and I think most beneficiaries liked that
5 because it gave them more self-respect in some cases
6 but, of course, some individuals found it quite
7 difficult to adjust to what they had been used to,
8 sometimes for decades.

9 Q. Other witnesses have either spoken or written in their
10 statements of an aim to foster dependency. Other than
11 through a switch or change of emphasis to less by way
12 of individual grant and more by way of regular payment
13 as a policy, was there any respect in which the desire
14 to avoid fostering dependency, as it's put in Trust
15 documentation, translated into practice when
16 considering grant applications?

17 A. I'm not sure I -- if I understand the question you're
18 asking me, I mean, it was -- it would have been,
19 certainly latterly, quite a pragmatic approach in
20 deciding what would be the most helpful relationship
21 at a particular time with a beneficiary. Is that what
22 you're asking me basically?

23 Q. I may not have put the question particularly clearly,
24 Mr Evans. I'm trying to understand how the objective
25 of avoiding fostering dependency, which we see

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referred to in various materials from time to time, how that was given practical effect, if it was, in the approach to assessing grant applications. So would the office worker or the NSSC or Grants Committee, for example, say, "Well, we think this person's becoming too dependent on the Trust, they are making too many applications, we propose to discourage that and that's going to be a factor in deciding whether we grant or decline an application"?

A. Well, we wouldn't have put any hint of an embargo on anybody submitting an application. If that were going on, then -- that was the situation, then we would do what we could to try and help that person, looking ahead rather than back. But I think what we did somewhat successfully was to change the culture, really. I mean, if I could just give an example which might help you, is that there were very much a minority of applicants who we felt were -- we're sort of pre-Amazon days but they were buying lots of stuff on mail order and so forth which we thought were luxuries and then coming to us and expecting us to help them out when they got into financial problems afterwards perhaps with, as I saying earlier, paying utility bills and suchlike. Now, we wouldn't have left somebody, not helped them out in that situation,

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paying fees and so forth -- paying, contributing towards the children who they'd -- who they were parents to.

So no two cases were exactly the same and there wasn't a strict rule of saying, "Right, let's -- what's coming through the front door in terms of income?" Sometimes we might not take account of that but also there might be the sort of situations I've just explained where there were people not living together but that we felt had some relevance.

Q. I understand from your evidence both yesterday and today that household income, however precisely defined, was looked at when considering single grant applications. We know, I think from Ms Barlow's evidence, it was looked at when considering or assessing for regular payments. In relation to widows, once regular payments were available for widows, is it right also that was assessed on the basis or taking into account the overall household income?

A. I think it was but I'm not sure.

Q. Do you know what, if any, steps the Trust took to get in contact with widows or other bereaved dependants, who might no longer have been in contact with the Macfarlane Trust, to inform them of the availability

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but we would have, through the advisers which we had -- whose services we used to make a relationship with that particular individual.

The Grants Committee itself, and prior to that the NSSC, they wouldn't have been carrying out that particular work. They weren't the right people to do it.

Q. In terms of means testing and what income was taken into account, I think I asked you yesterday about the taking into account of household income, so not just the applicant's but of other adults living within the house, the Trust has seen some evidence to suggest it's all household members whose income was taken into account if they were adults, so it wasn't limited to only certain categories of relationship. Do you have any recollection one way or another in that respect?

A. We certainly were interested in more than the income from one individual but, again, it did require some, shall we say, common sense, really.

I deliberately yesterday explained to you how the beneficiary community changed over the decades and, of course, by the time of which you are asking me questions there were lots of very complex family arrangements, with separations and divorces and partnerships and welfare benefits and ex-partners

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of the post-Archer top-up regular pay?

A. Well, when we were informed that -- several ways. Firstly, when we were informed that a primary beneficiary had sadly died, then at that stage it would be made very clear to the widow what -- how we would support her moving ahead, and we did, I think, communicate reasonably well on an ongoing basis telling widows what grants and benefits there were by -- through the newsletter and other online means. But it was not always easy to reach some of them and some of them, a small minority, very much a minority, some of them did not wish to take advantage of what they might have because they wanted to move on in their lives and put behind them the sad events they'd been involved with.

Q. Do you know whether there were proactive steps taken by the Trust in the post-Archer years, and in particular from 2012 onwards when you became chair, to try and ensure that all those who might be eligible for a new regime of regular payments and who might not know because they'd fallen out of touch with the Trust, because there would be no incentive for them to keep in contact with the Trust, was there a proactive system for trying to track people down and making sure they were aware now there was something they could

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1 claim?

2 A. Yes. Let me first say that our objective was to make

3 available whatever money individuals were entitled to,

4 so we did want to find out who those people are and to

5 encourage them to take advantage of it. But yes,

6 I think that was done, as I said, by a newsletter and

7 suchlike. It wasn't always easy if we didn't know the

8 contact details of an individual widow, and we

9 probably would have -- I know that was only six years,

10 eight years ago, but I think today there might be ways

11 with social media we could have done things more

12 imaginatively than we did it then.

13 Q. When the Trust changed from exceptional circumstances

14 as its criterion to what may have been a return to

15 charitable need and a focus on disposable income, was

16 that change publicised to beneficiaries and, if so,

17 how?

18 A. I can't remember but I would expect it would have been

19 publicised in newsletters, online and any contact

20 meetings we had with the beneficiary community.

21 Q. Do you accept, as a matter of principle, it should

22 have been publicised --

23 A. Oh, absolutely, yes. Absolutely. As I said just now,

24 our intention was to make sure everybody took

25 advantage of any financial support they were entitled

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1 buying replacement bedding. That's not a very good

2 example but -- or a mattress or something, or should

3 we be regarding them as financially less needy? It

4 was somewhat subjective as to what extent do we look

5 at what people's financial needs are, as opposed to

6 recognising what had happened to them in the past.

7 Q. If the Trust under your chairmanship had not had

8 financial constraints, if it had had a rather more

9 significant amount of money available to it from the

10 Department of Health than it had on an annual basis,

11 would you have wished to do away with means testing

12 for the reason you've given, that you don't think it

13 was consistent with the spirit of what was supposed to

14 be being undertaken?

15 A. Absolutely. I mean, if we had had available

16 a substantial amount of additional money I would have

17 been pressing for us to increase the regular payment

18 figures and to hopefully make it less frequent for

19 people to want to come to the Trust for specific

20 payments -- grants.

21 Q. Last question on the grant application process. You

22 observed in one of your statements, and we looked at

23 it yesterday, that you had concerns about the process

24 being onerous for applicants. One aspect of the

25 onerous nature of the process that has been described

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1 to from us.

2 Q. We looked yesterday at a document -- I don't think

3 I need to go back to it -- in which you'd noted in one

4 of your email communications with the Department of

5 Health that means testing was, you said, rightly

6 a very sensitive subject for beneficiaries.

7 As chair, did you initiate any steps to remove

8 or at least reduce means testing from either grant

9 application -- the grant application process or the

10 regular payment process?

11 A. Can I say, first of all, that I was very uncomfortable

12 that there was means testing at all, which I don't

13 think -- which I think was contrary to what the

14 intention was when the Macfarlane Trust was at its

15 inception but, certainly, I made it very clear that

16 when, for instance, considering individual situations,

17 we should discourage means testing. But for the sort

18 of situations I was explaining to you, we talked about

19 just now, I mean, it was really impossible just to not

20 take any account of what people's personal income was.

21 You know, a difficult one is -- it's something

22 of a rhetorical question. It is a rhetorical

23 question. If someone who has an income of 100,000

24 a year and there were some people who did, should you

25 be making available similar sums of money for their

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1 to the Inquiry, and I think was described to the Trust

2 at the time, was having to get two quotes for

3 everything.

4 Did you when either as trustee or as chair ever

5 revisit the requirement for two quotes which some

6 beneficiaries at least may have found it difficult to

7 comply with?

8 A. Well, I think when I was on the NSSC we endeavoured to

9 be practical about that. I mean, if someone were

10 asking -- to use an example I think I put in my

11 statement -- £150 for a pair of glasses, we wouldn't

12 have expected them to go to two optometrists to get

13 two quotes. We would have avoided that sort of thing

14 happening. If someone wanted some building work done,

15 for instance, then I don't think it was unreasonable

16 to expect them to get more than one quote.

17 So my recollection is that from about 2011 to

18 about 2014 the NSSC at the time became really quite

19 bureaucratic and I'm not sure there was quite as much

20 pragmatism then, and it certainly took me a while,

21 once I was the chair, to actually glean this was going

22 on, and I think I worked it out -- well, I discovered

23 it when beneficiaries in a -- I think it was at

24 a Partnership Group meeting, were quite rightly

25 complaining about it.

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1 Q. The two-quote requirement is retained for most items
2 at least in the 2014 version of the office guidelines.
3 Did you or the Board ever consider whether the
4 guidelines should adopt a more flexible approach to
5 the requirement for two quotes?
6 A. I think it needs to be -- I need to mention that they
7 were guidelines. So they don't have to be followed to
8 the letter. That is what I was talking about with
9 pragmatism.
10 Q. Did the office staff understand that they had the
11 ability and flexibility to dispense with the
12 requirement for there to be two quotes for every
13 application?
14 A. Oh, they did for most of the time that I was involved
15 with the Macfarlane Trust. Ros Riley, who was the
16 lady in charge of NSSC, had been with the Trust for
17 quite a long time, and she had one and then two very
18 able assistants working for her, one who had certainly
19 been there a long time, and they used to build up very
20 good relationships with a number of the beneficiary
21 community, and they would have -- before the
22 applications came in, they would not infrequently have
23 conversations with them over the phone about what they
24 were entitled to have and what they actually had to do
25 in terms of, as you said, two quotes, whatever, rather

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1 office and said "I've got a leak in the house and I'm,
2 you know, getting flooded", just to use a fairly stark
3 example, then we would endeavour to -- well, we would
4 give them some money straight away to deal with it.
5 I would hope that the office would not say we
6 need two quotes but would go along with saying, "Well,
7 how much is it the going to cost?" and, "Well, this
8 local plumber has told me so and so". Then what would
9 happen is the office staff would ring around members
10 of the NSSC and say this and this and this and this
11 and "Do you agree to the money?" and in cases we could
12 deal with this in hours. It would be very quick --
13 **SIR BRIAN LANGSTAFF:** Thank you.
14 A. -- and then we would just confirm that at the next
15 formal meeting.
16 **SIR BRIAN LANGSTAFF:** Would beneficiaries be aware from
17 anything which was in writing which they had that
18 that's what the position would be if they had such
19 urgent need?
20 A. They should be, yes, and I cannot see why they
21 shouldn't. The reason I say "should be" is we were,
22 of course, dealing with a diverse group of
23 beneficiaries and some people would understand some of
24 these matters some more readily than others. If they
25 didn't understand, then that was really part of the

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1 than just waiting for a form to come in and then
2 dealing with it in a bureaucratic way.
3 Q. I want to ask you a little more about relationships
4 with the beneficiary community --
5 **SIR BRIAN LANGSTAFF:** Just before you do that, can I ask
6 how this system of grant applications would have
7 responded to emergency situations or, for that matter,
8 take this example. Perhaps you might look at this
9 first. It's generally understood that if you buy
10 a bed from Ikea that the mattress will be a bespoke
11 size. You can't get mattresses that size readily
12 elsewhere in the open market. I think that's
13 generally known.
14 Would I have to get two quotes for such
15 a mattress or would I have to change my bed?
16 A. I know I introduced mattresses as an example, which is
17 probably not a good one because many of the primary
18 beneficiaries benefited from having a certain type of
19 mattress, don't ask me why, and I think they were ones
20 which only one or two companies provided. So we would
21 not have made them wait weeks to get a new mattress if
22 they needed one urgently.
23 With the first part of what you were just
24 saying, Sir Brian, there was a great deal of common
25 sense with the system. Say somebody rang up the

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1 job when I spoke to the office to explain to them.
2 Incidentally, which I could have said to Ms Richards
3 a bit earlier, it just occurred to me now, is if
4 people had difficulty filling in the application form
5 then the office staff would help them do it and
6 I think in some cases they might have filled it in for
7 them.
8 So there was a nice, good, warm relationship
9 between the office and the beneficiary community prior
10 to any applications going anywhere near the NSSC.
11 **SIR BRIAN LANGSTAFF:** Thank you.
12 **MS RICHARDS:** I wanted to asked you more broadly,
13 Mr Evans, about means of relationships with the
14 beneficiary community and how the views of the
15 beneficiary community were sought.
16 First of all, what steps did you take, either
17 as trustee or chair, to meet with or forge
18 relationships with the beneficiary community?
19 A. Well, I knew quite a lot of the beneficiaries.
20 My guess would be I would have known well over 100,
21 some of them better than others, and that was through
22 a number of occasions. It was -- well, I'll go
23 through them. I mean, it was very helpful that I had
24 this period of time as the interim chief exec of The
25 Haemophilia Society because I came in contact with

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quite a few beneficiaries through that. I used to go to the men-only weekends, which I looked forward to going to. I'd go on a Friday, have a drink and a meal with the beneficiaries on the Friday evening and I used to have a question and answer session with them on the Saturday morning and then I'd leave. So I got to know quite a lot there. And I've heard some very heart-jerking stories, as you can imagine.

The Partnership Group, which was always a difficult forum, there was that. Beneficiaries came along, some of them, to APPG meetings.

So, yes, there may be other ways but I knew quite a lot. I mean, my contact with them was intermittent, as you would expect, and I actually -- nearly all of them were good people. I mean, I know we had differences in certain ways but I had a lot of respect for virtually all of them and certainly a great deal of sympathy and emotion for what they'd gone through, and certainly I heard some extraordinary stories during the time I was there.

I mean, what I found -- I'm talking quite a lot, I hope it's helpful -- but there were some of the beneficiaries, for instance, that none of their family knew that they had HIV and they'd spent decades -- well, you have probably heard some of this

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organised it in every respect. And the previous chair, he would have stood down, I would think around 2009, because he was finding it very demanding to deal with, for it to conduct itself, and we did have a period of time, for two years or so, when it was not sitting. I cannot remember -- I was a trustee then. I cannot remember what happened at that stage to get views from beneficiaries.

Q. In terms of -- no, actually before I ask you about user trustees, could we look at CAXT0000068_010.

This is a meeting of the Macfarlane Trust and Caxton Foundation liaison committee, 19 December 2012. So it's looking at both the operation of Caxton and the operation of Macfarlane.

If we go down to the heading "Appointments" and look at the first paragraph under that, it refers to the appointment of Ms Barlow as chief executive of both charities and then, third line, it says:

"It would also be necessary to ensure that less of her time was taken up with unplanned communication with individual beneficiaries than had been the case with her predecessor, in order that she could devote more of her time and skills to management."

Then there's a suggestion from you that you and Ms Lloyd agree a code of engagement between

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already. So learning those sorts of stories was really quite helpful to me in terms of knowing what the attitude and approach should be with the beneficiary community.

MS RICHARDS: How were the views of the beneficiary community taken into account when reviewing or formulating guidelines or policies or criteria?

A. We -- well, obviously the user trustees on the board played a part and we -- I do recall we shared draft guidelines at Partnership Group meetings. I've got a feeling that in Jan Barlow's time we did circulate more widely for comment or consultation the guidelines but I cannot remember how we did that and how it was dealt with.

Q. In terms of the Partnership Group, there were I think, during the period when you were chair, fairly significant periods of time which the Partnership Group was not meeting with the Board. What, if any, steps were taken in the absence of the Partnership Group to try to ensure that views of the beneficiary community could be taken into account?

A. Well, the Partnership Group had reformed I think just before I became the chair or certainly the time -- the time -- it was very close to when I became the chair. Previously -- it was a beneficiaries' forum. They

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yourselves, as chairs of the respective organisation I assume, trustees and Ms Barlow, so that she had a consistent mode of working.

Was there an aim to discourage the chief executive from interacting with individual beneficiaries?

A. No, not at all. I mean, I'd forgotten those minutes until you put them up now. I don't recall -- I may have seen them in the last few days. I can't remember.

I think that wording is actually extremely clumsy. Martin Harvey was extremely good at meeting up and -- often in semi-social settings, and so forth, with some of the beneficiary community, but not all of them. Part of the price of that was there were other aspects of the running of the Trust which were probably not dealt with so well. I'm being very careful with my words because I have a lot of respect for Martin.

So I can only imagine we were alluding to that. But it certainly was not an intention of saying she should not spend time with them. On the contrary, I think it was important to do so.

Q. If we go to the third page of these minutes, please. Under the heading "Communications", it says here:

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1 "Caxton needed considerable improvements in its
2 communications with beneficiaries ..."

3 I am going to ask you questions a little later
4 this morning about your experience at the Caxton
5 Foundation but I think by this time you had left.
6 Sorry, it may be that will be a question for others.
7 Then it says:

8 "It was noted that both charities required
9 a change of 'culture' in the office that would enable
10 their websites to be kept up-to-date without prompting
11 from trustees."

12 What, if anything, can you tell us about the
13 perception that a change of culture was required?

14 A. Well, what date were these minutes --

15 Q. 19 December 2012.

16 A. 2012?

17 Q. Yes.

18 A. Well, my recollection is that, in many ways the
19 communications were still, shall we say, somewhat
20 old-fashioned and the website was not a particularly
21 inspiring website, basically, and we were trying to
22 juggle between some of our beneficiaries not having
23 access to the internet at all with doing something
24 which was in the right way for other beneficiaries.
25 So I think what this is -- I think that's probably

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1 quality of response from the office had deteriorated
2 since the establishment of Caxton, together with
3 a feeling that the Caxton Board had a tendency to
4 exhibit a feeling of superiority -- rather than
5 providing MFT with a service, which was the ethos of
6 an SLA, Caxton was felt to be dictating employment
7 matters and not consulting."

8 You allude in your witness statement to there
9 having been concerns or problems with this arrangement
10 without, I think, going into detail. Are you able to
11 assist us any further on what you saw the problems as
12 being?

13 A. Yes, very much so. I mean, I would say quite a few
14 things on this.

15 The Macfarlane Trust, of course, has employed
16 its own staff since its inception in 1988, and when
17 the Caxton Foundation was established, and whether
18 that was the right way -- well, that was a different
19 issue. I won't say that.

20 But when the Caxton Foundation was established,
21 Peter Stevens was dealing with Christopher FitzGerald
22 on what the future staffing relationship should be
23 between the two bodies and there was, probably quite
24 sensibly, a view that there shouldn't be separate
25 staffing establishments, that they should all be in

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1 what it's partly about.

2 The other thing, of course, we had a very
3 difficult period of, what, 18 months or two years,
4 during the time that Martin Harvey was on sick leave,
5 and then he resigned, when to some extent we, perhaps
6 inevitably so, we took our eyes off the ball, and
7 I know this was a bit later than that but it did take
8 a while to get these issues like communications right.

9 I think the other thing is we had a young man
10 in the office who was responsible for communications
11 and IT who was very committed and did extremely well
12 but he was not someone who had any real experience in
13 modern communications. So I think this was about
14 trying to -- improving communications and to deal with
15 some of the issues you've been asking me about earlier
16 this morning.

17 Q. Then if we look at the heading "Service Level
18 Agreement", this I think is a reference to the
19 arrangement that came about whereby staff were
20 effectively employed through the Caxton Foundation,
21 but you will correct me if I'm wrong. It says:

22 "RE reported concern within the MFT community
23 as a whole that the Service Level Agreement ... and
24 its implementation were unsatisfactory from the view
25 point of MFT. He cited about two key points: the

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1 the -- in Alliance House, under one particular chief
2 executive, but with some designation between who was
3 working for Caxton and who was working for the
4 Macfarlane Trust.

5 Peter and Christopher explained to respective
6 Boards that the only legal way this could happen would
7 be for the Caxton Foundation to be responsible for the
8 employment of staff and other administration
9 responsibilities and, at the time, I was very uneasy
10 about that because I could see that it was going to
11 create some sort of frisson, really, between the two
12 organisations, both in office terms with the Boards
13 and also with the beneficiary community.

14 It did not take too long for -- so the
15 intention -- a service level agreement was agreed,
16 which was, I think, specific on what Caxton should be
17 providing Macfarlane in terms of, I think, staff
18 numbers but certainly in terms of the budget which --
19 the monies we paid for the service we got.

20 But, as I feared, it did not take too long and
21 I think this became even more apparent after
22 Jan Barlow arrived that, because the staff were
23 employed by Caxton and they were in charge of the
24 office, et cetera, the Macfarlane Trust, instead of
25 being an equal of Caxton, was something a bit less

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1 than the Caxton Foundation, and that was an issue
2 which came to the surface not just where we are now
3 but also a year or two later.

4 I can't remember after this meeting what, if
5 anything, was done to try and improve the situation
6 but it was a problem and it was partly the catalyst to
7 some other difficulties later on.

8 **Q.** There's one document I want to ask you about in
9 relation to user trustees.

10 Soumik, it's MACF0000026_057, please.
11 Minutes of board meeting 12 May 2014. If we go
12 to the third page and we look at the top half of the
13 page, this is in the context of a discussion of the
14 establishment of the new Grants Committee which was
15 replacing the NSSC, and we'll see, top of the page:

16 "It was proposed that to avoid any potential
17 conflict of interest, and to comply with best practice
18 on governance, any user trustee wishing to be a member
19 of the Committee would not be able to apply for grants
20 whilst on the Committee."

21 Then if we go down to the third paragraph:

22 "Following discussion ..."

23 Sorry, I think we've gone too far down. Go
24 back further:

25 "Following discussion, it was AGREED to amend

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1 that was -- they still in some way had some benefit
2 over someone who was more remote.

3 Reading these -- preparing for my interview and
4 seeing what you have got on the screen now, it does
5 seem to me what we did was somewhat extreme but
6 I cannot remember the entire debate on this at all.
7 What I do remember is that we without difficulty were
8 able to appoint one of our user trustee members on to
9 the committee and he proved to be a good member.

10 **Q.** In your witness statement -- we can take that down
11 thank you.

12 In your witness statement, Mr Evans, you have
13 said that one of the complexities to your work was the
14 beneficiary community. What did you mean by that and
15 what do you mean by that being one of the complexities
16 to your work?

17 **A.** Well, the -- most of the issue would -- you obviously
18 know. The beneficiary -- primary beneficiary
19 community which the Macfarlane Trust was serving was
20 about 370 men and there were at least as many widows
21 and partners and wives who we were supporting, quite
22 rightly so, and there was also several hundred
23 children who we were looking to support, and they were
24 living throughout the UK. So -- and they were all --
25 they were very different people for lots of reasons.

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1 the draft Terms of Reference to say that any user
2 trustee member of the Grants Committee would be
3 required to stand down in perpetuity from membership
4 of the Committee if they applied for a grant."

5 Mr Evans, previously, as I understand the
6 position -- please correct me if I'm wrong -- there
7 had been, I think, some arrangement whereby user
8 trustees, if they wished to apply for a grant, would,
9 obviously, declare an interest and would not
10 participate in any meeting in which their grant
11 application was being considered. This obviously goes
12 rather a lot further than that and prevents any user
13 trustee in perpetuity from being a member of the
14 committee if they applied for a grant.

15 Why go so far as to discourage user trustees
16 from participating in the Grants Committee?

17 **A.** Well, there was quite a lot of unease, as much from
18 the beneficiary community, as far as I recall, as the
19 Board, that not all but one or two of the
20 beneficiary -- user trustees sitting on the committee
21 were in fact able to get some favourable consideration
22 of grants they put in, both in terms of numbers and
23 also the judgments, and I think the feeling was that
24 if someone was at an NSSC meeting and went out of the
25 room just while their case was being considered, then

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1 So trying to get a good relationship --
2 a relationship with a community of that size was very
3 challenging and I don't think it had ever been
4 achieved and we probably didn't -- well, we didn't
5 either. So that was part of it.

6 There were a small-ish number of beneficiaries
7 who were much more active, both in attendance at
8 meetings and using websites and bulletin boards and
9 suchlike, who it would have been easy to have given
10 some disproportionate consideration to their
11 particular points of view.

12 So it was really how do we have a good -- the
13 right relationship with the whole of the community.
14 You partly took me on to that earlier, Ms Richards,
15 when we were talking about the understanding or
16 otherwise of what eligibility people had for grants.

17 **Q.** You describe in your witness statement -- had you
18 finished that answer, before I --

19 **A.** Yes. Yes, I was just coughing, I'm afraid.

20 **Q.** You described in your witness statement a particular
21 incident with a group of beneficiaries, in which you
22 describe a group of beneficiaries forcing their way
23 into Alliance House offices, and I have a handful of
24 questions I want to ask you about that.

25 First of all, am I right in understanding that

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1 you were not present on that occasion?
 2 A. No, I wasn't.
 3 Q. My understanding from the statements that the Inquiry
 4 has is that Mrs Lloyd, who was chair at the time of
 5 the Caxton Foundation, was also not present.
 6 Ms Barlow, who was in the building, was in the
 7 building but herself didn't witness this.
 8 So what was the source of your information that
 9 this had involved forcing, or I think another term you
 10 use elsewhere is "barging", by this group?
 11 A. Well, the group beneficiaries, as I understand it, who
 12 came into the office were Caxton Foundation
 13 beneficiaries. They were in London for some event at
 14 Parliament or something -- I can't remember what it
 15 was -- and, so I was told, they sort of took it upon
 16 themselves to come to the office. I learnt about what
 17 happened probably the next day -- I don't think it was
 18 the same day -- from Jan Barlow, and at one level it
 19 was an issue for the Caxton Foundation to deal with
 20 because it was their beneficiaries and they were the
 21 people who were responsible for the maintenance of the
 22 office services, in every respect.
 23 But it did, of course, have potential
 24 implications for the Macfarlane Trust, partly because
 25 staff, although employed by the Caxton Foundation,

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1 these people should be let in or not is not for me.
 2 I wouldn't know.
 3 But then when they would have reached the
 4 Alliance -- our offices, if I put it that way, at the
 5 end of a corridor there was a door with a coded lock
 6 on there and they would have had to come to that lock
 7 and -- the door would have had to be opened not the
 8 lock and then that would be the way they got it. My
 9 recollection, which I'm pretty sure is what I'm
 10 referring to, is one of the staff -- I cannot remember
 11 who -- there's a bell which you rang if you wanted to
 12 come into the office, so one of my recollections is
 13 that -- my recollection is that the bell rang, someone
 14 went to the door to see who it was and these
 15 individuals barged their way in. That's why I was
 16 using the language I did in my report and to you just
 17 now.
 18 Q. When you say your recollection that's a recollection
 19 of what you were told because you weren't there?
 20 A. Yes, it was second-hand, yes.
 21 Q. The Inquiry's received some evidence to suggest that
 22 the Caxton Foundation had published a leaflet or some
 23 form of material that invited beneficiaries to pop in
 24 and attend the offices if they wished to. Were you
 25 aware of that or had that position changed by this

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1 some of them were Macfarlane workers and, probably
 2 more important or as importantly, is that there would
 3 have been confidential files and papers of our
 4 beneficiaries which would have been exposed when the
 5 intruders came into the office. So that was what
 6 I knew about it.
 7 Q. Do I understand your evidence to be that your sole
 8 source of information about this issue was Ms Barlow?
 9 A. As far as I recall.
 10 Q. Ms Barlow herself had not witnessed the incident, if
 11 "incident" is the right word, so when you use the
 12 language of "intruders" or "forcing" or "barging",
 13 where have you got that impression from? Must it have
 14 been Ms Barlow then?
 15 A. Yes, it must have. I mean, the arrangement --
 16 intruders -- I don't know what words were used at the
 17 time, it's a long time ago but the arrangement in
 18 Alliance House was there are a number of different
 19 bodies who had offices in there. We were on the --
 20 was it first or second floor -- first, I think -- and
 21 there was a small, sort of, reception area at the
 22 beginning, where there was a reception person there
 23 who was expected to ask people why they came into the
 24 office and into the buildings and if they did not have
 25 good purpose then they would not let them in. Whether

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1 time, to your knowledge?
 2 A. No, I wasn't aware of that.
 3 Q. Then just --
 4 A. But if -- but the impression I was given, which must
 5 have been a clear one by Ms Barlow, was that the
 6 intention of coming into the office wasn't to have
 7 a friendly conversation with the staff there, it was
 8 to carry out some sort of occupation in protest
 9 against something or other.
 10 Q. Could we look at one document. It's page2, Soumik,
 11 of WITN2050109. Thank you.
 12 This is a letter which you wrote to one of the
 13 individuals who attended at the Caxton Foundation
 14 office in Alliance House:
 15 "Dear Mr [X]
 16 "I gather from the staff that on 17 April 2013,
 17 you arrived, with others from the Contaminated Blood
 18 Campaign, at the offices in Alliance House wishing to
 19 see the Chief Executive and the Chair of the Caxton
 20 Foundation. Despite being informed that people were
 21 not available, you barged in, unannounced and
 22 uninvited, to the offices. This caused real concern
 23 to staff and, potentially, gave you sight of
 24 confidential information of a personal nature about
 25 beneficiaries of all the organisations that work out

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1 of Alliance House, including the Macfarlane Trust.
 2 "I trust that this action will not be repeated.
 3 It would not be out of place for you to apologise for
 4 your actions to those staff who were present.
 5 "I am placing this letter on the Trust's forum.
 6 "Yours sincerely
 7 "Roger Evans."
 8 Two matters I wanted to ask you about,
 9 Mr Evans. First of all, before sending this letter,
 10 which characterises the incident in particular terms,
 11 did you take any steps to find out if there was
 12 potentially a different account or explanation that
 13 those involved might have wanted to give of what they
 14 did and why they'd come to the office?
 15 A. Well, I spoke -- slightly different from an answer
 16 I gave just now. When I was in the office I spoke to
 17 the staff who were affected and some of them were
 18 really quite frightened because there were two or
 19 three -- I think they were all men who came in but
 20 I could be corrected on that, but there was some women
 21 there who found the whole incident really very
 22 intimidating.
 23 Q. So --
 24 A. But I did not speak to any of the beneficiaries who
 25 came into the office. That would have been really, if

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1 the Caxton Foundation, Mrs Lloyd, just to try to reach
 2 out to those involved, to obtain their account,
 3 which -- the account that's been given to the Inquiry,
 4 I should say, is a different one from the one which
 5 you describe?
 6 A. Well, no, I don't, because I'm very confident that's
 7 exactly what happened. They would have barged their
 8 way in. They had -- they weren't -- they gave no
 9 notice they were coming, they were coming to make
 10 a form of demonstration, and they intimidated by their
 11 body language the staff who were in the office. And
 12 I'm very confident that is exactly what happened.
 13 Q. And your confidence is based upon hearing one side of
 14 the events and not the other?
 15 A. Well, I'm very confident that the staff were telling
 16 me a true story.
 17 Q. Second --
 18 A. If they wanted to come into the office, why would they
 19 have wanted -- sorry, this is -- it's a rhetorical
 20 question. Why would they have wanted just to come
 21 unexpected into the office, without having an
 22 appointment to see anybody, and they were coming in to
 23 a workplace where the beneficiaries did not usually
 24 come, and the desks and so forth would have been
 25 distributed with files and -- they had no reason to do

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1 anyone were to do it, for Ann Lloyd to do because they
 2 were Caxton Foundation individuals.
 3 Q. As I understand it, you're now saying, I think in
 4 contrast to what you said a few moments ago, that the
 5 sole source of your information was not Ms Barlow but
 6 it was Ms Barlow and some other staff?
 7 A. Yes. I mean, my firsthand information came from
 8 Ms Barlow but when I was next in the office, and
 9 I cannot remember how long afterwards that was, then
 10 I spoke to the staff about it, partly to give them my
 11 sort of sympathies for what had happened.
 12 Q. The --
 13 A. If what you're asking me, did I speak to any of the
 14 beneficiaries or the occupants who came into the
 15 office, then I didn't do so because I didn't think it
 16 was my responsibility to do that. It would have been
 17 difficult to have done it probably anyway.
 18 Q. Do you think if the --
 19 A. I cannot even tell you who they are now.
 20 Q. Do you think it might have been a good idea, before
 21 sending a letter in these terms and using language
 22 such as "barging" or the language you've used, you've
 23 talked about "intruders" and so on, "occupants", do
 24 you think it might have been a good idea to, if not
 25 necessarily directly yourself but through someone at

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1 it.
 2 Q. Mr Evans, I'm obviously not going to answer what you
 3 recognise is a rhetorical question.
 4 A. Sorry, that was a rhetorical question.
 5 Q. But would you accept that you might have obtained the
 6 answer to that if steps had been taken to ask the
 7 beneficiaries themselves?
 8 A. I never was given any contradictory version of events
 9 from Ann Lloyd. Whether we ever spoke about it or
 10 not, I don't know, but she certainly didn't say it
 11 differently. But it wasn't for me to carry out any
 12 sort of investigation into what had happened with
 13 something which was predominantly a Caxton Foundation
 14 issue. It would have been for the Caxton Foundation
 15 to do that.
 16 Q. But you did nonetheless decide to take two steps. One
 17 is to write in the terms which we see from this letter
 18 to one of the individuals involved, and the second was
 19 to not just send that letter to the individual
 20 concerned directly but to post it on the
 21 Macfarlane Trust forum for all on the forum to see.
 22 Why did you take that latter step, Mr Evans?
 23 A. I think it was to make it very clear that this was not
 24 something which would be condoned in the future.
 25 I mean, this was quite a -- this was quite an

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1 aggressive approach. It wasn't a group of people
 2 coming in giving a gift to the staff or whatever.
 3 They came in to make their feelings felt about certain
 4 things. And I suspect they were hoping to see
 5 Jan Barlow, who appeared not to be there. I mean, it
 6 wasn't a social visit.

7 **Q.** Well --

8 **A.** And if that were allowed to happen -- I know I'm
 9 coming across very strongly on this, I make no apology
 10 for that -- if that is something for which we just
 11 took lightly, it could have happened in the future.

12 **Q.** Mr Evans, I should make clear the Inquiry has
 13 different accounts of what happened but, as you
 14 weren't there, I'm not going to ask you further about
 15 the facts because --

16 **A.** That is my account which came from Jan Barlow and
 17 informal talking to the staff in the office when I was
 18 there.

19 **Q.** The question I want to ask arising out of this letter
 20 is this: if your concern was to try to get a message
 21 across that people shouldn't come unannounced to the
 22 Alliance House offices or shouldn't come without an
 23 appointment, wouldn't the way to do that, that would
 24 be most conducive to good beneficiary relationships,
 25 have been to post on the forum or in the newsletter

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1 until Ms Richards put the letter on the screen.

2 **MS RICHARDS:** Do you accept now at least that there would
 3 have been not just different ways of dealing with this
 4 but better ways of dealing with it, rather than
 5 personalising it to this individual and writing in
 6 these terms on a forum to which many would have
 7 access?

8 **A.** I think there were alternative ways of dealing with
 9 it. One of the -- I can't remember the dates and
 10 sequence of events now but one of the beneficiaries
 11 who came into the office was the one who squared up
 12 and was going to hit me in the House of Commons. So
 13 we were dealing with quite a big man. So it was not
 14 an easy situation to deal with.

15 I think, what eight years or so later, it's --
 16 no seven years, it's possible to see it in a different
 17 light. I think what was important at the time was to
 18 show the staff that we were supporting them. But,
 19 yes, there would have been other ways of dealing with
 20 it but, at the time, emotions were very high.

21 **Q.** Can I then come to a different aspect of
 22 communications with beneficiaries, and it arises out
 23 of the statement, again, of Kate Rendle, so if we can
 24 go back to that, WITN3372002. If we go to page 6
 25 please, Soumik, if we just pick it up at paragraph 28

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1 something which -- along the lines of saying, you
 2 know, "Please ensure that you don't attend
 3 Alliance House without an appointment because it might
 4 cause problems for the staff and there might be
 5 confidential information that could otherwise be
 6 inadvertently exposed", rather than posting a personal
 7 letter in which the individual -- we've covered their
 8 name but the individual is named on the
 9 Macfarlane Trust forum. So you're making accusations
 10 effectively through this letter, posted on the forum,
 11 about a named individual.

12 Did --

13 **A.** There would have been different ways of dealing with
 14 this, I accept that, but emotions and feelings were
 15 very high about this at the time.

16 **SIR BRIAN LANGSTAFF:** May I ask why you were dealing with
 17 it at all, given the evidence which you have repeated
 18 on a number of occasions, that really this was
 19 a matter for Ms Lloyd to deal with?

20 **A.** I think, Sir Brian, having seen this letter now, what
 21 was not quite right, which I said a few minutes ago,
 22 I think one of the beneficiaries who was with this
 23 group was, in fact -- was, in fact, a Macfarlane Trust
 24 beneficiary and I think that's why I wrote the letter
 25 to him, I think that was it. I'd forgotten about that

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1 onwards, Ms Rendle's here describing a communication
 2 survey that she undertook and she explains the
 3 process, the receipt of both positive feedback but
 4 also a significant amount of negative feedback and
 5 dissatisfaction. She describes it being emotional
 6 reading, and says, this is paragraphs 28:
 7 "I could also see clear opportunities for the
 8 trust to improve its communications with
 9 beneficiaries, taking steps to be more open,
 10 transparent and receptive to the needs of its
 11 community."

12 Then if we go to the next page, we see she
 13 explains how she presented an interim report to the
 14 board in January 2013, then the final results
 15 February 2013. She describes in paragraph 33 her
 16 perception that it was generally found to be useful
 17 and insightful, and then includes several points on
 18 what she felt the Trust:
 19 "... should do in the immediate, medium and
 20 longer term. I believe it was Roger's suggestion for
 21 Jan to decide on how to action the report."

22 Then she sets out some views as to how
 23 Ms Barlow had reacted to it. Then she says this, at
 24 paragraph 34 and 35:
 25 "I intended the survey to be just the first

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step in improving communications between the MFT and beneficiaries. But after I presented the report and it was handed to Jan, no further action was taken, to my knowledge.

"35. I continued with my Trustee role for a while but there was no further action taken with the report. I was not aware of any action by Caxton."

Now, I'm not proposing to go through the detail of the report with you, Mr Evans, and we're going to be hearing from Ms Rendle, in any event, herself next week but can you assist us first of all with what your recollection is of your views about the report and why it was, if this is the case, that no further action was taken?

A. Well, let me, first of all, say that it was a very useful report. It was a superb piece of work she did, when she came onto the Board, and this was the one occasion The Haemophilia Society invited me to sit in on the interview and that was something she said she could bring to the Macfarlane Trust and she did.

My recollection is, and without the report in front of me, that some of the -- well, first of all there was some very useful insightful information, feedback on views on the Trust. My recollection is that certainly some of the recommendations were

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A. Yes, it probably is, yes.

Q. Right. I won't take up time by doing that exercise with you by way of oral evidence but we will work through the minutes and see what we can ascertain in that regard.

The next document -- sorry, sir, I note the time. Can I just ask you about one document and then it will probably be a suitable moment for a break.

It's WITN4474002.

You will see this was a letter written 12 February 2014 by Ms Boyd and Mr Mishcon writing as former trustees of the charity, and they say this -- it was a letter addressed to the Secretary of State for Health, writing:

"... to express our concerns at the way in which the charity is being 'administered' by the present chairman and chief executive."

Then, if we go to the fourth paragraph, you will see they say this about you as chair:

"Since his appointment, the chairman has failed to consult adequately, in our view, with the Board on matters of importance and upon strategy or to take trustees' views into account. The minutes of Board meetings, which he oversees, are, we believe, 'tweaked' towards his own agenda and he does not

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implemented. I can't remember much more than that.

But, unfortunately, she -- after a year or so she had to resign from the Board because of work commitments and we may have taken our eye off the ball a bit. I'm not sure. But, certainly, it wasn't just shelved and not dealt with.

Q. If --

SIR BRIAN LANGSTAFF: Just can you explain how, if you may have taken your eye off the ball, it just wasn't shelved and not dealt with. I mean, those two seem to be expressing contradictory things.

A. Well, we implemented some of her recommendations in relation to the forms of communication, I think it was, with the beneficiary communication, but I don't know that we worked through as well as we might all of them. So perhaps "shelve" is the wrong word. What I was really trying to say is that we implemented some of the report but not all of it.

MS RICHARDS: If we want to try and ascertain, Mr Evans, which parts of the report's recommendations were implemented by the Board and which were not, is our best source of information going to be looking through the board minutes that follow and seeing what consideration was given to aspects either of the report itself or of communication?

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suffer being challenged lightly."

I think the rest of it I can explore with others but that's what's said about your chairmanship, Mr Evans. Do you have any observations to make about that?

A. Well, I think several. First of all, I hadn't -- I wasn't aware of this letter until it came out with the documents for this hearing. Mr Mishcon and -- there were a number of issues, as you probably -- and I know you are interviewing him -- picked up, you will have picked up, which were partly about relationships with him as a board member and also relationships with the beneficiary community, and this letter was written -- I can't remember the exact date which was in the top but I think it was written a couple of weeks after he and Mrs Boyd ceased to be members. Their terms of office had come up. And Mrs Boyd had some -- sadly, she's died, she had some health problems and so forth. I think Mr Mishcon would have liked to have continued as a board member.

I don't accept what he says in this paragraph. What I would -- and I did listen and I certainly took -- as far as I was -- thought -- cognisance of what other trustee members were saying and wanting, but not always did I agree -- think it was the right

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1 thing to be done and neither did other trustees.

2 This would have been after the letter which
3 Mr Mishcon wanted us all to sign. So that would have
4 probably affected his view.

5 I think what I -- and I think later on the
6 Board was a much more relaxed board than it had been
7 before.

8 I have very little doubt that I was being quite
9 firm on certain issues. As far as the minutes are
10 concerned, Jan Barlow drafted them. I saw a draft,
11 they went to the Board for approval, if any Board
12 member was not happy with any of the content of the
13 minutes, then we would look at them and, if there was
14 general agreement, they would have been amended. But
15 I don't recognise that I tweaked the minutes and
16 I can't think of any reason why I would have wanted to
17 do that.

18 **MS RICHARDS:** Sir, I note the time. It's 11.30. Just in
19 terms of timings, I've got two principal issues still
20 to ask Mr Evans about. One is about his work with the
21 Caxton Foundation. The other is about the dispute
22 with The Haemophilia Society in 2015. I'm not going
23 to finish those quickly. I will certainly finish
24 them, if we take a break, by lunch, which would enable
25 us then to take the lunch break, allow recognised

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1 **SIR BRIAN LANGSTAFF:** We must take them always into
2 account. So we will take the break until 12 o'clock.
3 So it's slightly shorter than half an hour but not by
4 much. 12 o'clock.

5 **A.** Thank you.

6 (11.33 am)

7 (A short break)

8 (12.03 pm)

9 **MS RICHARDS:** Mr Evans, I'm going to ask you about your
10 involvement with the Caxton Foundation next. How did
11 you come to be appointed as one of the founding
12 trustees of the Caxton Foundation?

13 **A.** Well, I think that the Department of Health had
14 approached Peter Stevens about establishing a Caxton
15 Foundation and he contacted me one day, and I think he
16 wanted to come round to my house to have a talk to me
17 about something and he came and invited me to be one
18 of the three founding trustees, and the Department of
19 Health -- I think that already been presumably agreed
20 but certainly the Department of Health were aware that
21 he was approaching me and they were supportive of it.

22 **Q.** As I understand your statement and the documents, you
23 together with the two other founding trustees,
24 Mr Stevens and Mr Gore, drew up then a proposal for
25 the structure and governance of the Caxton Foundation.

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1 legal representatives and Core Participants to put
2 forward during lunch any further questions, hearing
3 from Mr Evans again at 2.00 for what would then be,
4 I hope, a short final session, and putting
5 Mrs Carroll's evidence back a bit later in the
6 afternoon but I'm confident that Mrs Carroll's
7 evidence is unlikely to take very long because there
8 is only really one issue she will be being asked
9 about. So I don't think, in other words, we'll quite
10 finish Mr Evans by one o'clock but we should finish
11 him not long after 2.00.

12 **SIR BRIAN LANGSTAFF:** I'm sorry that we won't finish you
13 within the morning, Mr Evans, but I feel confident
14 that, given your helpful attitude so far, that you
15 won't mind too much about that. I hope you have
16 nothing planned for 2.00.

17 **A.** No, no, I rather suspected we wouldn't finish,
18 Sir Brian. It's not an issue.

19 **SIR BRIAN LANGSTAFF:** It's often the way of the world.

20 **A.** If you wanted to shorten this break or lunch, that
21 would not be an issue with me.

22 **SIR BRIAN LANGSTAFF:** I think we have to allow
23 a sufficient break for those who are watching online
24 as well.

25 **A.** Oh, yes, that's true.

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1 Can you recall what input the Department of Health had
2 into that process?

3 **A.** Not really. I'm sure they did. Most likely was that
4 we drafted various documents and then we shared them
5 with the Department. I don't recall that, for
6 instance, they took the initiative in any
7 documentation.

8 **Q.** If we go to CAXT0000108_17, this is an early meeting,
9 4 August 2011, with you, Mr Stevens, Mr Gore and
10 others. If we go to the third page, you see at the
11 bottom of the page it says this:

12 "In response to Ms Winram, Mr Evans said that
13 it had been determined by the three founding trustees
14 not to appoint beneficiaries or user trustees to the
15 Caxton Board. There was a general consensus that,
16 while the views of the beneficiary constituencies
17 should be sought in a manner that was open and
18 transparent, it was premature to consider the
19 appointment of user trustees."

20 Then there are some further observations from
21 Mr Gore and from Mr Lister.

22 Can you assist us with why the three founding
23 trustees, of whom you were one, had decided not to
24 appoint beneficiary or user trustees at that stage?

25 **A.** I can't recall but I know -- I mean, setting up the

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Caxton Foundation quickly was quite an embryonic process. I know at that stage we were not at all clear on who the beneficiary community would be, how many beneficiaries, if I can use that word, would be eligible and, therefore, how to get some reasonable communications with them. I think that may have been part of it.

Q. Was there any consultation at the planning or setting up stage with prospective Caxton beneficiaries or what might have been some representative groups of some, at least, of the Caxton beneficiaries, so that their contribution could inform the actual setting up process?

A. Well, my recollection is we were not at all clear on the beneficiary -- who would be -- names of individuals who would be in the beneficiary community. What I do remember is that, fairly early on, we had a meeting, which I think -- probably around about the time of these minutes, when a number of potential beneficiaries were invited along and how they were communicated with or identified I can't remember. At that stage that was a sort of information and view exchanging meeting. Whether this came up at that meeting, I don't know.

But there were all sorts of -- I mean, all this

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included. CF was left by the DH to make its own decisions regarding payments to Hepatitis C sufferers. There was never an assumption that the guidelines and criteria should be the same."

Then you say this:

"I recall that the circumstances, social and clinical needs of those with Hepatitis C were perceived as different from those MFT primary beneficiaries with HIV and haemophilia."

Are you able to assist us with what the perceived differences were at the time?

A. Well, I may have touched on clinical just now in what I was saying but I'll come back to that if you so wish, Ms Richards.

I mean, social, many of the -- this was very early days but many of the potential beneficiaries with hepatitis C would not also have had haemophilia -- sorry, HIV. So their personal needs were in many ways different. I'm not saying they were any less they were just different than those of the Macfarlane Trust. I mean, I think, incidentally, that all we really had to build on, trying to start this from nothing, really, was what experiences and what prototypes there were with MFT, rather than starting from scratch.

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was -- I left the Board before much of this was resolved but there were certainly some concerns we had about how we could find out who the beneficiaries were, the fact that this was so long ago that the hospital departments would not necessarily have records which were relevant, and also who -- getting medical confirmation that somebody, in fact, had a condition where they would be relevant.

So it wasn't a clear-cut group of people.

Q. In your statement, if we go to WITN3859002, please, and pick it up at the bottom of page 20 --

A. Just before that, can I just add something to what I just said when I was reflecting. I mean, there was certainly never any intention that the beneficiary community would not be involved in some way, in a way which would be helpful to them and also helpful to us. I think the quandary around about that time was what was the best way in order to do that.

Q. If we go to WITN3859002, bottom of the page, paragraph 90:

"Establishing the CF was, as far as I recall entirely a Government and DH initiative and decision. Peter Stevens, Charles Gore and I were then tasked with putting this in place ... I do not recall any discussion on whether those with Hepatitis B should be

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But to some extent we had no alternative at that stage to try and do some comparison from what we knew from MFT. But it was really about the social implications arising from having different clinical conditions from those of the Macfarlane Trust community.

Q. Now, your statement also tells us -- I don't think we need to look at it, so we can take it down -- that ministerial approval was required for the appointment of all Caxton Foundation trustees and, indeed, we've seen that from other evidence. Who suggested the requirement for ministerial approval, as far as you can recall?

A. That would have come from the Department of Health.

Q. Did you, Mr Stevens and Mr Gore simply agree with that or do you recall whether you expressed any contrary views?

A. I can't recall expressing a contrary view.

Q. There's evidence to suggest -- again, I don't think I need to take you to the documents but if you want to see them please do -- there's evidence to suggest that the Caxton Foundation was not permitted by the Department of Health to hold reserves. Did you have any involvement in that decision or discussions?

A. No, I didn't. I can't recall anything of that at all,

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1 so presumably I didn't.

2 Q. We know that you stepped down from the Caxton

3 Foundation when you became chair of the

4 Macfarlane Trust. Ms Barlow was then in 2013

5 appointed as chief executive of both Caxton and

6 Macfarlane. Did you consider then or do you consider

7 now that there was a conflict of interest in having

8 the same chief executive of both organisations, in

9 circumstances where only one organisation was the

10 employer of staff and in circumstances where --

11 A. Well, I think --

12 Q. -- sorry, if I just finish --

13 A. No, no, you finish, I beg your pardon.

14 Q. -- in circumstances where there was possibly

15 competition for a finite pot of money?

16 A. A few things on that. It would have been difficult to

17 have had two different chief executives running two

18 organisations. It would have been expensive. How it

19 would have worked out in practice would have been

20 awkward. There were plenty of similarities between

21 the administration of the two bodies. I think, to

22 an extent I was -- I'm alluding to this when we talked

23 about the staffing arrangements earlier this morning,

24 but there was always likely to be a perception that

25 one of the organisations was -- I can't think of

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1 Health had one sum of money which was earmarked to

2 cover both and in some way they divided it. They

3 could have been completely different budgets. So

4 there was never any evidence that that was the case.

5 I think, incidentally, where the MFT could well

6 have lost is if Caxton had not come into existence,

7 and I'm very pleased it did, then we might have found

8 that that would have had some financial benefits to

9 the MFT, but that's pure speculation.

10 Q. Can I just ask you then a handful of questions in

11 relation to Caxton about what was and was not

12 available during the period you were there to

13 beneficiaries.

14 One document to look at, CAXT0000109_043.

15 This is, as becomes apparent from the

16 introductory paragraph, a report that was produced

17 after you left. It's the National Welfare Committee

18 report, and it's referring to -- it's a report I think

19 as at a date in 2012 after you departed. But you were

20 on the original National Welfare Committee for a few

21 months, I think we learn from this; is that right?

22 A. I think I attended one or two meetings.

23 Q. If you go to just the last page of this document,

24 you'll see there there's a grant application process,

25 and if we go to the bottom of the page, you will see

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1 a better phrase but there must be one, almost playing

2 one off against the other and that priority was given

3 to one of the bodies rather than the other, which in

4 practice I do not think was true at all.

5 Certainly, when I left my role as a trustee of

6 Caxton, I had no wish to know very much about Caxton

7 and to pry into what was going on, other than what

8 I needed to in terms of our relationship between the

9 two.

10 Jan Barlow was actually very firm, in my

11 recollection, that if any trustees, for example,

12 wanted information from -- about the other body, then

13 she made it very clear that she could not do that, and

14 quite rightly so.

15 So -- but I think there was certainly a feeling

16 that was the case. I know this phrase has come up

17 before -- I haven't used it -- but, I mean, it's

18 questionable whether there was one pot of money.

19 I mean, the DH gave Caxton financial allocation along

20 the way -- the lines we've been talking about

21 yesterday. Sorry, they gave Macfarlane an allocation

22 along the way we were talking yesterday. They gave

23 Caxton an allocation and, presumably, that was dealt

24 with in a similar way.

25 I mean, I don't know if the Department of

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1 the italicised note at the bottom:

2 "The Caxton Foundation has to ensure that all

3 payments are used for the purpose agreed by the

4 Trustees therefore, vouchers will be used wherever

5 possible or payments will be made directly to the

6 supplier."

7 Now, that might suggest that vouchers, about

8 which some have expressed concern as to the

9 stigmatising effect, or direct payments were being

10 used because of a distrust of applicants, a fear that

11 they wouldn't use the payment for the agreed purpose.

12 Was that the thinking of the National Welfare

13 Committee?

14 A. I do not have an opinion on the thinking of the

15 National Welfare Committee. Vouchers was one of the

16 ways of dealing with grant applications of the

17 Macfarlane Trust which was in place well before

18 I became a Macfarlane trustee.

19 Q. Do you recall any discussion --

20 A. I cannot remember a discussion on this with the Caxton

21 Foundation, and certainly I can never remember anyway

22 a discussion of mistrust.

23 Q. During the time that you were involved in the Caxton

24 Foundation, can you recall participating in any

25 discussion or decision-making about whether loans

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1 might be made available to beneficiaries?
 2 A. No, I can't.
 3 Q. We've heard about some of the events for the
 4 beneficiary community that took place for
 5 Macfarlane Trust beneficiaries. Were you involved in
 6 any discussions or decision-making about the holding
 7 of events for the Caxton beneficiary community?
 8 A. No, I wasn't. I don't know whether they took place or
 9 not because, as I said, I moved on.
 10 Q. There will be at least one later witness in relation
 11 to Caxton I can perhaps take that up with.
 12 I'm going to move then to 2015 and the
 13 APPG report and the dispute with The Haemophilia
 14 Society, Mr Evans. So if we can look, first of all,
 15 briefly at the APPG report.
 16 It's RLIT0000031, Soumik.
 17 You will note, Mr Evans, the date,
 18 January 2015. And if we go to page 32, do you see
 19 there the heading "Evidence provided to the APPG by
 20 the three Discretionary Charities"? The first
 21 paragraph talks about appeals for information to the
 22 three discretionary charities, which obviously would
 23 have included the Macfarlane Trust. Then the next
 24 paragraph says this:
 25 "The trusts provided some, but not all, of the

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1 A. First of all, can I say that we very much welcomed the
 2 APPG initiating this exercise, and Diana Johnson, who
 3 was then the chair, was very active and I think
 4 Mr Burt was as well. So we were very keen to
 5 co-operate on what they were doing.
 6 I cannot remember why certain documents weren't
 7 made available, and I certainly don't recall that
 8 there was any -- I'm sure there was no intent on the
 9 part of the Macfarlane Trust not to be co-operative
 10 with the APPG on this matter. All I can suggest is
 11 that the documents which we did not provide and maybe
 12 we should have -- I'm not sure -- but we would have
 13 been quite genuine in our reasons for not producing
 14 them.
 15 Q. I'm not going to go through the detail of the report
 16 with you, Mr Evans, but do you accept that it
 17 contained a number of criticisms, criticisms of all
 18 sorts of matters outside of your control, perhaps, and
 19 Department of Health funding issues and the like, but
 20 it contained also criticisms of the way in which the
 21 discretionary trusts, including the Macfarlane Trust,
 22 dealt with beneficiaries and their applications.
 23 A. Yes.
 24 Q. This was January 2015. You were chair until I think
 25 May 2016. Did the Macfarlane Trust put in place any

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1 information the APPG asked for."
 2 Reference then to business case, but in the
 3 fourth line:
 4 "... they neglected to fully address other
 5 requests for information. Most notably, despite the
 6 fact that a wealth of internal reports had been
 7 produced by trustees of the discretionary charities,
 8 they did not give these reports to us at our request
 9 on the grounds that they had been 'superseded' by the
 10 more recent business case."
 11 Then there's a discussion about issues relating
 12 to the Caxton Foundation. Then the penultimate
 13 sentence:
 14 "In addition, the charities were also invited
 15 to make comments on the number of grant applications
 16 refused, the number of Caxton beneficiaries who were
 17 in poverty and other information. This was not
 18 forthcoming."
 19 Some of that is Caxton-specific, and obviously
 20 you had left a number of years before then, but some
 21 of this appears to be expressing a concern about the
 22 information not being provided by the other
 23 discretionary charities, the Macfarlane Trust. Can
 24 you assist us with why the APPG was not given all the
 25 information it requested?

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1 kind of programme for analysing the criticisms and
 2 working out what to do to address them?
 3 A. I don't recall that we did. Have you got the
 4 criticisms there that you could put on the screen?
 5 Q. There are -- they are sort of dotted around --
 6 A. What obviously I'm going to say -- I mean, I'll say it
 7 anyway, my recollection of the report, which
 8 I reiterate, I thought it was a very helpful piece of
 9 work, was that the criticisms in many respects were
 10 associated -- were endemic within the way the
 11 Macfarlane Trust was established and what role it was
 12 expected to carry out.
 13 Now, you will recall that in my evidence I did
 14 question whether the Macfarlane Trust was the right --
 15 whether it was fit for purpose, in the sense of why --
 16 to do the job which the Department wanted us to do.
 17 My recollection, which I stand to be corrected, is
 18 that many of the criticisms were really about that.
 19 I'm not sure it was worded that way and I think they
 20 were ones which were relevant to what should happen
 21 with the Macfarlane Trust and the other bodies later
 22 on, which happened to be after I left.
 23 Q. Mr Evans, you are right that there were indeed
 24 criticisms along those lines but there were also
 25 criticisms of the way the discretionary trusts

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operated, so just by way of example, this is not exhaustive, in the executive summary, if we go to page 15, paragraph 14. Same document, Soumik, yes.

You will see there, paragraph 14:

"Individuals who are able to access discretionary assistance [in other words, those who are eligible for Macfarlane or Eileen or Caxton] report a range of grievances regarding the way that support is delivered ..."

I am not going to go through them in detail but you will see there are various matters set out about the application process, feeling of begging, not being updated, fairness of the application system, over the page.

A number of them are the themes that I sought to explore with you, Mr Evans, during the course of your evidence yesterday and today. The question is did the Macfarlane Trust seeing this put in place any kind of programme for analysing the criticisms and seeing what it could do to improve the position?

- A. Well, some of this, if not all, we'd already taken on board because I suspect that the APPG -- much of their information, quite rightly so, would have come from the beneficiary community and we talked earlier on about issues about awareness and decision-making

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dissatisfaction with the level of proof required to access support, the waiting times for receiving payments and the difficulty getting into contact with relevant trust staff."

So that's very much about the experiences of beneficiaries in their dealings with the Trust and not just the systemic problems flowing from the setup or funding of the Trust.

Do you agree that -- do you agree that the Macfarlane Trust should have looked and worked through all these various criticisms and drawn up an action plan?

- A. I think it would have been helpful to have done that, seeing this list now.

- Q. Do you have any recollection of there being any discussion of that and, if there was, will we find it in the minutes? Again, I don't want to trawl you through months of minutes.

- A. I have no recollection but it is possible there is something in the minutes. I'm sure you will find quite a lot in the minutes about the APPG report and how we're going to action it.

- Q. We will undertake that further paper trail.

You attended a meeting -- we can take the document down, thank you -- not long after the

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processes, and so forth. Certainly the first three of these I would expect we'd already started taking action.

I don't think we did it in a formal action plan but, certainly, Jan Barlow, as the chief executive, would have been commissioned with carrying out that work, and also she reported back to the Board in due course, and that relates to such things as setting up the new Grants Committee, and so forth.

Regarding the fourth of those bullet points, which I think is slightly different, then to some extent I agree with that, about a feeling of begging and this takes me back to what I've alluded to before and that is, I think, the whole process by which support was given to the beneficiary community was not the right one.

- Q. If we go just to the top of the next page and continue with that paragraph about the feeling of begging, it makes reference to the demeaning and onerous process of trying to access support and many "simply given up applying", and then this:

"A great deal of Macfarlane Trust recipients were of the view that the organisation was getting worse, its staff becoming more distant and it becoming harder to access assistance. Others expressed ...

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publication of the APPG report. You attended a meeting on 29 January 2015 with Ms Barlow and Mrs Liz Carroll, the chief executive of The Haemophilia Society. Why did you go along to that meeting, as far as you can recall?

- A. Well, the intention of a meeting was a very informal catch-up, as it were, over a cup of tea with the two chief execs and the two chairs. And Bernard Manson, the chair of The Haemophilia Society, was not able to attend and I decided that it might be helpful if I were to go along anyway.

- Q. Had you previously met Mrs Carroll?

- A. I'd met her at such events as APPG meetings. I don't recall I've ever had -- been in a formal meeting with her.

- Q. What's your recollection of the discussions had in the course of that meeting?

- A. It was a very -- I came out of the meeting thinking it would have been very helpful. It was an exchange of views on issues about current financial situations for both of us, the way forward and what might happen about the Government reviewing the whole of the process and so forth, and I'm sure we talked about other things as well. But that was it. It was a very informal changing of views -- views on various issues.

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- 1 Q. Do you recall any discussions about the Penrose
2 Inquiry, which was -- at that point in time I think
3 a report was anticipated, in the following few months?
4 A. I don't recall but it's possible it was mentioned
5 because, as you said, the Penrose was due to report
6 quite soon afterwards -- a few months afterwards,
7 I think it was. It may have come up in conversation
8 but I don't recall.
9 Q. Do you recall any discussions about the process for
10 nominating trustees by The Haemophilia Society or
11 anything along those lines?
12 A. I can't but it's possible. I think there might have
13 been a vacancy at the time. We may have talked about
14 how it was going to be filled or something. It was
15 a very sort of wide-ranging discussion but it's quite
16 likely that came up.
17 Q. Do you recall Ms Barlow saying anything to the effect
18 that -- in the context of a discussion about --
19 whether it's the Penrose Inquiry or campaigning issues
20 or obtaining answers -- something to the effect that
21 the Department of Health should wait as long as
22 possible before making any decisions as more people
23 would have died and there would be less people to pay?
24 A. No, I don't recall her saying that, and if she did so
25 I would have remembered it.

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- 1 beneficiaries face by the staff of these
2 organisations."
3 Then the next paragraph says:
4 "The experience of The Haemophilia Societies
5 backs this up, including at a recent meeting between
6 myself and the Chief Executive, Jan Barlow and Chair
7 of The Macfarlane Trust Roger Evans, where they
8 expressed the opinion that the Department of Health
9 should wait before responding to Penrose so more
10 people will have died and they will have less to pay
11 out."
12 Again, Mr Evans, is there anything that you can
13 recall about the meeting that contained any kind of
14 statement from Ms Barlow or indeed from you to that
15 effect?
16 A. No.
17 Q. Now, you saw this letter, as I understand it, on
18 23 February 2015 when it was published by The
19 Haemophilia Society. I don't expect you necessarily
20 to remember the precise date, Mr Evans, but do you
21 recall --
22 A. What I do remember is the letter had already been sent
23 and presumably received by Jane Ellison and lots of
24 other people, including the Secretary of State, and
25 I was alerted to it by Jan Barlow who had been alerted

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- 1 Q. Do you recall anything being said either by you or
2 Ms Barlow that was in any respect similar to that
3 comment?
4 A. No.
5 Q. If we look, please, at MACF0000059_047.
6 This is a letter that was sent by Mrs Carroll
7 on behalf of The Haemophilia Society dated
8 10 February 2015 to the Parliamentary Under-Secretary
9 of State. We'll see in the second paragraph she
10 refers to the Society's view that the current system
11 of support was not fit for purpose.
12 If we carry on further down the page we'll see
13 she says at the bottom of the paragraph:
14 "We have a great deal of contact with people
15 affected by contaminated blood, and also occasionally
16 meet with The Chief Executive and Chairs of The
17 Macfarlane Trust and Caxton Foundation."
18 She refers to receiving:
19 "... mixed views on the organisations, [but]
20 the overwhelming experience of those we speak to is
21 dissatisfaction, distress or anger at the way
22 beneficiaries of the organisations are treated. Some
23 this is directed at the Department of Health in terms
24 of the level of support provided, but much is focused
25 on the lack of respect and understanding of the issues

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- 1 to the letter by a beneficiary. We were never sent
2 a copy of it.
3 Q. Would you agree that if anything to that effect had
4 been said, it would have been grossly inappropriate
5 and wrong?
6 A. Absolutely, and it wasn't said.
7 Q. The Inquiry will be hearing from Mrs Carroll later
8 today, Mr Evans, but Mrs Carroll's evidence, in
9 writing at least, is to the effect that this was said
10 by Ms Barlow not by you.
11 A. Well, can I strongly make the point that once we knew
12 about this -- I will explain what my action was if you
13 will find it helpful.
14 Q. I'm going to come to that in just a moment if I may.
15 Just pausing there, can you think of any reason why
16 Mrs Carroll would say that this had been said by
17 Ms Barlow if it had not been?
18 **SIR BRIAN LANGSTAFF:** Well, I think thinking of any reason
19 is not a question he can answer.
20 **MS RICHARDS:** No. You are absolutely right, sir. Do you
21 know of any reason why Mrs Carroll might have said
22 Ms Barlow said this?
23 A. No.
24 Q. I want to come then to the steps that were taken by
25 you once you became aware of the existence of the

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content of this letter.

Can we go to WITN1122043, please.

This is an email from Mrs Carroll. It's not a document you would have seen at the time but if we just scroll further down the page, please, Soumik, you'll see there -- up a bit further. Thank you perfect.

It says that on 23 February 2015 Liz Carroll wrote:

"I just wanted to let you know I have just had a call from Roger Evans who is very angry about the letter we sent. He says it is libellous as this was not said, and if anything was said it was him recounting an anecdote. This is absolutely not true and Jan definitely was the person who said the government should wait before responding to Penrose so more people will have died and it will be cheaper and as the years go on there will be less people to fight.

"Roger has said if we do not retract the letter and write to the minister within 24 hours they will take legal action. He asked if the Board had seen the letter, which I confirmed.

"I remained calm during the call and said I know what I heard.

"Roger said he will be called Bernard, and

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say largely what I said to you now that we would expect the allegation to be withdrawn because it was not said.

Incidentally, I don't recall making this comment about I would have said it rather than Jan, and I was annoyed, as you would expect, because of the circumstances. I presume she wasn't prepared to do that but, certainly, only at that stage with the backing of the Macfarlane Trust Board, where we had a meeting promptly, there seemed to be no alternative but to involve lawyers in order to get a retraction of the wrong allegation which she'd made.

If you just permit me to go on a bit, if this had not been dealt with, it would have made it -- relationships, to put it mildly between myself and the Macfarlane Trust beneficiaries, extremely difficult, if I was seen to either have said or be party to a suggestion that anybody should want some of them to die, and I'd not spent eight years voluntarily working for the Macfarlane Trust if I felt that way about them, and also I -- there were indications that, politically, they might have been wanting to take some action.

So there was no alternative but to act very quickly on this and to get the retraction which she

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I have forever damaged the good relationship between The Haemophilia Society and The Macfarlane Trust."

Now, first of all, Mr Evans, is it correct that you telephoned Mrs Carroll and had a conversation with her?

A. First of all, as soon as the letter -- I became aware of the letter, I endeavoured to -- the letter had gone out before, as I said just now. I rang her Chairman, Bernard Manson, and unfortunately I could not get hold of him. Given the serious allegation which was not true, which was in the letter which was sent, and -- I'm not suggesting you should, Ms Richards, but there were -- if we had scrolled down on the previous document it had been sent to the Secretary of State, the Opposition Spokesman on Health, the chair of the APPG, about six or eight other MPs, and it had been put on The Haemophilia Society website. So it was very much in the -- and some MPs started responding to it.

So it was very much in the public domain that this had happened and, quite frankly, I regarded what she had done as being malicious and hurtful, and so something needed to be done straightaway.

As I could not get hold of the chair, I decided I would ring her to ask her if she would -- well, to

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gave. If Mrs Carroll is now withdrawing what she said in that letter, then that's the first time that's ever happened and it's interesting.

Q. Just taking it in stages, in relation to this telephone conversation, you said you don't recall saying the words to the effect if anything was said it was you recounting an anecdote.

A. Well, there's no reason why I should have said that any more than Jan Barlow. There's no logic to that at all. I mean, I don't know why she said that. Also, in one of the correspondence, it says Jan or I had made the comment. Well, she must have known if she was -- if it had happened, which it didn't, which of us had made the comment.

Q. Is this right: your evidence is that, in the course of the conversation that you had with Mrs Carroll on the phone, is this right, you don't think you said words to the effect of if anything was said it was you recounting an anecdote, or can you not remember whether it was said or not?

A. I know I didn't say it.

Q. Is it right that you were very angry about the letter?

A. Well, you can probably gather from my -- the way I'm responding to you now, yes, I was extremely -- I did not bully her, which came up in one document but

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1 I just made it very clear that we wanted a retraction
2 straightaway, and it actually took another two weeks
3 to get it, I think.

4 Q. Do you think you said words to the effect that
5 Mrs Carroll had forever damaged the good relationship
6 between The Haemophilia Society and the Macfarlane
7 Trust?

8 A. I might well have said that, yes.

9 Q. That was 23 February.

10 If we could go, please, to MACF0000022_026.

11 You'll see this is a statement made the very
12 next day, 24 February:

13 "Statement by Liz Carroll, Chief Executive of
14 the Haemophilia Society regarding the letter from the
15 Haemophilia Society to Jane Ellison MP, Under
16 Secretary of State for Public Health, dated
17 10 February 2015.

18 "We have been contacted by the Chief Executive
19 and Chairman of the Macfarlane Trust with regard to
20 opinions attributed to them in the letter from the
21 Haemophilia Society to Jane Ellison. They state that
22 the comments in that letter which were attributed to
23 their Chairman and Chief Executive were never made and
24 categorically do not reflect the views of the
25 Chairman, the Chief Executive or anyone else

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1 if we look at WITN3078023.

2 Have you got that, Soumik? You don't have
3 that, WITN -- let me see if I have the right
4 reference, let me just check -- 3078023. If you go
5 into the materials for Mrs Carroll's evidence this
6 afternoon, it will be there.

7 So if you go to the next page, this is the
8 letter that was sent in response. So your solicitors
9 wrote on 26 February, the solicitors for The
10 Haemophilia Society wrote on 27 February. If we go
11 down the page it says:

12 "In the shared hope that it will be possible to
13 resolve this matter without recourse to costly and
14 time-consuming litigation, we are instructed to put
15 forward the following ..."

16 And then there was an offer of a retraction and
17 apology that would be published to the original
18 recipients, an undertaking not to further publish the
19 words complained of, removing the matter from -- the
20 statement from any online source.

21 Now that was then 27 February. I just want to
22 take it stage by stage, if I may. You then wrote to
23 Mr Manson, if we look at MACF0000059_011.

24 No, that's the wrong letter. I'm sorry. My
25 references are obviously erroneous. We'll come back

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1 associated with the Macfarlane Trust. We wish to make
2 clear that this was Mrs Carroll's impression of her
3 recent meeting with Chairman and Chief Executive but
4 we are happy to accept their assurance today that this
5 is not the view of the Chairman or the Chief
6 Executive."

7 That's the day after your call, Mr Evans. Why
8 was that not enough to bring the matter to an end?

9 A. First, there were several reasons. One is it doesn't
10 give an unequivocal statement that it wasn't made.
11 Secondly, it doesn't address the issue of the letter
12 going, amongst others, to the Minister and the
13 Secretary of State and the political aspect of this,
14 because I would be very surprised if they were to read
15 The Haemophilia Society's newsletter, and we wanted
16 something which was absolutely clear that we'd not
17 said it, because we didn't.

18 Q. You then instructed solicitors, Wilsons Solicitors, to
19 write to The Haemophilia Society on behalf of the
20 Trust, yourself and Ms Barlow, to say that the
21 allegations were false and malicious and saying that
22 it might result in legal proceedings against The
23 Haemophilia Society and Mrs Carroll. Is that right?

24 A. Yes.

25 Q. That was 26 February. 27 February, so the next day,

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1 to that.

2 We'll come back to this letter in chronological
3 order, Mr Evans. 4 March -- I'm hoping this will be
4 the right reference, Soumik. HSOC0029441_042.

5 So there is a further letter from the
6 Macfarlane Trust's solicitors, representing you and
7 Ms Barlow as well, 4 March 2015, with various
8 counter-suggestions in relation to the terms of the
9 retraction and apology, if we just go down the page,
10 and there was the insistence or the reference in
11 paragraph 2 to the inclusion of the word "false",
12 "false allegations", and then at 6 a requirement that
13 The Haemophilia Society pay your and Ms Barlow's and
14 the Macfarlane Trust's legal fees.

15 I'm not going to go through each and every
16 response from lawyer to lawyer, Mr Evans, because the
17 letters speak for themselves. What came back was
18 a suggestion of a form of wording which was to
19 withdraw the incorrect allegation. Your solicitors
20 insisted on the inclusion of the word "false" and in
21 due course a compromise was reached.

22 Before we then look at the letter you wrote to
23 Bernard Manson, can I ask you this: why did you,
24 Ms Barlow and the Macfarlane Trust resort to the
25 threat of legal proceedings?

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- 1 A. I think for the reasons I've described a few minutes
2 ago; namely, that the allegation was an extremely
3 serious one and -- certainly from my point of view
4 and -- Jan Barlow did not make this statement but,
5 from my point of view, it was never suggested. For me
6 to go to a meeting with the chief executive of The
7 Haemophilia Society and for her to accept that I'd not
8 made a statement and then a letter goes to the
9 Secretary of State for Health saying I did make the
10 a comment about beneficiaries dying, and also
11 appearing on The Haemophilia Society website, was
12 extremely damaging, for lots of reasons. All that
13 I wanted, which Jan Barlow presumably wanted -- well,
14 she did want it, was a very clear apology. If
15 Mrs Carroll had accepted at the outset that that was
16 the case, I dare say it would have been possible --
17 and Mr Manson had been involved, I dare say a letter
18 could have been agreed between the parties to be
19 published without the intervention of solicitors and
20 the occurrence of fees.
- 21 Q. Was any attempt made by you or Ms Barlow or anyone
22 else on the Macfarlane Trust board to resolve the
23 matter without recourse to solicitors, other than
24 through the telephone conversation you had with
25 Mrs Carroll on 23 February?

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- 1 This is you, 17 March 2015, to Bernard Manson:
2 "I write following the events of the last three
3 weeks, which have culminated in The Haemophilia
4 Society and your Chief Executive, Liz Carroll, issuing
5 an unreserved apology for the false allegations
6 [et cetera].
7 "The board of MfT has found the events of the
8 last three weeks deeply regrettable ... they have
9 caused distress to many beneficiaries. MfT has a long
10 history of good relations with the Haemophilia
11 Society, but this is deteriorated over the last
12 12 months, and the relationship has been deeply
13 damaged by what has happened in the last three weeks."
14 If we leave aside the last three weeks,
15 Mr Evans, what were you referring to when you said
16 that the Macfarlane Trust's history of good relations
17 with The Haemophilia Society had deteriorated over the
18 preceding 12 months?
- 19 A. Well, what I would have been referring to is --
20 I think you'll find that Mrs Carroll and Ms Barlow,
21 Jan Barlow, took up their posts about the same time in
22 2013 and, from the feedback I got from Jan Barlow,
23 I did not think that their relationship was
24 a particularly comfortable one.
- 25 Q. Can you --

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- 1 A. Well, I did speak to Mr Manson on the phone
2 afterwards. I can't remember how many days afterwards
3 but I did that.
- 4 Q. Do you recall whether it was your decision that the
5 solicitors' letters should include a warning that
6 legal proceedings might be taken against Mrs Carroll
7 personally as well as The Haemophilia Society?
- 8 A. Well, all the actions we took on this were with the
9 full support of the Macfarlane Trust board, and I was
10 very careful that whatever action we took was that of
11 the Board, but I'm not unsympathetic with that
12 statement, no.
- 13 Q. Do you consider --
- 14 A. I'm not sure it was ever really appreciated how
15 serious the allegation was.
- 16 Q. Do you consider that the way in which the
17 Macfarlane Trust and yourself and Ms Barlow dealt with
18 this, through the instruction of solicitors and the
19 various to and fro of correspondence, was a sensible
20 and appropriate use of the Macfarlane Trust's time and
21 resources?
- 22 A. Well, I think we had no alternative.
- 23 Q. Then if we can go to the letter that I put up earlier,
24 which is your letter to Mr Manson.
25 MACF0000059_011, please, Soumik.

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- 1 A. Now, I had a good relationship with Bernard Manson.
2 I did not have a huge amount of contact with him but
3 there was certainly no issue there. The other
4 difficulty with relationships between the Board was
5 that there was one Trustee Board member on both The
6 Haemophilia Society Board and the Macfarlane Trust who
7 was not a helpful liaison.
- 8 Q. So the suggestion that there had been a deterioration
9 in relationship over the preceding 12 months, that's
10 based upon Ms Barlow's reports to you of her meetings
11 with Mrs Carroll, is it? There's nothing else to
12 which you are referring?
- 13 A. Probably more so the latter point I made, but I am not
14 making in this letter and I'm not now making any value
15 judgment about where the -- exactly what the -- how
16 the relationship difficulty worked out between them,
17 and whether it was one person or the other who had --
18 was causing those to happen and relationships are much
19 more complicated than that, as you know only too well.
- 20 Q. Then you say in the next paragraph, you refer to The
21 Haemophilia Society's right to appoint trustees, and
22 you refer to amendment of the Trust Deed, and then you
23 say:
24 "In the light of recent events, the Board has
25 decided not to invite The Haemophilia Society to

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1 nominate a replacement appointment for the vacancy
2 that now exists ..."

3 Then you go on in the last paragraph to say
4 that:

5 "[There's] no confidence that there can be
6 a constructive relationship with [Mrs Carroll], and
7 MFT is not willing to work with her."

8 Did you consider whether it was in the
9 interests of the Macfarlane Trust's beneficiary
10 community to remove the invitation to The Haemophilia
11 Society to nominate a replacement trustee or to
12 decline to work with The Haemophilia Society's chief
13 executive indefinitely?

14 A. Taking the first one, I cannot remember the rationale
15 behind that. Perhaps I should but I cannot. I think
16 we did actually make -- an appointment, I think, was
17 made I think we did go back up to three trustees but
18 I'm not quite sure about that.

19 For my point of view, and also I'm sure it was
20 a set case with Jan Barlow, when such a serious
21 allegation is wrongly made, as Mrs Carroll made, then
22 how could it be possible to be able to trust anyone in
23 working with them that they are going to tell the
24 truth about you in the future. That was the problem,
25 and I did say that we would be content to work with

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1 The Haemophilia Society going forward, do you consider
2 that was properly in the interests of the Macfarlane
3 Trust's beneficiary community and, if so, why?

4 A. Absolutely, because if we'd not taken the route we
5 did, there would have been an impression out there
6 that we were at the least sympathetic to some of the
7 beneficiaries dying, and that's a terrible thing to
8 say, and we needed to deal with that. I don't recall
9 in practice that the stance we took with Mrs Carroll
10 would have had any distinctive effect on
11 relationships.

12 I think, which I should have perhaps said
13 earlier on, that I did say in my statement that The
14 Haemophilia Society, instead of campaigning to get
15 more money in for their beneficiaries, seemed more
16 interested in criticising, in the ways I've mentioned
17 to you, the Macfarlane Trust Board, rather than trying
18 to get more money for the beneficiaries.

19 Q. Again, no doubt that's a question we can pick up with
20 The Haemophilia Society witnesses.

21 One final letter on this issue. Soumik, it's
22 MACF0000059_051, it's Mr Manson's response to your
23 letter of 17 March. It refers to a letter of 19 March
24 but I think it's probably a response. 2 April 2015,
25 he says in the second paragraph:

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1 the chair, I think -- is it in that paragraph --

2 Q. In the last paragraph --

3 A. I mean, the other issue which might have helped to
4 clear this up is that -- and I did not raise this at
5 the time, I thought about this issue quite a lot
6 over -- since then. In my opinion, The Haemophilia
7 Society did not deal with this internally properly and
8 either they assumed that Liz Carroll hadn't made this
9 comment, although she did issue a clear statement,
10 which I hope she's not now retracting, and I would
11 have thought that they would have held an internal
12 inquiry to identify exactly what happened and then
13 decide whether they should be taking any action.

14 But judging from an earlier email which you
15 screened, which I don't think I'd ever seen until the
16 last day or two, there seemed to be sympathy with The
17 Haemophilia Society trustees rather than having
18 a proper inquiry into what happened. If this had been
19 properly worked through and worked out there might
20 have been ways we could have had a *modus operandi*
21 rather than merely through the chair.

22 Q. Do you consider the way in which you, Ms Barlow and
23 the Macfarlane Trust Board handled this matter, and by
24 that I'm including reference to what is said in this
25 letter in terms of the way you were going to work with

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1 "... you should be aware that Liz Carroll
2 continues to be the CEO of the Society with the full
3 approval and support of our Board of Trustees, and in
4 operational matters it is generally appropriate that
5 she speaks directly with the Trust. I am confident
6 that she and Jan will be able to work together
7 professionally as needed in order to support the
8 people who are the beneficiaries of both our
9 charities."

10 Then he talks about the trust deed issue and
11 they then, in the last paragraph, says:

12 "I trust that a period of calm will help the
13 situation ..."

14 Did you, in response to this, as far as you can
15 recall, rescind the decision that had been made not to
16 worked with Mrs Carroll at all?

17 A. No, we didn't.

18 Q. Is it right that, as far as you are concerned -- I'm
19 not going to ask you to speak for Ms Barlow -- you did
20 not speak to Mrs Carroll again?

21 A. I might have seen her at one or two -- certainly one.
22 I think I might have seen her at an APPG meeting when
23 I just acknowledged her and, you know, nodded my head
24 or something. We never had a conversation.
25 I certainly didn't, as it were, snub her, but -- I had

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no need to.

One thing perhaps to add which may be helpful. As I said, Bernard Manson and I had a good relationship. We didn't meet that often but we had a good one. At some time afterwards, I can't recall how long, he stood down from the chair and a new chairman was appointed, whose name escapes me, who I think was based in the north-west, and I wrote to him soon after his appointment, the gist of my letter being that -- well, to congratulate him or whatever on his appointment, but to ask if we could have an early meeting.

Now, my intention there was to see if we could get some ground to move this forward. I think I got acknowledgement -- and I also suggested I'd be very happy to go to Manchester to meet him or for him to come to London. I think I got an acknowledgement but there certainly was no appetite to have a meeting with me and I never did. If that meeting had taken place, it might well be that there would be a way forward.

But the strength of feeling over all this with Jan Barlow as well as myself is it -- I really didn't have a propensity to try to persuade Jan to have any sort of relationship with Mrs Carroll.

MS RICHARDS: Sir, other than one or two final sweep-up

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with a view to making the changes with the Alliance House organisations and one thing which came out of that meeting was that a reference group would be set up which we agreed would not include any of the chairmen. So Christopher Pond, Peter Stevens and I were there, and Jan Barlow, and it was seen as a way of getting some -- a different perspective on the way forward.

Nothing happened for a while and then I was on the way to a meeting with Jan in the office on the train and I got a phone call from Christopher Pond saying could I nominate some trustees to be on that reference group, which -- so I think I must have asked him who was chairing it and he said he was. So anyway, a day or two afterwards, I got -- with a little bit of difficulty I saw the terms of reference which had no Macfarlane Trust trustees on at all, three or four, I forget the exact number, from the Caxton Foundation, various other people unknown to me from other organisations and I was actually not happy with that, not because I wanted to be on there, contrary to what the Macfarlane Trust Board subsequent minutes said, but we did agree that it would be a level playing field without any chairs on there, and with one of my colleagues chairing it, it really --

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questions, those complete my questions for Mr Evans, and I note it has just gone 1.00, so if we break for lunch now, the invitation is for recognised legal representatives and Core Participants to send to Ms Scott and myself over lunch any further questions that they wish us to consider.

SIR BRIAN LANGSTAFF: Yes.

Do you think 2 o'clock will give you sufficient time to field those questions?

MS RICHARDS: If we could say 5 past 2, I think an hour should be sufficient, yes.

SIR BRIAN LANGSTAFF: 5 past 2.
(1.04 pm)

(Luncheon Adjournment)

(2.05 pm)

SIR BRIAN LANGSTAFF: Mr Stevens.

MS RICHARDS: My questions are going to dot around from topic to topic because they reflect some further matters I have been asked to raise with you arising out of your evidence. The first is just about the end of your period at the Macfarlane Trust. What was it that led you to resign as chair from the Macfarlane Trust?

A. Well, we had had -- the Department of Health had called a meeting regarding how to plan the way forward

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I couldn't see how it would be able to give an objective view and how it would be possible to be able to justify to the Macfarlane Trust beneficiaries that, in fact, there was an objective way forward being looked at, particularly as I knew that Jan had been lobbying for the Caxton Foundation to take over Macfarlane Trust, and I just could not see how I could justify to the beneficiaries that that was the right way forward.

I suppose I had lost some trust in Jan, which was a great shame, because she and I had worked extremely well together and I did feel that I was being kept in the dark.

I was due to stand down as the chair, I think, the following July and, in fact, I was due to have stood down already. So I had agreed to an extension. So that was the reason but it was with sadness, as much as anything, that I decided to do it but I didn't see how I could justify what was being done with the beneficiary community.

Q. One issue the Inquiry is investigating is the question of what happened to what was left of the Macfarlane Trust's reserves and there's an issue over the transfer of those reserves to the Terrence Higgins Trust. That's after you left, but prior --

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1 **SIR BRIAN LANGSTAFF:** Are you just leaving the last --
 2 **MS RICHARDS:** I am, sir, yes.
 3 **SIR BRIAN LANGSTAFF:** I wonder if I could just ask you to
 4 go to your first witness statement, [WITN]3859001 at
 5 paragraph 41, I don't know which page it is.
 6 **MS RICHARDS:** The page before the end, Soumik.
 7 **SIR BRIAN LANGSTAFF:** 41. Now, I think Jan Barlow had
 8 a break, and then you say:
 9 "Soon after she returned it became apparent
 10 that, whilst she was away, plans were being developed
 11 for the future of the services behind my back,
 12 probably with her participation."
 13 Then you say you overheard her advocating to
 14 Department of Health officials that Caxton take over
 15 the Macfarlane. So this appears to think that you had
 16 lost trust, is one way of putting it, as you just have
 17 done. Did you think that she was, as it were,
 18 undermining you or --
 19 **A.** Well, yes, I did. I mean, that wasn't a practice I'd
 20 noticed with Jan before so I've -- as I said just now,
 21 I had a lot of time, really, but there was that period
 22 towards the end. She probably had a difficult time.
 23 There was a change of Chairman at the time and she'd
 24 been [redacted], but I did feel I was being
 25 undermined, yes.

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1 investigating in relation to the Macfarlane Trust is
 2 what happened to its reserves, its residual reserves,
 3 what was left at the end, and their transfer to the
 4 Terrence Higgins Trust. That was after you had left.
 5 My question is whether, prior to you leaving, you'd
 6 ever participated in any discussions about what might
 7 happen to reserves if and when the Trust was
 8 dissolved?
 9 **A.** No, I'm fairly sure there was no discussion I was
 10 involved in at all.
 11 **Q.** Now, I asked you before lunch about your reference to
 12 there having been a deteriorating relationship between
 13 the Trust and The Haemophilia Society over the
 14 12 months or so prior to your letter to Bernard
 15 Manson, and you referred to -- that, as I understand
 16 it, was based upon your understanding of Jan Barlow's
 17 meetings with Mrs Carroll.
 18 Did you have any understanding of how much
 19 contact Mrs Carroll and Ms Barlow had had over that
 20 12-month period?
 21 **A.** No. But I would have expected a -- either in person
 22 or telephone calls or emails -- quite amount -- quite
 23 a lot. I wouldn't like to quantify it. That would --
 24 I can't do that.
 25 **Q.** Can you recall anything specific that Ms Barlow said

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1 **SIR BRIAN LANGSTAFF:** You say that the plans were being
 2 developed probably with her participation. Now, that
 3 suggests you didn't actually know but you were coming
 4 to an assumption; is that right?
 5 **A.** Whilst Jan was off for a long time --
 6 **SIR BRIAN LANGSTAFF:** I don't think we need to go into any
 7 of the details --
 8 **A.** Okay, what I was going to say was she was off for
 9 a long time and I know that she was having contact
 10 with the chair of the Caxton Foundation but I made
 11 a number of attempts to speak to her because there
 12 were day to day matters that I wanted to talk about
 13 and somehow there was no contact, and that made me
 14 suspicious as to what was -- whether she was involved
 15 and what I described here.
 16 I had no evidence to support that.
 17 **SIR BRIAN LANGSTAFF:** So the evidence was simply that she
 18 wasn't in contact with you as much as she might have
 19 been.
 20 **A.** Well, he wasn't in contact at all for several months.
 21 **SIR BRIAN LANGSTAFF:** Yes, I see. Thank you very much.
 22 **MS RICHARDS:** The --
 23 **SIR BRIAN LANGSTAFF:** I'm sorry you will have to start
 24 again with the next question.
 25 **MS RICHARDS:** One of the matters that the Inquiry is

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1 to you about either Mrs Carroll or The Haemophilia
 2 Society which led to your conclusion that there had
 3 been a deteriorating relationship?
 4 **A.** Well, certainly there was the issue which she raised
 5 with me about the unwillingness of The Haemophilia
 6 Society to campaign to enable more money to be
 7 available. That certainly came up.
 8 **Q.** So Ms Barlow raised with you, as a result of her
 9 interactions with Mrs Carroll, what Ms Barlow
 10 perceived as an unwillingness of The Haemophilia
 11 Society to campaign for more funding; is that correct?
 12 **A.** Yes. I mean -- well, I -- just to get into context,
 13 if you were having a meeting or had spoken to
 14 Mrs Carroll, it would have been a casual -- when we
 15 had a catch-up meeting, I might have asked her how she
 16 got on or she might have said, oh, she'd had this
 17 meeting and so forth. So it was raised in that way
 18 rather than what might sound as a sort of formal way.
 19 **Q.** Did you ever raise this issue with Bernard Manson,
 20 with whom you said you had a good relationship, the
 21 issue of The Haemophilia Society not, in your view,
 22 campaigning sufficiently for more funding?
 23 **A.** Yes, I did, soon after he came into post.
 24 **Q.** Are you able to assist roughly when that was and what
 25 his response was?

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1 A. I would think 2012.
 2 Q. Can you recall what his response was?
 3 A. I think it was a neutral one. He listened to what
 4 I had to say and he was, to some extent, on a learning
 5 curve, as he put it, words to that effect. We had
 6 this meeting partly because he wanted to understand
 7 the community better and we met up somewhere and had
 8 a cup of tea together.
 9 Q. Was it something that you raised subsequently to your
 10 first meeting with Mr Manson?
 11 A. I can't remember. I'd expect I did but I cannot
 12 remember.
 13 Q. Then specifically in relation to the issue of the
 14 meeting on 29 January and the events that followed,
 15 did you obtain the approval of the Macfarlane Board of
 16 Trustees for the steps that were taken in terms of the
 17 sending of the solicitor's letters and the various
 18 letters that then flowed between solicitors?
 19 A. Absolutely, every step.
 20 Q. You referred yesterday to the loyalty you expected --
 21 well, or we looked at a document in which you had
 22 referred to the loyalty that you might expect
 23 Department of Health-appointed trustees to show in
 24 their decisions as Macfarlane Trust trustees. At the
 25 time of the dispute with Mrs Carroll, when there were,

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1 time, as they did, what, if anything, replaced this
 2 positive, face-to-face engagement with beneficiaries?
 3 A. Well, I can't talk for what happened between --
 4 I can't -- between about 2009 and 2012, whenever it
 5 was the first time they ceased. After the second one,
 6 we did not put anything in place after the Partnership
 7 Group meetings ended. I think there were four
 8 meetings, incidentally. I think somewhere it was said
 9 two, but there were four meetings at this second, sort
 10 of, wave of Partnership Group meetings. But after the
 11 chair, found it really not possible to managed those,
 12 I don't think we put anything else in place, and we
 13 probably should have tried to do something. I regard
 14 that as something we might have done better. But it
 15 was very difficult with some of the personality issues
 16 amongst the beneficiaries at the time.
 17 Q. When I asked you this morning about the grant
 18 application decision-making process and issues
 19 relating to means testing, you referred to a point in
 20 time at which "we" -- I don't know whether that was
 21 the NSSC or the Board but I don't think it matters --
 22 felt were some were buying luxuries on mail order.
 23 Against what criteria did the committee or
 24 trustees assess purchases as luxury?
 25 A. Well, I mean, it was not something where we had

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1 I think, two Haemophilia Society-appointed trustees on
 2 the board, and without mentioning any names, do you
 3 recall whether they supported the Macfarlane Trust
 4 instructing solicitors, or was there any disagreement
 5 within the Board as to the right course?
 6 A. What I recall is every step of action we took was
 7 supported unanimously by the Board.
 8 Q. Was the board meeting that discussed the issue of the
 9 letter and the legal proceedings, was that in person
 10 or was that done remotely?
 11 A. Well, there was at least one meeting in person because
 12 as soon as this came to light I convened a meeting as
 13 soon as I could, within the day or -- from when it was
 14 the day, it would be two days, it was that quick, so
 15 it was an extraordinary meeting. Whether I called it
 16 as a board meeting or had the board members there
 17 without it being a formal board, I cannot remember.
 18 But I think if you go through the board minutes at
 19 that time, probably in the private part of the
 20 minutes, I think you will find it well-documented.
 21 Q. So it should have been a minuted meeting in any event?
 22 A. Yes.
 23 Q. I asked you earlier about Partnership Group meetings.
 24 Once those Partnership Group meetings came to an end,
 25 whether for a short period of time or a long period of

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1 specific, shall we say, criteria but, for instance,
 2 more than one of our beneficiaries who claimed money
 3 was spending his money on some very expensive trainers
 4 for their children. It was that sort of thing where
 5 I don't think you can necessarily put a definition
 6 against suchlike but, I mean, it really came to a head
 7 when we had situations like that and people then
 8 couldn't afford to pay their utility bills or council
 9 taxes.
 10 I mean, not for us to decide whether someone
 11 buys an expensive pair of trainers but if it then
 12 impinges on their having other payment difficulties,
 13 then, clearly, if they are asking us to pay for them
 14 then we do have an interest.
 15 In situations like that, we did what we could
 16 to try and help people, as far as they wanted us to,
 17 to help with managing their financial affairs.
 18 Q. Who paid for the money management advisers to whom the
 19 Macfarlane Trust would require some applicants to be
 20 referred for financial and money management advice?
 21 How was that funded?
 22 A. Well, the Macfarlane Trust, going back a long way, had
 23 some sort of contractual relationship with those
 24 people. So when, say, a beneficiary was being helped
 25 in, say, that way then it would be paid from the

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1 Trust's funds. It wouldn't be something which would
2 be having to be paid for, for instance, by the
3 beneficiary.

4 Q. To what extent do you consider, over the years that
5 you were involved with the Macfarlane Trust, that the
6 children of those who were infected were adequately
7 supported?

8 A. Well, within the guidelines and suchlike, we had -- as
9 we talked about earlier, there were ways in which we
10 could support them. We would support them, which may
11 not be in the guidelines -- I can't remember -- we'd
12 support with, say, some secondary -- university-type
13 education, secondary education, buying computers and
14 stuff like that, things like that. So we did support
15 them in a lot of ways.

16 Q. Did the Trust ever, in the time that you were
17 involved, consider providing any form of support to
18 children who were now adults, once they'd completed
19 any tertiary education?

20 A. Well, I know there were discussions, certainly at the
21 NSSC when I was on there, about certain applications
22 which came in and whether it would be appropriate for
23 us to support them and I think many cases were rather
24 different. We didn't have a sort of cut-off age
25 where -- after when someone got to a certain age we

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1 fine, I'm not saying anything against that, but when
2 we had about 700 or so beneficiaries to support, when
3 we were financially tight, then the view of the Board
4 was that that was not, sadly, one we could continue
5 with.

6 Q. In the course of the questions I've asked you there
7 have been, I think, a couple of reference to the
8 culture of the Macfarlane Trust. I think it may have
9 come up when we were talking about the possibility of
10 an interim chief executive after Mr Harvey was unable
11 to continue. How were you characterise the culture of
12 the Macfarlane Trust during your time there?

13 A. Well, let me say, first of all, I enjoyed my time
14 enormously. I was very proud that I was able to be
15 part of helping a group of -- a particular group of
16 people with their problems. I mean, the culture was
17 very much one of wanting to give help and support to
18 the beneficiary community and, although I'm quite sure
19 some would disagree with that, I think we did that
20 extremely well within the constraints we were faced
21 with. Did we get everything right? I'm sure we
22 didn't. Couldn't be expected to get everything right.
23 But I think culturally our attitude was towards
24 supporting them and it was difficult when there was
25 a group of -- a relatively small group of people who

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1 wouldn't support them, but it did -- we looked at each
2 situation on its merits. I don't recall we had many.
3 We had a few, as I was alluding to just now, with
4 people wanting further education after school.
5 I don't think we had a huge number but we certainly
6 were very willing to consider and help with those if
7 appropriate, and we clearly had quite a lot from
8 secondary education.

9 Q. When I asked you about how you got to know Macfarlane
10 Trust beneficiaries, you referred to your enjoyment of
11 the weekends away. Why did funding for those weekends
12 come to an end?

13 A. Well, they came to an end when the Department of
14 Health was pressurising us on our budget, some of
15 which we talked about yesterday, and I know we
16 discussed at the board what the priorities were for
17 funding and it was very clear we needed to make sure,
18 regular funding, there was a grant budget there, and
19 several previous possibilities we stopped because we
20 felt we couldn't afford them.

21 I think one of the issues with the weekends
22 away is that -- and as I said, I welcomed them,
23 I thought they were very helpful, but with each one
24 there were probably 20 or 30 people there. Quite
25 often some of the same ones came, which is absolutely

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1 seemed to think that we were doing the antithesis of
2 that. It certainly wasn't the case.

3 What I think -- I don't know how far you want
4 to go into this now -- what I think was difficult was
5 the Macfarlane Trust was, in my opinion, good at
6 dealing with giving financial support to the
7 beneficiary community but when one looks at the
8 initial constitution, there was almost an add-on about
9 providing other support. Well, we were okay at doing
10 that with things like financial advice but what we
11 weren't really doing very well for the beneficiary
12 community was providing long financial support issues,
13 like, say, counselling and so forth, and we weren't
14 really equipped and probably didn't have the right
15 resources and probably not the right body to be doing
16 that.

17 So, sorry, that's a long answer, but the
18 culture was one of wanting to support the community,
19 and if you asked the 600 or 700 beneficiaries,
20 whatever the number was, I think you will find that
21 the vast, vast majority of those will say that we did
22 it to their satisfaction.

23 Q. When the issue arose relating to the letter tabled by
24 Mr Mishcon at the January 2013 board meeting, did you
25 consider your role as being one to try and understand

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1 the conflicting views of trustees on the letter, to
 2 try and mediate between contrasting views and resolve
 3 the conflict or offer an alternative solution?
 4 **A.** Well, I think a few things on that. I mean, it would
 5 have been helpful if Mr Mishcon had (a) given me
 6 notice he wanted to raise a letter and (b) to share
 7 the draft with me, and then we could have endeavoured
 8 to put together a letter which the Board might agree.
 9 But I don't think it would have been possible to
 10 mediate with a letter which required the signature of
 11 all nine trustee board members saying we'd resign if
 12 this is not -- we're not given more money, whatever
 13 the wording was. I haven't got it in front of me now.
 14 It wasn't that sort of letter.

15 And I was not prepared to sign the letter, as
 16 I already said, and say we'd had a majority -- I do
 17 believe we didn't have a majority. At the meeting
 18 only three people seemed to be in support. Even if we
 19 had a majority of, say, 5/4 or 6/3 or whatever, it
 20 still would not have been appropriate to ask those who
 21 were not happy with the letter still to sign it,
 22 because they were signing to resign.

23 **Q.** Just going back to something you said a few moments
 24 ago, Mr Evans, on my previous question, what's the
 25 factual basis for your view that the vast majority of

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1 **Q.** Did you ever seek the views of the Charity Commission
 2 or seek legal advice on the issues that were, to some
 3 extent, raised in that chain of emails we looked at
 4 yesterday, whether the Macfarlane Trust was a *de facto*
 5 arm of Government, what the powers of the Macfarlane
 6 Trust were, how it should manage its relationship with
 7 the Department of Health?

8 **A.** I can't recall that we did.

9 **Q.** In your applications to the Department of Health for
 10 more funding, did you ever seek to make the moral case
 11 that more should be paid because the needs of the
 12 beneficiaries had, unlike other demands on the
 13 Department, been created by the NHS?

14 **A.** Yes, and I think the Department of Health was very
 15 worried about being exposed to that.

16 **Q.** How was that moral case advanced? Was it in the
 17 written business cases or at meetings or otherwise?

18 **A.** It was certainly in meetings. Whether it was in
 19 written documents, I can't recall.

20 **Q.** Can you --

21 **A.** But the Department of Health were very clear of our
 22 position on that.

23 **Q.** Do you recall how the Department of Health responded
 24 to you when that moral case was articulated?

25 **A.** Well, they didn't like it, basically. I'm afraid I'm

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1 Macfarlane Trust beneficiaries would have been --
 2 I can't remember the precise words, but essentially
 3 happy with the way in which the Macfarlane Trust dealt
 4 with them?

5 **A.** Yes, there were -- they were another group who were
 6 very vocal, and they were very entitled to be vocal,
 7 who were -- who were not.

8 **Q.** Forgive me, let me make my question clearer.

9 What's the factual basis for your view, what is
 10 the evidence for your view, that the vast majority
 11 were satisfied?

12 **A.** I think if you -- several. One is my contact with
 13 beneficiaries at events like the weekend away.

14 I think that came out of the work which Kate did.

15 Kate Evans, as she was. There are some rather
 16 different results with the APPG survey, which as
 17 I said earlier on was very much welcomed. But we
 18 discovered with the APPG that it was possible, and
 19 indeed happening, that some people were actually
 20 posting their negative views more than once. So we
 21 didn't see is that being one.

22 But most people when we gave them money were
 23 grateful and they found the system one which supported
 24 to them. But it -- to some extent it was word of
 25 mouth. I'm very confident that was the situation.

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1 not sure what's the right word to use but -- so that
 2 they seemed to cower when it was raised. As I think
 3 I said in my -- one of my -- probably my evidence of
 4 4 February, that the Macfarlane Trust was a useful
 5 cushion for the Department with the beneficiary
 6 community and if we were to be seen in any way to try
 7 and expose them, which we did sometimes, if we did
 8 then the Department of Health found that very
 9 difficult.

10 **Q.** I asked you this morning about your involvement in the
 11 setting up of the Caxton Foundation. You have, in the
 12 course of your evidence and in your written evidence,
 13 articulated a number of concerns about the way the
 14 Macfarlane Trust was structured and set up.

15 Why was it that you then adopted a similar
 16 model for the Caxton Foundation in light of the
 17 difficulties you knew existed in terms of the
 18 Macfarlane Trust and its ability to manage properly
 19 the relationship with the Department of Health?

20 **A.** Well, we wanted and we were expected to set up the
 21 Caxton Foundation to pay money out to people with
 22 hepatitis C very quickly because -- and we wanted to
 23 do that. The sooner we could pay money, the better
 24 for the beneficiary community.

25 All we really had to fall back on was the

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Macfarlane Trust and much of the structure, I think, was fit for purpose, was satisfactory but not a lot could be improved. When I left the Caxton Foundation, then it was still a very underdeveloped structure and organisation and I think after that there would have been opportunities to make it better. But what we didn't have time to do was to do a more cerebral look initially at what might be another better organisation.

Q. In relation to the Macfarlane Trust, can you assist with this: in what circumstances were vouchers issued by the Macfarlane Trust in response to grant applications?

A. Well, I know -- I can't remember the detail. Vouchers were issued for, I think, two reasons. One was we had -- there was some arrangements where beneficiaries could get preferential prices because of negotiations which I presume the Macfarlane Trust had done to buy certain goods and I think white goods might have been one of them but I'm guessing, and some other beneficiaries who maybe found financial management difficult did, in fact, quite like the idea of vouchers for specific goods rather than giving them money to buy them.

I mean, I was never convinced it was a good

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picking it up a few lines down:

"The various options considered were ..."

Then the options include reaching a final cash settlement. Then:

"The short-listed options [are]:

"A final cash settlement ...

"[Or] To buy annuities with an insurance company ..."

And there are some estimated costings in relation to that.

Then if we go further down the page we can see:

"It was agreed that there was further work to be done and that the Long Term Funding Working Party should proceed to the second stage."

So that's October 2008.

If we then go to MACF0000012_131, please, Soumik.

This is also October 2008. It is not a meeting attended by you, Mr Evans, but it's a Department of Health Macfarlane Trust meeting. If we go to the second page, we can see under the heading "Long Term Funding", halfway down the page, there's reference to the "Trust had been carrying out some work".

It's said that in about a month's time they -- the work could be brought to the Department of Health:

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thing.

Q. In terms of the long-term funding issue, you referred in your evidence, I think yesterday, to having obtained an actuarial assessment and there being options considered for the long-term future of funding for the beneficiary community, and I just want to touch on that, perhaps pick it up with a couple of documents.

Soumik, if we go to MACF0000012_127, please.

I'm not going to go through all the documents that we have relating to it but I just want to try and work out what happened to the proposal. So, minutes of a board meeting, 27 October 2008. If we go to page 7, please, and we look at the bottom of the page, we can see there the heading "Long Term Funding Working Party". That's what you were talking about I think; is that correct, Mr Evans?

A. That's correct, yes.

Q. We can see that you present this agenda item as chair of the Long Term Funding Working Party, and then there's reference to a presentation and the tabling of a report from the actuaries and if we go over -- it's said there there's still further work to be done, it's a work in progress.

And if we go over the page, we can see there,

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"... graphs and other documents to support the need for payments to all the beneficiaries for the rest of their lives."

So there's a suggestion there that there's going to be a report submitted to Department of Health.

Then the third and final document before I ask you about this is MACF0000012_097, minutes of a meeting 26 January 2009.

If we go to page 8, please, Soumik.

If we look under the heading at the bottom of the page, "Long Term Funding Working Party", you're not present but we can see:

"... the Chief Executive reported on the informal meeting [you and he] had attended with [the Department of Health] on 3 December."

And there's reference there to having presented the Department of Health with a copy of the Long Term Funding Working Party's first stage report.

Then if we go to the top of the next page, we see:

"He [that's I think the chief executive] concluded by saying that officials had retained a copy of the report for internal discussion and that a follow-up telephone call made on 21 January confirmed

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1 that the DH were not totally averse to what had been
2 proposed."

3 Then there's the reference to:
4 "... sanctioning a second stage report by [the
5 actuaries but] only after the DH had responded with
6 their thoughts on the first stage report."

7 Then there's a discussion about the Partnership
8 Group's view.

9 It's not currently clear, Mr Evans, at least to
10 me, what happened thereafter. Are you able to assist
11 with whether this plan was then moved forward to some
12 kind of final consideration or second stage or whether
13 it got, essentially, set aside in the aftermath of the
14 Archer reforms?

15 A. The first document, Ms Richards, had four options and
16 I do recall that the four were -- the first one of do
17 nothing, we did not think was the right one, was not
18 viable. I know we looked at the insurance option and
19 there were difficulties with being able to do that.
20 It might have been with insurance companies. I cannot
21 remember. The first actuary did that for us.

22 The view which I'm fairly sure -- I am sure
23 would have been shared by the whole board but we
24 haven't got the minute of that one, was that the
25 Department or the Government should make very

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1 expectancy of Macfarlane or suchlike had continued *ad*
2 *infinitum*, and there's going to be at least the 2050s
3 before there ceases to be a beneficiary community of
4 primaries and 2080s before the widows and such -- and
5 other family members are not likely to be with us.

6 So I think it scared them, the sums of money,
7 and I think they were more prepared, by putting it
8 into the long grass, to worry about what would be
9 happening some time in the future rather than grasping
10 the issue now, which I think was a great shame.

11 Whether it reached ministerial level or not
12 I don't think I ever knew. So that's why we didn't go
13 on to the stage 2.

14 Q. Do you recall if the Macfarlane Trust ever got
15 a formal response from the Department of Health?

16 A. No, I don't. I think we got -- we may have got
17 a formal response. I'm fairly sure we got a response
18 at one of the liaison meetings where we've talked
19 about minutes earlier, but I could not tell you which
20 one. We certainly discussed the report at one of
21 those meetings.

22 Q. We can take that down, thank you, Soumik.

23 Just going back to the question of Ms Barlow
24 and something you said in your statement, you said in
25 your witness statement, Mr Evans, that in private you

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1 significant lump sum payments to each of the
2 beneficiaries, rather than continuing with the
3 existing arrangements. You may recall, I'm sure you
4 will recall, that the MFT was expected to have a life
5 expectancy until about 2012, so there was an issue
6 about that.

7 I think the figure which we configured in the
8 document to the DH was £100,000 to pay off. I know
9 when we had the discussion at the Partnership Group
10 meeting and the beneficiaries were asked to give views
11 on -- not beneficiaries -- yes, beneficiaries -- views
12 on how much they thought the -- would be an equitable
13 or justifiable pay off and some of the figures which
14 came out were much bigger than £100,000 and they may
15 be right, I'm not sure. I haven't got a view on that.

16 So when we put it to the Department "And this
17 is what -- if you paid out at least 100,000, this is
18 what it would cost", I think the total cost, I think,
19 scared them and I think they also picked up that if
20 the hepatitis C beneficiaries were taken into account
21 as well then they would be faced with a very, very
22 large bill.

23 So they kicked it into the long grass,
24 actually, but, I mean, one thing which we pushed with
25 them, which I think is still of great relevance is the

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1 encouraged Ms Barlow to soften her style, which you
2 described as a business-like style. Ms Barlow, when
3 asked about this by me, said she didn't know what that
4 referred to. Can you provide us with any further
5 assistance as to what, if any, concerns you had about
6 Ms Barlow's style, whether that, in particular
7 impacted upon her interaction with beneficiaries and
8 the respects in which you encouraged a change of
9 style?

10 A. Well, Jan was a great benefit to the Macfarlane Trust
11 and came in at a time where -- of great difficulty
12 because of what had happened with Martin and there had
13 been an interregnum and she -- so there was no chance
14 for her to meet with him.

15 She introduced much more efficient ways of
16 working that had been there before Martin, as I think
17 I used the word avuncular in my -- somewhere in my
18 statement, and that is probably is quite a good
19 description of him. But because Jan had this very,
20 sort of, proper way of doing things, shall we say, and
21 she wasn't -- you know, Martin if there was
22 a beneficiary who was upset about something or
23 disagreed he might well have a glass of wine with him
24 or something.

25 Now, that was not Jan's style and I empathise

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with that completely. So I think she was coming over as being rather intimidating to beneficiaries. She wasn't really but I think it came over that way with some of them and it was quite difficult because that was her personality and the way she worked.

But I put that in my statement. I don't know if I've ever said that to anyone else before because it was certainly part of our, you know, private -- several private discussions.

Q. Final two questions, Mr Evans, from me. Did your background as an NHS insider, someone who had worked within the NHS for many years, and your closeness to the Department of Health display itself in an undue reluctance to criticise or challenge the Department of Health?

A. Well, I don't think my -- in that context, I don't think my NHS background was relevant. I wasn't close within the Department of Health to those who were involved with the departments we were dealing with. I had met Ailsa Wight and possibly Rowena Jecock before, but the Department of Health is a very, very big organisation. I don't know how many thousands of people it employs, and I was mainly working with arm's length bodies and with a department they had in Leeds, although I did have some contact with the Chief

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Questions by SIR BRIAN LANGSTAFF

SIR BRIAN LANGSTAFF: Yes. I have one or two questions.

One of the problems with having so many questions addressed to you over a couple of days is we may lose focus quite easily on some things. So what I want to bring to light through your evidence to me is some of your underlying views and principles. You personally.

Now, as I understand it, you had a considerable sympathy with the people who were beneficiaries and you thought they had been wronged. Is that right?

A. Absolutely. Correct.

SIR BRIAN LANGSTAFF: So you thought they had a justifiable cause.

A. Correct.

SIR BRIAN LANGSTAFF: Indeed, you've expressed the view that you would like this Inquiry to result in compensation to them rather than a scheme of payments.

A. Realistic compensation levels, yes.

SIR BRIAN LANGSTAFF: You took the view that the Macfarlane Trust was, at the very outset, not fit for purpose. I think you've described it as: it was not the way in which the Government should have been administering funds to support the infected and affected. It should have been administering funding

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Medical Officer.

So there was no conflict of interest and I think there was benefits to the Macfarlane community that I did have some good understanding of the way the Department thought and operated and the way ministers likewise.

That was partly the bone of contention over the issue of whether we should be campaigning or what we should be doing to get more money, where I strongly, sincerely believed the way to do it was tough negotiating, not in a public way and I brought that, as it were, to my approach. Other people might have done differently, of course.

Q. Irrespective of the cause, so leaving aside any question of your background working within the NHS, do you think that your period of chairmanship was, as a matter of fact, characterised by an undue reluctance to criticise or challenge the Department of Health?

A. Well, I didn't -- I can't remember Christopher FitzGerald criticising the Department of Health or getting involved in campaigning, so I don't think my style was any different than the one I inherited.

MS RICHARDS: Sir, those are the questions I'm asking from Core Participants and recognised legal representatives.

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directly and not through arm's length bodies such as the MFT.

A. Correct.

SIR BRIAN LANGSTAFF: In fact, let's have a look at it.

It is your witness statement, your second witness statement, WITN3859002.

Can we go to paragraph 22, please, at page 6. It says:

"Understandably many [that's many of the beneficiaries] manifested anger and dissatisfaction at the form of action taken by Government. As I understand it, early on lump sum payments were made to those affected by the Government ..."

And you go through the outcome of a legal case, and you say this:

"... discretionary payments were made through what was termed an 'ex gratia' scheme, through the legal structure of charities registered with the Charity Commission. That is how the MFT and I think other AHOs were set up. I may be wrong but I have the impression, that with the early, grim, medical prognosis for HIV, successive Governments viewed this as a relatively short-term issue."

That is how you saw it, is it?

A. That's the impression I was given, yes. And I didn't

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1 -- (unclear: multiple speakers) -- I recognised it,
 2 yes.
 3 **SIR BRIAN LANGSTAFF:** You not only met but you liked quite
 4 a number of the beneficiaries you had met.
 5 **A.** Oh, hugely, and I liked probably all but certainly
 6 most of the ones who were putting critical criticisms
 7 of me.
 8 **SIR BRIAN LANGSTAFF:** You fully understood why they should
 9 criticise you given, as you put it in paragraph 22,
 10 that:
 11 "Understandably many manifested anger and
 12 dissatisfaction at the form of action taken by [the]
 13 Government."
 14 **A.** Yes. And in many respects the only place they could
 15 turn to to vent their feelings and anger about the
 16 Government and the Department of Health was the
 17 Macfarlane Trust, because we were between them and the
 18 department, which I thought was regrettable.
 19 **SIR BRIAN LANGSTAFF:** The way you have put it, at
 20 paragraph 24, if we can just scroll down, please,
 21 Soumik, the very last sentence of paragraph 24:
 22 "As I mention below [this summarises it], it
 23 felt as though the MFT operated as a 'punching bag' or
 24 'cushion' between the MFT beneficiaries and
 25 the ... Government."

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1 **SIR BRIAN LANGSTAFF:** Now, I've asked you for your views.
 2 I want you now not to regard this as a personal
 3 question but one in respect of the Trust itself.
 4 How satisfied are you that, within the five and
 5 a half years that you were chair of the board, the MFT
 6 (that is, not you personally but the Trust) actually
 7 demonstrated those views in practice?
 8 **A.** Well, quite a lot I will say on that, Sir Brian.
 9 First of all, if we can talk about some demonstration
 10 with money, because I think that's relevant.
 11 During the time I was the chair, we -- and with
 12 the MFET, we made available over £30 million. We made
 13 available -- I've forgotten the sum of money --
 14 a considerable sum of money for improvements to
 15 people's homes. And we advanced with much larger
 16 non-discretionary -- with non-discretionary payments,
 17 which meant that we at least reduced the need for
 18 beneficiaries to come with a begging bowl. And
 19 although that did not -- although we had not
 20 completely got rid of that, to some extent during that
 21 time we had made their -- given them more opportunity
 22 to make decisions on their own lifestyle and spending
 23 matters rather than having to come to us for
 24 relatively cheap things. I think we did that.
 25 I think we -- I think we -- probably give us

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1 **A.** That's right.
 2 **SIR BRIAN LANGSTAFF:** You thought that begging was not
 3 something which this group of beneficiaries should be
 4 doing?
 5 **A.** Correct. And it was one of the reasons why I thought
 6 the Macfarlane Trust being a charity gave the wrong
 7 connotation.
 8 **SIR BRIAN LANGSTAFF:** You thought that to subject them to
 9 a means test in order to receive something in their
 10 begging bowl was demeaning and humiliating?
 11 **A.** Correct.
 12 **SIR BRIAN LANGSTAFF:** That it wasn't right there should be
 13 something like an income and expenditure account
 14 setting out all those details simply as
 15 a pre-condition of payment?
 16 **A.** Correct. And some other much more intrusive questions
 17 which we were asking.
 18 **SIR BRIAN LANGSTAFF:** You thought their concerns needed to
 19 be taken seriously and properly addressed?
 20 **A.** Correct.
 21 **SIR BRIAN LANGSTAFF:** You accept the need that in dealing
 22 with the grants which you were able, within your
 23 means, to make as the Trust, that there was a need for
 24 clarity, transparency and consistency?
 25 **A.** Correct.

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1 5 out of 10 for our engagement on a softer basis with
 2 the beneficiary community than we were doing before,
 3 and I think the vast majority would accept that -- can
 4 I say -- we were on their side, and we want to do the
 5 best we possibly could. Of course, some didn't
 6 necessarily agree with what we wanted to do, others
 7 were never convinced we were on their side, although
 8 we were, and, of course, there were ways of wanting to
 9 do it differently, and this campaigning issue is
 10 probably the big one, and I think during the time
 11 I was chair I think -- you know, it was a great
 12 privilege being the chair -- I think a lot was
 13 achieved, and there's no way we -- anyone probably
 14 could have achieved everything. But where was the
 15 area in which we could have done better? It would
 16 have been relationship and communication with the
 17 beneficiary community.
 18 How could we have done that? Well, even now
 19 I'm not sure because it takes us back to the point
 20 about the anger and so forth which people had. But
 21 I'm sure there are things we didn't try which we could
 22 have done.
 23 I think almost to a person -- probably to
 24 a person actually -- whilst I was on the board, all
 25 the trustees who were there were committed to helping

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the beneficiary community. And occasionally there seemed to be suspicions that we were wanting to do them down in some way and that was definitely not the case. I would not have given -- and I'm grateful I did it -- eventually ten years of my life, voluntarily, working in what was not an easy environment, for lots of reasons, if I did not wish to do the best I possibly could in supporting them.

I think a reasonable job was done by the Board, obviously including myself, with dealing with grants and so forth. And we were only dealing -- we only had a budget between £2 million to £3 million a year, but I think within that we did a good job. And I'm also disappointed but there is a certain satisfaction with the work that I was able to do -- sorry, I'm being a bit personal, I beg your pardon, I realise what I've done now -- with the long-term working, I think we found a way forward which would have enabled not to have the situation, which may still be prevalent, and that's our strategy thinking, together with the part I played, partly when I was with The Haemophilia Society and Archer, in actually giving people a better living -- a wage.

SIR BRIAN LANGSTAFF: You saw a need, I think, as well, am I right in thinking, you saw a need for the fund, the

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Now, counselling and suchlike might not have been the order of the day in 1988, as much as it is today, but somewhere along the line it should have been recognised that there was a huge need for this population of people, in some cases much greater than financial need. But it was never dealt with.

SIR BRIAN LANGSTAFF: You believed, I have the sense but you can tell me if this is right or wrong, that you had a belief in the public sector and the ethic of service.

A. I've worked in the public sector since I was aged 17.

SIR BRIAN LANGSTAFF: That's not quite the same as having a belief in it.

A. Well, I would have left it -- yes, I have. I would have left otherwise, and I also have a belief in charities because I have, in terms of running charities and suchlike -- yes, very much I have a belief in public services. I think they are fundamental to the country.

SIR BRIAN LANGSTAFF: Am I right that, generally, you took the view that there was much more to be gained by constructive dialogue than by confrontation?

A. Absolutely. I don't want to go back on my evidence particularly, but I said, I think yesterday, it was never really clear by those who were advocating

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Trust rather, to deliver more than mere finance?

A. Yes. I mean, I've given it quite a lot of thought but I wouldn't pretend what I'm going to say is over-considered but either initially or some way down the track a few years I think what would have been -- would have dealt, with hopefully my fit for purpose statement, is that the Department or Government should have had a way of making payments in the right way more directly from Central Government.

An arm's length body might have been the way or it may have been in the Department. But I think together with that there should have been some other way of dealing with the other needs, and with that I include psychological needs and counselling, which the community badly needed and, to some extent, the manifestation of their feelings, I'm not using that as an excuse for all the problems we had, but the manifestation of their feelings was being levied at the Macfarlane Trust and we really were not in a very good position to do that.

Now, it might -- I knew quite a lot about HIV and AIDS in the 1980s because I was running a hospital at the time, where we had a number of patients, so I do know what stresses that would cause people, particularly if it was combined with haemophilia.

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campaigning what were we campaigning for, how was the campaigning going to be done, and who were we going to be campaigning with. So I could well see that if that had happened and taken place then it very easily become very rugged and unseemly and, in my experience, that is not the way you get governments to provide money.

Also, the Mishcon letter as we keep calling it, which we keep coming back, well, in my experience if you say to the Department -- Central Government, "Well, if you don't give us more money we're going to resign *en bloc*", they are not going to give you more money because someone else is going to come along and say the same, and the proper way is to reason and be tough with them, which we were, and there was a role which could have been better employed -- used by politicians, MPs, and I'm not entirely -- not particularly criticising them on that -- to lobby ministers and the Prime Minister along the -- through the years.

Reading the statement of witness 1122, who -- there were difficulties developed with our relationship but it's a man I knew well and is quite respectful of, there's a frustration coming through his statement where he's seen MPs and right up to when

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David Cameron was the Prime Minister and he was given a grounds for optimism with his colleagues along the way, and none of that came to fruition.

You know, he thought it was and so I think that -- I'm not sure, I'm talking quite a lot on this. So, yes, I'm very committed to public services and, sorry, this sounds very hackneyed and, actually, helping people who have problems and needs.

SIR BRIAN LANGSTAFF: And constructive dialogue is what you have been talking about --

A. Exactly.

SIR BRIAN LANGSTAFF: -- understanding the other person's point of view and putting your own in that context.

A. Correct, and that's in my DNA from my work. I mean, if the Macfarlane Trust had wanted to someone more cavalier in their approach then I wouldn't have been the person for the job.

SIR BRIAN LANGSTAFF: There may seem to some to be something of a conflict between your approach to the Department of Health, and the seeking of constructive dialogue so they understood your position, you understood theirs, and the approach which you took when dealing with those people who came in, in order to see the Caxton Trust, in what has been described as an intrusion. Leave aside how it's properly to be

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I recall, the grievances were about Caxton and they wanted to express their view that way.

What will I have done if it had been a Macfarlane Trust group of individuals? I've never really thought that through. It might have depended who they were, whether we had already heard the grievances. I think what you just said now would have been a mature and sensible way to have engaged with them but I partly come back to what I said in the other points to you just now, that the message doesn't need to get around that if you break into the office you are going to have a meeting with the Chairman. It needs handling quite carefully.

So, yes, that would be the importance, yes.

SIR BRIAN LANGSTAFF: The atmosphere at the time that you met Mrs Carroll, in general terms, I think it was this, was it, that Archer had not long since reported and there had been a change in the way in which money was being delivered, that Penrose was awaited with bated breath and that the APPG -- sorry, there was pressure on the Prime Minister, I think, at the time to make a statement. So the political mood music was moving towards something which might result in better achievement of the objectives which you've told us you sympathise with.

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described, it might be said that your approach to them was not that of constructive dialogue and seeking to understand their point of view; what would you have to say to them?

A. Well, they had no reason to have come into the office in the way in which they did. If they had issues they wanted to raise, then they should have done so in suggesting some proper meeting, instead of coming in and frightening the staff.

SIR BRIAN LANGSTAFF: I mean, the suggestion there might be that, in the light of your approach generally to people such as the DHSS from whom you wanted money, that those who wanted money from you or help from you, you might have taken a similar approach and understood why it was they were doing what they were doing, particularly since you've told me how you understood the anger and the frustration which many of the beneficiaries had, and you've been quite prepared, in your earlier answers anyway, to make allowances for those who tended to take their frustrations out on your personally.

A. Well, several points on that, Sir Brian. First of all, the people who came into the office, I'm afraid I don't know the numbers, with the exception of one, were all Caxton Foundation beneficiaries and, as

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Can you help, against that background and bearing in mind what you've said about your thinking that when the MFT was set up your assumption, your belief that it was something which was intended to be short-lived only, for no other reason than that the beneficiaries would have, at that time, a short lifespan, or would be thought to have, that you may have made some reference to that in passing, do you think, informally at the meeting, and it might have been misunderstood?

A. Definitely not. I would have fought away from making any point about life expectancy, and suchlike, because I would have seen it would have been a hot potato. What is suggested I don't believe anyway so -- no I --

SIR BRIAN LANGSTAFF: I follow that but you will understand that one of the things which I have to reflect on is whether there may have been something said along the lines of, well, of course the Trust was only ever set up for a short-term fix because, or the implication being as it was, or something along those lines, by somebody at the meeting and may have been misconstrued?

A. Well, it's not a comment I tended to make about the life expectancy of the Macfarlane Trust.

SIR BRIAN LANGSTAFF: Even though you had the --

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1 A. I would -- *(unclear: multiple speakers)* --
 2 **SIR BRIAN LANGSTAFF:** -- underlying view --
 3 A. I'm certain, almost certain -- I mean, I -- that
 4 I would not have said that.
 5 **SIR BRIAN LANGSTAFF:** Almost certain?
 6 A. Because -- well, I can't remember every word I said
 7 every meeting, you know, that's what I'm saying.
 8 "Almost certain", I'm not hinting that I might have
 9 said it. I mean, you know, I can't remember
 10 everything I said at an informal meeting what,
 11 5/6 years ago. That's all I meant. But rather than
 12 just being emphatic, I was very emphatic with
 13 Ms Richards' questions because that was absolutely
 14 true.
 15 As you probably gather, I do actually feel
 16 strongly about it. Do stop me, if you want to --
 17 **SIR BRIAN LANGSTAFF:** No, no --
 18 A. With that particular occasion, now, Jan Barlow did not
 19 make a statement and I did not, but Mrs Carroll has,
 20 it seems, said that Jan Barlow made the statement and
 21 not me. So if you just sideline the Jan situation for
 22 a moment, there is the chief executive of The
 23 Haemophilia Society writing a letter to the Minister,
 24 the Secretary of State, everybody else about me.
 25 **SIR BRIAN LANGSTAFF:** I --

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1 fundamentally.
 2 **SIR BRIAN LANGSTAFF:** Well, thank you much. Ms Richards
 3 do you have something more to ask?
 4 **MS RICHARDS:** I don't and I understand that Mr Evans'
 5 counsel does not have any questions that he wishes to
 6 ask. So, Mr Evans, is there anything further you
 7 would wish to say?
 8 A. No, I did want to make the remarks I made to Sir Brian
 9 about it being a privilege to be involved with the
 10 community for so long and also what I thought was
 11 achieved not just while I was the chair but also in
 12 the time when Chris FitzGerald was the chair. But
 13 I said that already.
 14 **SIR BRIAN LANGSTAFF:** Your evidence to us has been
 15 sometimes reflective. You have explained a lot of the
 16 difficulties. And sometimes we forget, particularly
 17 after a long day, that in the course of institutions,
 18 in the running of institutions, there are people at
 19 their heart and, taken together with the evidence of
 20 Ms Barlow, you have given us a sense of the different
 21 personalities involved here in Macfarlane and to an
 22 extent in Caxton, and you've helped us to understand
 23 who they were and how they helped the operations to
 24 move on.
 25 I think also we will, in that light, excuse you

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1 A. Well -- *(unclear: multiple speakers)* --
 2 **SIR BRIAN LANGSTAFF:** I've got that point.
 3 A. -- that was part of what my emotions were about. But,
 4 no, I only said -- well, I said about almost because
 5 what words do you use, you know. But I did not.
 6 **SIR BRIAN LANGSTAFF:** Now, the final question I've got for
 7 you is very different. It's just about the staffing
 8 arrangements. My understanding is that when the staff
 9 who had been working for MFT were transferred over to
 10 the Caxton Fund *(sic)* that was on the basis they would
 11 go on doing the same work, in broadly the same
 12 capacity, but now they would be managed by one manager
 13 who would manage both the Caxton and the Macfarlane
 14 interests. Is that a proper characterisation?
 15 A. More or less. I mean, for instance, there was
 16 a finance manager who was working for Macfarlane
 17 Trust, and also for Skipton and Eileen, and when the
 18 staff transferred in -- Caxton clearly needed some
 19 staff to do their work for which they paid. We did
 20 not pay anything for that.
 21 So, for instance, in that case the finance
 22 manager had an assistant so they worked as a team. So
 23 my recollection is that part of the finance manager's
 24 work then was Caxton, part MFT and whatever with the
 25 assistant. So jobs changed a bit but not

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1 for the odd error which you may have made, the one the
 2 last night, after a long day, about --
 3 A. Sorry about that.
 4 **SIR BRIAN LANGSTAFF:** -- where the reserves were. It's
 5 not -- it's an answer I shall have to ponder but there
 6 we are. These things do happen and you have had many
 7 questions to answer.
 8 A. I think I put that one straight this morning.
 9 **SIR BRIAN LANGSTAFF:** I hoped you would. All of us make
 10 mistakes. Some of them may be revelatory, some are
 11 not, and that's something which, as I say, I shall
 12 have to think about, but can I thank you for the
 13 generally helpful way in which you've given your
 14 evidence and how you have explained what your position
 15 was and how you sought to achieve your underlying
 16 philosophies through the Macfarlane Trust.
 17 A. Thank you. It's almost been a pleasure, Sir Brian --
 18 **SIR BRIAN LANGSTAFF:** "Almost".
 19 A. -- to be interviewed.
 20 **SIR BRIAN LANGSTAFF:** That word again. Thank you very
 21 much.
 22 A. Thank you very much.
 23 **MS RICHARDS:** Sir, we need a short break, ten minutes or
 24 so, to sort out the technical -- end this link, set up
 25 the link with Mrs Carroll.

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1 **SIR BRIAN LANGSTAFF:** Yes. You can explain to her that
2 the length of my question rather than the length of
3 the answers which had delayed us.

4 **MS RICHARDS:** Yes.
5 So I think we should be in a position to start
6 at 3.30.

7 **SIR BRIAN LANGSTAFF:** 3.30.
8 (3.19 pm)

9 (A short break)

10 (3.30 pm)

11 **SIR BRIAN LANGSTAFF:** Ms Carroll -- is it Ms or
12 Mrs Carroll?

13 **THE WITNESS:** Mrs.

14 **SIR BRIAN LANGSTAFF:** Mrs Carroll, I'm so sorry to have
15 kept you waiting. The questioning went on just a bit
16 longer. Part of the responsibility is mine, I have to
17 say. So I hope you haven't found it too unpleasant
18 twiddling your thumbs for a moment or two. Let me
19 tell you who you talking to you, but first of all, you
20 can tell us where you are; you are at home, are you?

21 **THE WITNESS:** I'm at home, yes.

22 **SIR BRIAN LANGSTAFF:** And on your own there or not?

23 **THE WITNESS:** My husband's here but in a different part of
24 the house.

25 **SIR BRIAN LANGSTAFF:** Right. Well, you are talking to

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1 voluntary sector management; is that correct?

2 **A.** That's correct.

3 **Q.** Before that, you worked as a nurse, including as
4 a cancer nurse?

5 **A.** That's right, yes.

6 **Q.** Broadly speaking, what were your roles and
7 responsibilities as the chief executive of The
8 Haemophilia Society?

9 **A.** The majority of my role was around ensuring that the
10 organisation, the staff team, were able to deliver our
11 charitable objectives, which were to support and
12 provide information and support to the people affected
13 by bleeding disorders across the UK. It also involved
14 advising the Board to ensure that we complied with any
15 governance compliance, working to campaign for better
16 access to treatment and care, ensuring that we met our
17 members' needs.

18 **Q.** Now, one of the areas with which you became concerned
19 in your first year as chief executive was the work
20 being undertaken by the APPG. Is that right?

21 **A.** Not concerned about their work but I think thinking
22 there could be more than they could do. In fact, they
23 asked me if they thought there was more they could do
24 to have more impact.

25 **Q.** Yes, "concerns" is probably the wrong word for me to

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1 a room in which there are, at the moment, six other
2 members of the Inquiry team apart from myself. One of
3 those is Soumik, in case you hear the name. He is
4 responsible for making sure that you have the right
5 document at the right time and highlights the
6 appropriate bit.

7 Beyond this room, though, is a much wider
8 audience who will be waiting to hear what you have to
9 say, and they number about 200 probably, okay? So
10 that's who you are talking to.

11 **THE WITNESS:** That's fine.

12 **SIR BRIAN LANGSTAFF:** Ms Richards, after you have been
13 sworn. Charlie will swear you.

14 **ELIZABETH CARROLL, affirmed**

15 **Questions by MS RICHARDS**

16 **MS RICHARDS:** Mrs Carroll, you took up your post as chief
17 executive of The Haemophilia Society in January 2014;
18 is that right?

19 **A.** That's correct.

20 **Q.** You stepped down from that role relatively recently.
21 When was that?

22 **A.** That was April, just over a year ago.

23 **Q.** That was your first chief executive role, your
24 statement tells us. Prior to that you'd worked for
25 a cancer charity and obtained a master's degree in

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1 have chosen, Mrs Carroll. You had some involvement or
2 provided some assistance in the conduct of the inquiry
3 by the APPG; is that correct?

4 **A.** Absolutely. I had suggested it could be an option to
5 gather information together in one place and I was,
6 sort of, working to support them to enable the APPG to
7 undertake the work, giving some guidance really.
8 **Q.** We can see that if we look at MACF0000022_028. Sorry,
9 that's an email from Mr Spellman to Mr Evans, trawling
10 through the Commons debate after the APPG report. If
11 we go to what's attached to it, the second page, we've
12 got the date there 15 January 2015 and we can see from
13 the top "Extracted passages from 3 hour Common Debate
14 following APPG Report". So that gives us the date,
15 I think, upon which the report was made public.

16 If we go to the next page, we can see about
17 a third of the way down the page the reference to
18 Diana Johnson, and reference is made to:

19 "... the Haemophilia Society, which provides
20 the all-party group's secretariat ..."

21 Then reference to you and your assistance in
22 conducting the inquiry and producing the report.

23 Is it fair to put it this way that the APPG
24 report had been one of the significant matters in
25 which you had some involvement in your first year in

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1 office?

2 A. Yes, that's correct.

3 Q. We can take that down, thank you.

4 Now, in that first year, prior to the meeting

5 you had with Ms Jan Barlow and Mr Roger Evans on

6 29 January which, as you know, I am going to be asking

7 you about, to what extent had you had dealings with

8 the Macfarlane Trust?

9 A. When I first came into my role, one of the things

10 I did was contact them to see if there was a way we

11 could work together, along with other organisations,

12 but it was -- one of the ways of working that I have

13 is to try and work in collaboration, so I know I'd

14 been in touch probably with Jan Barlow, I suspect, to

15 say is there -- can we meet, look at ways of working

16 together.

17 I know we'd met a couple of times. My

18 recollection is it was after partnership meetings --

19 before or after a partnership meeting that we both

20 attended to look at where we might have areas of work

21 we could work together, but it wasn't a frequent thing

22 for us to meet.

23 Q. When you say "partnership meetings" are you referring

24 to the Caxton Foundation Partnership Group there?

25 A. I think they were. I can't remember exactly whether

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1 was much of a relationship and there wasn't from the

2 moment I started. So it hadn't changed or

3 deteriorated in any way.

4 Q. In your witness statement you've referred to what you

5 thought how Ms Barlow saw her role and the MFT's role,

6 you've described learning that the MFT didn't lobby or

7 fund-raise but distribute the money it was given, and

8 I think you say you suspect but can't be sure that

9 Ms Barlow saw her role and that of the Macfarlane

10 Trust as managing Government funds rather than

11 advocating for the community.

12 Now, we've heard evidence in particular from

13 Mr Evans to suggest it was The Haemophilia Society's

14 role to campaign and advocate for the community.

15 Would you accept that The Haemophilia Society had

16 a campaigning and advocacy role in that regard?

17 A. Yes.

18 Q. Did anyone from the Macfarlane Trust approach you or,

19 to your knowledge, anyone else at The Haemophilia

20 Society and suggest that there was more that The

21 Haemophilia Society should be doing?

22 A. No, I don't remember that at all.

23 Q. Did you or anyone else at The Haemophilia Society

24 approach anyone at the Macfarlane Trust and suggest

25 that the Macfarlane Trust should be undertaking some

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1 it was Caxton or MFT but I'm fairly certain they were

2 Caxton meetings because I don't think there were MFT

3 meetings at that time.

4 Q. Certainly, I don't think we need to put it on screen

5 but I've got minutes of a Partnership Group meeting of

6 the Caxton Foundation in August 2014 at which both you

7 and Ms Barlow are present.

8 A. Yes.

9 Q. So in the course of the period from when you took up

10 your role in January 2014 to the meeting in question

11 on 29 January 2015, what's your best estimate of how

12 many times you and Ms Barlow had had meetings?

13 A. Two possibly. It was a very small number.

14 Q. Had you, prior to 29 January 2015, met Mr Evans?

15 A. Not that I remember. We may have met at an event but

16 not one to where -- in a way that I remember.

17 Q. Now, the Inquiry's heard or seen reference in a letter

18 written by Mr Evans in March 2015 to the chair of The

19 Haemophilia Society, Mr Bernard Manson, to there

20 having been a deteriorating relationship with The

21 Haemophilia Society over the preceding 12 months. Are

22 you able to cast any light on that? Did you

23 understand there to have been a deteriorating

24 relationship?

25 A. No, to be honest. There didn't feel like there really

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1 form of campaigning or advocacy?

2 A. I do remember asking whether there was anything we

3 could do to support any work they were doing in that

4 way, so to work collaboratively, and the response

5 was: no, we don't do that. And so I did ask why.

6 I remember asking, "Why would you not do that? That's

7 what many charities do."

8 MS RICHARDS: Sir, I think we might have a slight problem

9 with the connection.

10 Are you able to hear me Mrs Carroll?

11 SIR BRIAN LANGSTAFF: Mrs Carroll, can you hear counsel?

12 MS RICHARDS: I think Mrs Carroll's frozen on the screen.

13 SIR BRIAN LANGSTAFF: Yes.

14 A. I can, yes.

15 SIR BRIAN LANGSTAFF: You can?

16 A. I can.

17 SIR BRIAN LANGSTAFF: Right, we had you frozen for

18 a moment or two.

19 So do you want to go over the question again,

20 please, Ms Richards.

21 MS RICHARDS: Yes, the question I had asked was whether

22 you or anyone at The Haemophilia Society suggested the

23 Macfarlane Trust should be undertaking some form of

24 campaigning or advocacy. This is your answer as we

25 recorded it on the transcript, Mrs Carroll. You said:

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1 "I do remember asking whether there was
2 anything we could do to support any work they were
3 doing in that way, so to work collaboratively, and the
4 response was: no, we don't do that. And so I did ask
5 why. I remember asking, 'Why would you not do that?
6 That's what many charities do'."

7 Was there anything further that you wanted to
8 say in relation to that that we might have missed?

9 A. No, that was all I'd said.

10 Q. Now I want to then come to the meeting on
11 29 January 2015. What's your recollection of the
12 reason that meeting was taking place?

13 A. I remember from reading through the notes, rather than
14 actually remembering, that Mr Evans and Ms Barlow had
15 requested the meeting but I hadn't -- I didn't really
16 know what the purpose of the meeting was. I put
17 forward some points for discussion but I don't
18 remember ever having anything in advance saying "This
19 is why we would like to meet".

20 Q. This was, as far as you recall, the first time you'd
21 have had a meeting with Mr Evans?

22 A. Yes.

23 Q. What can you tell us from your present recollection
24 about the course the meeting took?

25 A. We had a discussion about the APPG report that had

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1 A. No, I don't.

2 Q. What then happened next, after the meeting?

3 A. The meeting was in our office. So, having shown them
4 out, the members of the team -- there were only three
5 or four on the staff at the time -- asked how it went
6 and I remember saying to them something to the --
7 words with the effect of, "Goodness, the thing that
8 lots of our members have told us about was said", and
9 that was really about the fact that the Government
10 were waiting for people to die and so less money would
11 have to be paid out.

12 Q. So that was something you passed on to office staff?

13 A. Yes. It sort sunk in by then.

14 Q. If we look then at a document which is the minutes of
15 a Board of Trustees meeting of The Haemophilia Society
16 on 14 February 2015, so a few days later.

17 It is WITN30780170, please, Soumik.

18 If we go to the second page we'll see the date
19 there, 4 February 2015.

20 Then if we go, please, Soumik, to page 5.

21 Bottom of the page, we can see an entry in the
22 minutes:

23 "The Haemophilia Society response to the recent
24 APPG inquiry report and upcoming Penrose Report.

25 "LC [that's you] was asked about The

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1 come out just a few days before and there had been
2 quite a lot of media work from that. We -- so we
3 talked a bit about that. We talked a bit about the
4 nomination potentially for a trustee from The
5 Haemophilia Society to the Macfarlane Trust board
6 because there was a vacancy that had come up, and we
7 talked about the upcoming Penrose Report and what may
8 come out of that.

9 Q. As you know, from what happened subsequently, you
10 wrote a letter in which it was suggested that
11 something in particular had been said at that meeting.
12 What's your recollection now of what was said and by
13 whom?

14 A. I remember quite clearly that Ms Barlow said, when we
15 were talking about the Penrose Inquiry reporting, that
16 it would be sensible for the Government to delay their
17 response to the Inquiry -- to the Penrose Inquiry
18 because more people would have died and there would be
19 less money to pay.

20 Q. Did you say anything in response to that?

21 A. I don't remember saying anything specific. I think,
22 from what I remember, it was something like, "Really?"
23 But it wasn't -- I didn't challenge it at that point.

24 Q. Do you recall any response or reaction from Mr Evans
25 to that statement that you say Ms Barlow made?

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1 Haemophilia Society's response to the APPG Report, and
2 some discussion took place about the challenges of
3 such research ..." et cetera, et cetera.

4 Then you say this:

5 "Jan and Roger felt it [that I think is the
6 APPG report] had given voice to people who were not
7 usually heard. However, they were concerned that the
8 Haemophilia Society might 'stitch them up'."

9 Where did that come from? Was that something
10 also that came from the meeting or?

11 A. Yes, I mean, that -- this report was of that meeting.
12 So it would have been something that was said in the
13 meeting.

14 Q. Then there's a discussion about thoughts on future
15 systems of support. Then, bottom of the page:

16 "The possible implications of the Penrose
17 report were then discussed and LC stated that this
18 would have an impact UK-wide and might bring things to
19 a head early in to the new parliament. The
20 Haemophilia Society would keep the pressure on whoever
21 is in government to make an announcement as quickly as
22 possible. Jan then expressed her opinion that the DH
23 should wait for as long as possible before making any
24 decision as more people will have died and there will
25 be less people to pay and fight for payment. LC did

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1 not comment on this point."
 2 Then it says -- so that's you, as I understand
 3 it, relaying to the Board of Trustees what you say
 4 Ms Barlow had said during the meeting?
 5 A. That's correct.
 6 Q. Then it says this:
 7 "The meeting ended with LC agreeing to report
 8 the conversation to the Board and revert to Jan and
 9 Roger about the Trustee nomination."
 10 When you referred to the meeting ending with
 11 you agreeing to report the conversation to the Board,
 12 do you mean the overall conversation rather than the
 13 specific statement that you say Ms Barlow made?
 14 A. Yes, absolutely. So what we talked about as a whole.
 15 Q. Because as I understand your statement, you are not
 16 suggesting you had any conversation at the meeting
 17 about what you think Ms Barlow said?
 18 A. No, we didn't have any conversation at the meeting.
 19 Q. There's then a discussion about term of office and
 20 trustee appointment. And then, if we go further down
 21 the page, to the bit in the bold print:
 22 "Actions:
 23 "LC to draft a letter on behalf of the Board to
 24 Jane Ellison MP copied to ..."
 25 And then we see who it is going to be copied

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1 Prime Minister making a formal public apology.
 2 You then, in the next paragraph, talk about the
 3 APPG report. And then you say this, you refer to
 4 having had:
 5 "... a great deal of contact with people
 6 affected by contaminated blood, and also occasionally
 7 meet with The Chief Executive and Chairs of the [MfT]
 8 and Caxton Foundation."
 9 Then you say:
 10 "Although we do receive mixed views on the
 11 organisations, the overwhelming experience of those we
 12 speak to is dissatisfaction, distress or anger at the
 13 way beneficiaries of the organisations are treated.
 14 Some of this is directed at the Department of Health
 15 in terms of the level of support provided, but much is
 16 focused on the lack of respect and understanding of
 17 the issues beneficiaries face by the staff of these
 18 organisations. This was also reflected in the many
 19 personal stories relayed by the MPs who spoke at the
 20 Back Bench Debate."
 21 Pausing there, and before we come on to, as it
 22 were, the disputed matter, is that a reflection of
 23 The Haemophilia Society's experience as a whole from
 24 those with whom it interacted, that it received
 25 substantial amounts of reports of dissatisfaction,

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1 to.
 2 "This should state our view that the current
 3 administration and system is not fit for purpose ..."
 4 Then you are also going to be drafting as
 5 letter to Jan Barlow about the issue of appointing
 6 trustees.
 7 So that's the broad discussion on 4 February.
 8 I just want to look, then, at the two letters that
 9 were drafted and dated 10 February, please,
 10 Mrs Carroll.
 11 WITN3078011. Next page.
 12 So this is the letter dated 10 February 2015
 13 that, as we saw from the board meeting, it had been
 14 agreed would be sent to the Minister of State.
 15 We can see that you say:
 16 "Following the recent publications of the APPG
 17 ... and the Back Bench Debate ... The Haemophilia
 18 Society Board of Trustees have asked me to write to
 19 you with our response."
 20 Then we see in bold print the view that:
 21 "... the current system of support provided by
 22 the five organisations ... is not fit for purpose."
 23 And the Society's view is there set out:
 24 "... they should be disbanded ..."
 25 There's then reference to the importance of the

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1 distress and anger at the way in which the
 2 organisations operated?
 3 A. That's right, yes.
 4 Q. Then we see what, for present purposes, is the key
 5 paragraph:
 6 "The experience of The Haemophilia Societies
 7 backs this up, including at a recent meeting between
 8 myself and the Chief Executive, Jan Barlow and Chair
 9 of the Macfarlane Trust Roger Evans, where they
 10 expressed the opinion that the Department of Health
 11 should wait before responding to Penrose so more
 12 people will have died and they will have less to pay
 13 out."
 14 Now, I will come back to that in a moment. You
 15 then say that in the next paragraph:
 16 "This does not, in our view, reflect the stance
 17 we believe a Chief Executive and Chair of a charity
 18 set up by the [DH] ... should hold."
 19 You say:
 20 "We have not taken this decision lightly as we
 21 know any change may cause distress to some people ..."
 22 Then you refer in the next paragraph to, again,
 23 the matter of a transformation of the system of
 24 support.
 25 Now if we go back to the paragraph that we see

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at the top of the screen, that is reporting, as I understand your evidence, Mrs Carroll, what you say Ms Barlow said at the meeting. Why do you use the word "they" when Mr Evans did not, on your account, say what's said here?

A. Absolutely, it was Ms Barlow that said it. What didn't happen at the time was Mr Evans responding in any way, saying, "That's not our perspective, that's not my thought". So there was almost -- there was no disagreement with that. And so the word "they" was what I used -- and the Board approved -- because it wasn't challenged in any way at that point. So it felt as if it was something maybe both of them thought or felt, because there was no challenge.

Q. On the basis of your recollection of the meeting -- and I think, Mrs Carroll, you know that that's disputed by both Ms Barlow and Mr Evans, but on the basis of your recollection, that this was something that was said by Ms Barlow alone, do you think with hindsight that the use of the word "they" and the association of this with Mr Evans was a mistake?

A. It might have been, yes. I could have been more explicit in the letter possibly, yes.

Q. That's the letter of 10 February to the Minister. If we then go on to WITN3078012, this is the separate

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they understood was that the Board of Trustees felt that the organisations were not fit for purpose. That was the issue that we felt was of the highest importance and probably had the biggest impact in our thinking and because I and many of the Board of Trustees had heard from many people over a long period and several times that the impression that they had was that people at the Macfarlane Trust were concerned that maybe waiting longer was the right thing to do, it didn't feel like it was the first time it had been said, it didn't feel like it was the biggest issue.

The most important thing was the fact that we were saying the organisations were not fit for purpose. So it wasn't a purposeful omission, it was more it didn't enter my or the Board's thoughts that we needed to put it in because that wasn't the overriding message we needed to get across.

Q. Now, the letter to the Ministers had been copied I think to a number of others, in fact, you say at the bottom of this letter that the letter that was going to be copied to the APPG, Alistair Burt and Shadow Health Ministers.

If we go to WITN3078013, and if go to the third page, I'm not going to go through the email communication here in detail, but is it right to

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letter you wrote to Ms Barlow, as agreed on my understanding of the Board minutes -- as agreed at the Board meeting, and it's on the issue of appointment of trustees, so we can see that in the second paragraph. You say in the third paragraph:

"I discussed with the Board our whole conversation, including your thoughts on possible outcomes with the Penrose Inquiry and your possible plans to write to the Department of Health ... We also discussed our response to the APPG report and recent Back Bench Debate."

You then talk about, in the next paragraph, how the majority of your members that you hear from are very unhappy and share interactions with Skipton Caxton and Macfarlane Trust staff with The Haemophilia Society, and then you refer to The Haemophilia Society's decision to write to the Minister and the Secretary of State to say that the Alliance House Organisations are not fit for purpose.

You don't mention in your letter to Ms Barlow her statement or the fact that that statement's been flagged up to the Minister in your letter to the Minister. Can you assist with why you didn't mention it in the letter to Ms Barlow?

A. The overwhelming and the key issue we wanted to ensure

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understand that these are email communications between The Haemophilia Society Board of Trustees on the question of whether your account of Ms Barlow's statement should be disseminated more widely; is that right?

A. That's right. That's what that chain of emails was about, yes.

Q. If we go to the next page, I think when we look at the third paragraph of your email, you were, it would appear from that, concerned that reporting Ms Barlow's statement, as you recall it, could cause distress, and so you were, is this right, reticent about sharing that more widely at this point?

A. I was. I was concerned about their beneficiaries hearing something like that because I thought it would be distressing to hear.

Q. But a debate took place amongst the trustees and the prevailing view was that it should be more widely publicised; is that correct?

A. It was, and one of the reasons for that was that one of the trustees pointed out it could come out as part of a Freedom of Information Request and so we should be open about what we say and so we may as well publish it.

Q. I think we can see that from WITN3078014. If we go to

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the third page, again I'm not going to go through the entirety of the email traffic, but we can see from this that by 22 February, you're emailing the Board saying "It seems the consensus is to publish", and you say "Having heard from everyone I think it makes sense", and then reference is made to transparency and also to the possibility of publication under Freedom of Information.

The letter was then published on the following day, 23 February 2015; is that right? Amongst other matters I think it went on The Haemophilia Society's website?

A. Yes, I think that date is correct and it was around lunch time it went up.

Q. So that's 23 February. If we next look at WITN00078015, and we go to the second page, and we look at the bottom half of the page, we can see you're sending an email again to the Board, it's dated 23 February, 4.39, so it's later that day and you're referring there to having had a call from Mr Evans. But before we look at what you say in the email what can you tell us about your recollection of that telephone call?

A. I remember him being very angry, shouting quite a lot. I remember him clearly saying that it wasn't true and

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calling Mr Manson. Then you record Mr Evans as saying:

"... I have forever damaged the good relationship between The Haemophilia Society and the Macfarlane Trust."

Do you recall him talking about the relationship between the two bodies?

A. I do. I don't ever remember the exact wording but yes.

Q. Now, if we then go, please, to WITN3078016, if we go to the second page, top of the second page, the bottom of the page is the email we've just looked at, we've got an email here from Mr Manson. So that's the chair of The Haemophilia Society, a couple of hours later to you, copied to the Board of Trustees, and he refers to having discussed it with you. What do you recall, if anything, about your conversation with Mr Manson?

A. My recollection is really about us thinking what's the best thing to do to reduce risk to the organisation and to give us time to talk to the Macfarlane Trust about what should happen next and get some legal advice because they had threatened that they would take action if we didn't do something quickly, so we thought we ought to get some advice, and that we should take the letter off the website, which is what

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Jan had definitely not said that. I also remember him saying "If it was said, it was me, sort of, recalling something I'd heard", or something like that. He told me that we had to retract the letter, we had to do it very quickly and, yes, he tried to call Bernard. I think I recall him saying he tried to call Bernard, who was the chair of The Haemophilia Society at the time.

Q. Then if we look at the text of the email you have said this:

"I just wanted to let you know I have just had a call from Roger Evans who is very angry about the letter we sent. He says it is libellous as this was not said, and if anything was said it was him recounting an anecdote."

Is that what you just told us?

A. Yes.

Q. Then you say:

"This is absolutely not true and Jan definitely was the person who said the government should wait before responding to Penrose so more people will have died and it will be cheaper and as the years go on there will be less people to fight."

Then you talk about what Mr Evans said about retraction and then, further down, reference to

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we actually did that day.

Q. So the letter was taken down and then I think it's right that something was published in its place on the website. Sorry, I'm just going to have to look elsewhere to get the reference for that. Soumik, it is -- you might need to go back into the documents for Mr Evans for this, Soumik. MACF0000022_026. So the date of this is 24 February 2015, so this is the next day. This is posted, is it, on The Haemophilia Society's website?

A. Yes, that's correct.

Q. It's described as a statement by you, and it says:

"We have been contacted by the Chief Executive and Chairman of the Macfarlane Trust with regard to opinions attributed to them in the letter from The Haemophilia Society to Jane Ellison ... They state that the comments in that letter which were attributed to their Chairman and Chief Executive were never made and categorically do not reflect the views of the Chairman, the Chief Executive or anyone else associated with the Macfarlane Trust. We wish to make clear that this was Mrs Carroll's impression of her recent meeting with Chairman and Chief Executive but we are happy to accept their assurance today that this is not the view of the Chairman or the Chief

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Executive."

What was the purpose of publishing this statement on the website, Mrs Carroll?

A. We had some legal advice by then and the advice was this is what we should publish. We had been asked to put a retraction or apology, I can't remember the words, on our website within 24 hours, and having taken legal advice this is what was suggested --

SIR BRIAN LANGSTAFF: May I just make an enquiry? The legal advice presumably was given to the Society, was it?

A. That's correct.

SIR BRIAN LANGSTAFF: Are we sure that no issue of legal professional privilege arises?

MS RICHARDS: I think we're fairly confident, sir, because Mrs Carroll is represented by The Haemophilia Society solicitors and the documents that have been exhibited to her witness statement which refer to the advice, as does her statement, have effectively come via The Haemophilia Society's solicitors.

SIR BRIAN LANGSTAFF: Very well.

MS RICHARDS: Perhaps Mrs Carroll can confirm whether that's the position.

A. Absolutely. We were willing to share these.

SIR BRIAN LANGSTAFF: Thank you.

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Mr Evans, did you receive any further direct contact from the Macfarlane Trust over this period of time?

A. No.

Q. Are you aware of whether Mr Manson received any further communications from the Macfarlane Trust?

A. I don't think he did because he would have said, I'm sure. So I don't think anybody did.

Q. If we go then to 26 February, WITN3078019, and we go to the next page, we can see this is a letter written by Wilson Solicitors, dated 26 February 2015. This is addressed to you. If we pick it up in the first sentence, we can see it said:

"We act on behalf of the Incorporated Trustees of the Macfarlane Trust, Roger Evans and Jan Barlow. This letter is being sent separately to The Haemophilia Society ... and its Chief Executive, Liz Carroll."

Then if we go to -- I'm not going to go through all of it, by any stretch of the imagination. If we go to the second page, and we look at the bottom half of the page, we can see the paragraph beginning -- the second main paragraph down on the screen:

"The Letter falsely states that at a recent meeting, Mr Evans and Miss Barlow ... 'expressed the opinion that the Department of Health should wait

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MS RICHARDS: So this was posted on 24 February 2015 and, again, there had been further, I think, internal deliberations amongst The Haemophilia Society trustees, which I'm not going to go to all of them. But, I think, picking up on what you just said, if we go to WITN3078018, and we go to the second page, the top email, which is dated 24 February, refers to you having spoken to a barrister and saying:

"... no doubt the right thing to do is publish a retraction ... There is a reasonable risk they would take it further and they have said on their website they have demanded this.

"The barrister is drafting something along the lines of my recollection is this is what they said, they dispute it so we will retract it as we don't want to harm the charity."

So is the conversation that you're relaying there what we see then reflected in the document that we just looked at on the Society's website?

A. That's right.

Q. Now, that was on 24 February. I'm going to go, in a minute, to the solicitor's letter that was sent to both you directly and to The Haemophilia Society, dated 26 February. Before I do that, other than the telephone conversation that you have relayed with

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before responding to Penrose [et cetera] ..."

Then, if we skip down over the next paragraph, we then see it says:

"The allegations are completely false and without any foundation and Mrs Carroll knows."

Then it said the allegations are seriously defamatory. Then if we go over the page and we look at the second half of the page again, we can see the paragraph, the second paragraph on the screen, recording Mr Evans, Ms Barlow's and trustees' distress and then saying:

"They are shocked that Mrs Carroll would make up such false allegations, but it is clear that she published the allegations knowing they were false and with malice. Nothing even Mr Evans or Ms Barlow said on 29 January ... could possibly have provided any basis for such a complete fabrication."

Then there is set out on the following page, if we just go to the following page, we can see the numbered paragraphs 1, 2, 3, 4. You can see what The Haemophilia Society and you were there being asked to do, which included at 4 retracting the false allegations and publishing "a clear, fulsome and unequivocal apology".

Then, if we just go further down the page

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1 please, Soumik, you'll see the longer paragraph in the
2 middle of the screen, Mrs Carroll:

3 "If tHS [The Haemophilia Society] and
4 Mrs Carroll are not prepared to take proper and
5 responsible action to remedy the damage ... our
6 clients will regrettably have to consider taking
7 further action, which may ultimately include recourse
8 to issuing legal proceedings."

9 Then further down, towards the bottom of the
10 page, it refers to a hope that The Haemophilia Society
11 and Mrs Carroll will act promptly and responsibly.

12 What, if anything, can you recall was your
13 reaction to the receipt of the letter, Mrs Carroll?

- 14 A. I was really surprised, in that I thought and the
15 Board of Trustees all felt we had done everything that
16 had been asked of us when Mr Evans originally
17 contacted me to say remove the letter from anywhere we
18 had access to and to publish an apology or retraction,
19 and I can't remember the wording. I think we felt
20 we'd done that. Having taken legal advice, our legal
21 team felt we had done that. So this was a huge
22 surprise and shock and the fact that it was addressed
23 to the Board of Trustees and me personally was also
24 a shock because I'd been acting on behalf of the Board
25 of Trustees many chief execs do.

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1 Then if we go in the same document, Soumik, now
2 to page 3, we can see then, about -- almost halfway
3 down the page, there's an email from you the following
4 day, 27 February. Again, it's to various members of
5 the Board of Trustees. You refer to having spoken to
6 the barrister and being told "we have a good case on
7 some points and not on others if it went to court",
8 and then you say in the first line of it:

9 "Thank you for your emails, I do understand
10 what you are saying and I know what I heard."

11 What do you mean by "I know what I heard"?

- 12 A. I think further down the email trail people were
13 saying, "You shouldn't" -- I shouldn't retract it
14 because people would then look and think, well, was
15 I not telling the truth if I had retracted it.
16 I think that's what the email was saying. But what --
17 when I'm saying "I know what I heard", what I meant
18 was I knew that that's what was said in the meeting
19 by Jan Barlow.
20 Q. Again, there are various email communications.
21 I don't think we need to look at the majority of them.
22 But if we go to WITN3078022, and we go to the second
23 page, we can see at the bottom of the page there's an
24 email from Mr Manson to trustees, copied to you. And
25 it's dated 27 February. You can see it's late at

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1 Q. Was it your understanding at the time that this might
2 result in legal proceedings being taken against both
3 The Haemophilia Society and you personally?

4 A. Having spoken to the legal team, that's what they
5 advised me.

6 Q. Then if we look at WITN3078020. We go to the third
7 page.

8 Again, there are a range of different email
9 communications between you and members of the Board.
10 You say -- sorry, Soumik, if we go to the last but one
11 page of this document first, so I can do it in time
12 order.

13 We can see if we look, just over a third of the
14 way down the page, there's an email from you,
15 26 February. It says:

16 "Dear trustees, this came today."

17 That, I think, is a reference to the letter
18 from Wilsons Solicitors. You say:

19 "I have spoken to Bernard and have a call
20 booked with the Barrister this afternoon. I have
21 removed everything from Facebook ..."

22 Then you talk about not being prepared to take
23 the personal risk and wanting to do everything asked.
24 Then you are going to speak to the barrister.

25 So that's 26 February.

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1 night:

2 "Trustees,

3 "Liz has spoken with our barrister and
4 exchanged emails twice today. The upshot is that we
5 had unequivocal advice that we should make a clear
6 statement that we now accept that Jan did not say what
7 was quoted, and that we apologise. If we did not do
8 this and they pursued us legally then the Society and
9 Liz personally, would be hugely at risk. No court
10 could be relied on to believe the evidence of a single
11 witness however credible against the testimony of two
12 witnesses, however tarnished."

13 Just pausing there, I just want to ensure that
14 I've understood this correctly: the advice you got was
15 to essentially settle and do what the Macfarlane Trust
16 had asked you to do because it was the word of one
17 against two. A somewhat crude summary but is the
18 effect of the advice that you had received?

- 19 A. Yes, and that the Macfarlane Trust had pursued this
20 quite aggressively and there was a feeling that they
21 wouldn't stop if we didn't do what was asked by them.

22 Q. Then we can see Mr Manson continues:

23 "I met with Liz today, and after discussion and
24 agreement I instructed her to follow the legal advice.

25 "I take responsibility for bypassing the board

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1 in taking this decision. I explain below why I did
2 this."

3 Then he refers to, if we go to the fifth
4 paragraph on that page:

5 "A minority of trustees have strongly argued
6 that we and Liz should fight this as a matter of
7 principle. My position is that while it is deeply
8 annoying to be made to apologise where we feel we have
9 done no wrong, this in itself is trivial compared with
10 the underlying issues around the reform of the trusts,
11 and we should concentrate on working with the APPG in
12 this and not be sidetracked into expending our
13 resources on a quarrel with individuals."

14 The next paragraph then refers to a fear that
15 if guilt was admitted there would be further pressure.
16 Next paragraph:

17 "Some trustees have also suggested that if we
18 stood firm, Roger would not press legal action. I am
19 sympathetic to this view, but as a charity trustee
20 I cannot risk exposing the charity to litigation costs
21 potentially in the hundreds of thousands of pounds
22 together with the possibility of our having to pay
23 damages, together with distracting the charity from
24 working for its beneficiaries. We have seen in the
25 last few days how much stress and how much extra work

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1 the decision, as chair of The Haemophilia Society, for
2 reasons he explains in the body of this, that The
3 Haemophilia Society should effectively retract the
4 earlier statement. Is that correct?

5 A. That's right. And it was taken into account the legal
6 advice but also the discussion that had taken place by
7 email, by the whole Board, where the majority --
8 I think there were only two trustees who didn't feel
9 that that would be the right course of action.

10 Q. So we see then the letter that was sent by The
11 Haemophilia Society's solicitors at WITN3078023 --
12 next page. Letter of 27 February 2015. Go further
13 down the page. So we can see it says:

14 "In the shared hope that it will be possible to
15 resolve this matter without recourse to costly and
16 time-consuming litigation, we are instructed to put
17 forward the following proposal in full and final
18 settlement of any claim ..."

19 Then we can see (1) is publication of
20 a retraction and apology, and some suggested wording
21 is enclosed. (2) is an undertaking not to further
22 publish the statement. (3) removal of the 24 February
23 statement. That's the proposal.

24 Now, again, I don't think I necessarily need to
25 go through all of the communications, but is this

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1 for Liz this incident has caused. This is simply not
2 sustainable."

3 Then if we go down to the next long paragraph:

4 "I appreciate that some people will see the
5 Society apologising to Jan and Roger as a betrayal of
6 those who have suffered from contaminated blood. With
7 the benefit of hindsight, we did damage this community
8 by including the offending passage in the original
9 letter and we are now in damage limitation. I am sure
10 most reasonable people will recognise our action now
11 as necessary prudence under legal pressure. We stand
12 by the rest of Liz's letter", et cetera.

13 Then he says -- next paragraph, he says:

14 "I am sorry if I have upset any of you by
15 taking this action without further consultation."

16 Next paragraph:

17 "The most important this we should be doing now
18 is supporting Liz. She has borne the brunt of the
19 pressure on this, and until the situation is resolved,
20 she continues to be under threat of being sued
21 personally."

22 Is this correct, and please do correct me if
23 this is wrong: following the receipt of the
24 barrister's advice, you and Mr Manson met and
25 discussed the issue, and it was ultimately he who took

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1 right -- and if you want to look at any of the
2 letters, Mrs Carroll, please say so -- there was some
3 further back and forth between the Society's
4 solicitors and the Trust's solicitors, not least about
5 the precise wording, and one of the issues was whether
6 the word "false" should be used or whether the word
7 "incorrect" should be used; is that right?

8 A. That's right, yes.

9 Q. Without going into all of it, I think we can see, if
10 we look at WITN3078026, and we go to the second page,
11 bottom half of the page -- so this is the solicitors
12 for the Macfarlane Trust, Mr Evans and Ms Barlow,
13 under paragraph numbered 3, second paragraph down:

14 "Our clients do not accept the replacement of
15 the word 'false' with 'incorrect'. The clear advice
16 we've received from Counsel is that the Letter
17 falsely, and without merit, brings into disrepute our
18 clients' reputation. Publishing the Letter was
19 reckless, as there was nothing that either Mr Evans or
20 Miss Barlow stated at their meeting with Mrs Carroll
21 ... which could possibly have provided any reasonable
22 basis for such an allegation. The allegation made by
23 your clients not correct; it is false and therefore
24 our clients insist that the word "false" remains in
25 the apology."

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1 If we go to WITN3078027, second page, this is
2 an email from you, Mrs Carroll, and you say in this --
3 you refer to having had this -- I don't know what the
4 "this" is -- back from the solicitors, but you say
5 this:

6 "If we agree to publish the apology with the
7 word 'false', not incorrect we are there with no
8 further costs/negotiating required. I know this was
9 one Bernard was insistent on, but as long as our
10 Barrister doesn't think it harmful, I would think it
11 sensible to go with this. Our members and those who
12 read the letter will know the truth."

13 So is this correct, Mrs Carroll, that you
14 agreed to the use of the word "false" in place of the
15 use of the word "incorrect", and is a reason for doing
16 that because of what's said there, "we are there with
17 no further cost/negotiation required"; in other words
18 it would resolve the dispute?

19 A. That's right. It was in agreement with several of the
20 trustees, and I think Bernard wasn't around at the
21 time because he was going away, and so I think it was
22 the Vice-Chair who discussed it with me and agreed it
23 was the right action, to stop this, so that there were
24 no further costs required.

25 Q. Then if we go to WITN3078028, and go to the second

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1 that we may have caused them."

2 So you and The Haemophilia Society both
3 apologised and accepted, in this, that what had been
4 said about the 29 January meeting was false?

5 A. That's right on the legal advice.

6 Q. Just before I come back to that, can I just ask you to
7 look at a couple of letters that followed the
8 settlement of the legal dispute, WITN3078029,
9 please -- next page.

10 This is a letter from Mr Evans to Mr Manson.
11 He refers in the second paragraph to the Macfarlane
12 Trust having had -- second paragraph, second line:

13 "... a long history of good relations with The
14 Haemophilia Society, but this as deteriorated over the
15 last 12 months, and the relationship has been deeply
16 damaged by what has happened in the last three weeks.
17 Consequently, at a board meeting on 6 March 2015, the
18 board of MFT reviewed the way it intends to engage
19 with The Haemophilia Society."

20 Then the next paragraph refers to the question
21 about The Haemophilia Society nominating trustees, and
22 Mr Evans says:

23 "... the Board has decided not to invite the
24 Haemophilia Society to nominate a replacement
25 appointment ..."

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1 paragraph, is this the text of the apology that was
2 then issued by The Haemophilia Society and by you?

3 It says:

4 "In a letter dated 10 February 2015 [et cetera]
5 we stated that at a recent meeting the Macfarlane
6 Trust's Chair and Chief Executive, Roger Evans and
7 Jan Barlow had advocated to Mrs Carroll that the
8 Government should delay its response to the Penrose
9 Inquiry so that more people would have died as
10 a result of contaminated blood products and the
11 Government would therefore have to pay lower amounts
12 of compensation to the victims.

13 "We now accept that Mr Evans, Miss Barlow and
14 the Macfarlane Trust did not express the opinions
15 attributed to them in our letter in that meeting and
16 that these do not reflect the views of Mr Evans,
17 Miss Barlow and the Macfarlane Trust.

18 "We take this opportunity to retract this false
19 allegation and to apologise unreservedly for any
20 distress and embarrassment caused to Mr Evans,
21 Miss Barlow and the Macfarlane Trust by the
22 publication of our letter. We have undertaken not to
23 repeat this false allegation.

24 "We also apologise unreservedly to the
25 beneficiaries of the Macfarlane Trust for any anxiety

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1 Then the next paragraph says this:

2 "Also as a result of recent events, the MFT
3 board has no confidence that there can be
4 a constructive relationship with your Chief Executive,
5 Liz Carroll, and MFT is not willing to work with her.
6 The MFT board has therefore agreed that any
7 communication between the board and Chief Executive of
8 MFT and The Haemophilia Society must be with
9 yourself."

10 Then before I ask you a question arising out of
11 that if we just look at Mr Manson's response, WITN--
12 sorry, that's his response to you. We may not have it
13 here but Mr Manson, we looked at it with Mr Evans this
14 afternoon, wrote to Mr Evans in, I think, April saying
15 that the Board of The Haemophilia Society continued to
16 have full confidence in you.

17 In relation to what's said in the last
18 paragraph of this letter, did you have any further
19 dealings with Mr Evans or Ms Barlow?

20 A. Not that I can remember.

21 Q. I think your statement says you didn't speak to either
22 of them again, not because you were choosing not to
23 speak to them but there was simply no further dialogue
24 between you or either Ms Ba Mr Evans; is that right?

25 A. That's right.

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1 Q. How did The Haemophilia Society manage its
2 relationship with the Macfarlane Trust from 2015
3 onwards until the point in time at which the
4 Macfarlane Trust was wound up?

5 A. As I said previously, there wasn't a huge amount of
6 contact anyway but if there were issues that were
7 brought to me by the beneficiaries of the
8 Macfarlane Trust, who were our members or members of
9 the community, where there asked me if I could help
10 with something or to contact the Macfarlane Trust
11 I would do that. But it would generally be by email.

12 If I ever did need to ring, I would ring the
13 main switchboard number for the Macfarlane Trust so
14 I would speak to whoever would be that would answer
15 the phone, whereas previously I might have asked
16 specifically to speak to Ms Barlow but I think if it
17 did arise after that I would have just rung the main
18 reception number.

19 Q. Now, Mrs Carroll you understand, I think, that both
20 Ms Barlow and Mr Evans say that at that meeting on
21 29 January 2015 Ms Barlow did not say what you say she
22 said, and they point to, amongst other things, the
23 apology and retraction that we looked at a few minutes
24 ago, which says that it had been a false allegation.
25 Do you have any comment in relation to that and are

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1 legal representatives have the opportunity to ask or
2 suggest any further questions.

3 **SIR BRIAN LANGSTAFF:** Yes.

4 **MS RICHARDS:** The unrelated matter I wanted to ask you
5 about is the question of what happened to the
6 Macfarlane Trust's reserves. You were still the chief
7 executive of The Haemophilia Society until, as you
8 told us, last year, so you were the chief executive at
9 the point in time at which the Macfarlane Trust ceased
10 operation and the new national schemes took the place
11 of the Alliance House organisations.

12 As far as you are aware did the Macfarlane
13 Trust ever approach you or any of your colleagues at
14 The Haemophilia Society on the question of what to do
15 with the reserves?

16 A. No.

17 Q. Was it ever brought to your attention, as far as you
18 can recall, prior to the Macfarlane Trust being wound
19 up, that a transfer of the reserves to the Terrence
20 Higgins Trust was proposed?

21 A. Not that I recall, until it was public.

22 **MS RICHARDS:** Sir, those are currently the questions
23 I have for Mrs Carroll but, as I say, it may well be
24 that recognised legal representatives would want to
25 suggest further questions.

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1 you able to tell us now what your account is of that
2 meeting on 29 January 2015?

3 A. I remember those words being said and the reason the
4 retraction and the apology took place was that legally
5 we were advised and I was advised that that's what we
6 should do, and the reason we chose to accept that
7 that's what we should do was the risk to the charity
8 in terms of cost. We didn't have the funds to fight
9 this. It could have brought the charity down and we
10 all felt that it was essential that the charity
11 continue to exist and, for me, personally, it would
12 have had a hugely damaging impact, potentially, if it
13 had gone further.

14 So it felt as if there was no choice but to
15 publish the retraction and the apology.

16 Q. It might be said, therefore, that on the basis of what
17 you say the true position is, the apology and the
18 retraction themselves contain a false statement.
19 Would you accept that and is there anything further
20 you would want to say about that?

21 A. I think that that is true and is quite difficult
22 because that's not at all how I would want to behave.

23 Q. Mrs Carroll, I have one further matter I want to ask
24 you about which is an unrelated matter and then
25 I think we will want to take a break so recognised

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1 **SIR BRIAN LANGSTAFF:** We will take a break. Shall I say
2 not before 4.45 and that means, I'm afraid, it may be
3 a few minutes after that but you will understand why.

4 A. Of course.

5 **MS RICHARDS:** Thank you, sir.

6 **SIR BRIAN LANGSTAFF:** So 4.45 at the earliest.
7 (4.33 pm)

(A short break)

9 (4.47 pm)

10 **MS RICHARDS:** Sir, there is just one further question I'm
11 asked to ask, that is why I am being discourteous
12 enough to have my phone out because that's how I have
13 received it.

14 Mrs Carroll, this is one question I have been
15 asked to ask you. Is it possible that Ms Barlow said
16 that the Government would delay making an announcement
17 so that more beneficiaries might die; in other words,
18 a prediction as to what the Government might do,
19 rather than saying that the Government should do that?

20 A. That isn't what I remember and it's not what I wrote
21 and said at the time, and so I think I would have
22 written what I recalled at the time in what I said.
23 But it's a possibility, I suppose, but I'm not sure
24 about that.

25 **MS RICHARDS:** Sir, that's the further question I was

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proposing to ask. Sorry. Thank you. No, that's the further question.

Questions by SIR BRIAN LANGSTAFF

SIR BRIAN LANGSTAFF: Just taking that just a little further, your exploration of the possibility, how soon after the meeting had finished did you make a note on anything in writing of what had been said?

A. I tended to write notes in my notebook fairly soon after meetings because I was going to be reporting to the Board on the meetings, so to make sure I got everything down and I didn't forget things. I tended to make a note very quickly, so I'd come out of a meeting, have a cup of tea, write things down, generally, is what I would do. So I would imagine that's what I did then. I don't remember exactly but that's what I tend to do.

So I should think quite quickly.

SIR BRIAN LANGSTAFF: So you don't always do it but you can't remember doing it on this particular occasion?

A. I don't always do it but I would say that it was highly likely that I would have done.

SIR BRIAN LANGSTAFF: When we come to the Board's first discussion about sending a letter, in the minutes of the board there's no reference to this having been said, even though there is in the letter which you

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A. I think it was reflective of things I'd heard a lot from our members and beneficiaries of the Trust. So it didn't stand out in the shocking way it seems when you hear it for the first time, if that makes sense. It was very reflective of things I had heard and so it wasn't completely -- almost, I'd say, not completely unexpected. I'm not sure that's quite the right phrase but I think the feeling at the time was, "Oh, goodness!", I think, probably more than anything else. And then, as I thought about it more, it's like, "Actually, that really is a terrible thing to say."

SIR BRIAN LANGSTAFF: Now, again, as chief exec, you will have come across grievance procedures and complaints. Presumably there's a policy in The Haemophilia Society for the staff dealing with such things?

A. Yes.

SIR BRIAN LANGSTAFF: The general run of grievance procedures and complaints procedures is that the advice is -- the very first step is to take up the issue with the person involved.

A. Yes.

SIR BRIAN LANGSTAFF: So if you had adopted that course, you would have written to or phoned or in some way contacted, even through a third party if you felt you needed to, the person whom you thought had said what

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subsequently drafted. Why not?

A. Our board minutes always contained a summary of what was discussed. It wasn't tending to ever have a sort of a word-for-word or a description of everything that was said, it was always a summary, and so it followed that practice. It wasn't seen as something so exceptional because I think there had been the sense that it was something several board members had heard similar themes of things being said before, that it wasn't noted as something that needed to be documented because it was so unusual and shocking that nobody had heard it before.

SIR BRIAN LANGSTAFF: Now, the second sort of line of questions, just to explore this, which you will understand that I have to do, you're a chief executive and you had worked as a nurse. You would, I suppose, be one of the first to understand that if someone says something which is objectionable, racist, sexist, demeaning of another, you call it out there and then.

A. I agree. And I think it took time for it to sink in and I didn't. I wish I had.

SIR BRIAN LANGSTAFF: Can you help, apart from saying, "Well, it took time to sink in", why do you think it took time to sink in rather than being something you responded to straight away?

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you said. You would have got in touch with Jan Barlow and said, "Look, I've been reflecting on this, this is what you said, did you really mean it? Because I don't think it's appropriate."

A. I haven't thought about it like that. And generally complaints are complaints made about you or the organisation. So I didn't think about that. It didn't enter my head in any way and I -- it clearly didn't enter any of the board members' thinking, because I think if they had thought that, they definitely would have suggested it. So I can't tell you why we didn't, apart from we didn't think about it.

SIR BRIAN LANGSTAFF: As a nurse, in your former career, you would have understood that the nurse's job is to be a patient advocate, in part. That's how they are often described. And that may involve saying pretty unpleasant things to a doctor who's out of order.

A. Yes.

SIR BRIAN LANGSTAFF: No question of hierarchy here; that's what your job is. Did you ever do that, do you remember, as a nurse?

A. I remember questioning why things had been the way they were or the way things were done; so I do remember, yes -- of a consultant, actually. I do

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1 remember that, yes.

2 **SIR BRIAN LANGSTAFF:** Did you take that up with the

3 consultant himself or herself?

4 **A.** I think, if I'm honest, I was quite junior at that

5 point and I reported it, sort of talked to the sister

6 on the ward about it much more than directly myself.

7 **SIR BRIAN LANGSTAFF:** And did you learn from that

8 experience that perhaps the appropriate thing to do is

9 to take it up with the person who's responsible in the

10 first place? You may get nowhere, obviously, but that

11 at least gives you a sound basis for going on. And

12 here, had you done that with Jan Barlow, you might

13 have had the response, "Well, I never said that, and

14 I certainly don't believe that", or, "Well, everyone

15 knows that", or whatever the answer might have been.

16 **A.** You may be right there. You may be right there.

17 I think we took it up in a way by passing it on to

18 the MPs, but you may well be right in that, yes.

19 **SIR BRIAN LANGSTAFF:** I mean, that's like going to the

20 press without going to the individual possibly.

21 **A.** Yes. And I'm very sad that we ended up in this

22 situation. And have learnt from this.

23 **SIR BRIAN LANGSTAFF:** Well, that's all that I'm going to

24 ask.

25 **MS RICHARDS:** Sir, might I go back just to one document

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1 or should it not?"

2 **SIR BRIAN LANGSTAFF:** Thank you very much.

3 **MS RICHARDS:** That's the only matter I wanted to clarify,

4 sir. Mrs Carroll is there anything further that you

5 would wish to add?

6 **A.** I don't think so.

7 **SIR BRIAN LANGSTAFF:** Can I thank you very much. It's not

8 easy evidence to have to give and we very much

9 appreciate you having given it. And it must be all

10 the worse having had to wait in order to come late on

11 a Friday to do that, so it's very much appreciated.

12 Thank you very much for that.

13 **A.** You're welcome. Thank you.

14 **SIR BRIAN LANGSTAFF:** Next week?

15 **MS RICHARDS:** Sir, that's it for this week. In terms of

16 hearings, we resume on Tuesday with the evidence of

17 Mr Mishcon at 10 and then the evidence of Mr Murray,

18 Mr Alasdair Murray, at 2.

19 **SIR BRIAN LANGSTAFF:** So 10.00 on Tuesday. Thank you very

20 much.

21 **(5.00 pm)**

22 **(Adjourned until 10.00 am on Tuesday, 9 March 2021)**

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1 just to clarify something arising out of it because

2 you asked a question about the minutes, and it's

3 really for the benefit of those listening so that they

4 follow. It's WITN3078010.

5 **SIR BRIAN LANGSTAFF:** Yes, I think it's at page 5.

6 **MS RICHARDS:** It is. If we go to page 5, because the

7 question and answer might have not been entirely easy

8 to follow for those who don't have the document. In

9 the minutes of the meeting on 4 February 2015, we can

10 see at the bottom of the page that the minutes do

11 record you reporting the statement that you say

12 Ms Barlow had made and in terms similar to those which

13 appear in the subsequent letter "should wait for as

14 long as possible". So it's in the discussion.

15 If we go over the page and look at the actions,

16 is this right, the actions themselves don't then make

17 reference to including this statement?

18 **A.** That's right, yes. That may then have happened -- the

19 draft letter went back and forth, as far as I remember

20 for Board of Trustees to sign off, so in those

21 discussions there may well have been "Should this

22 statement go in or not". I don't have access to those

23 now, so I don't remember, but I should imagine that

24 would be the point, in the sort of the draft of the

25 letter back and forth to say "Should this go in

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(78) yesterday... - yourselves