

## The UK's leading HIV and sexual health charity

20 July 2023

Eluned Morgan AM  
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Dear Eluned,

I am writing to you with reference to compensation for the infected blood community.

As you may know, when the Macfarlane Trust was wound up in 2018, Terrence Higgins Trust was gifted its remaining assets to continue providing support and advocacy for its service users. Since then, we have been working tirelessly with those who acquired HIV from contaminated NHS blood products to address the injustices now and over the last 40 years.

While some progress has been made in addressing the challenges faced by this community, this has come at an unacceptable pace. We are deeply concerned about the time it is taking to agree the shape of a UK-wide compensation framework. The lack of response to both the [Sir Robert Francis KC Compensation Framework Study](#) published in June of last year and the [Second Interim Report on Compensation](#) that the Chair Sir Brian Langstaff released this April this year is worrying. Continued delay has meant that people who have already had to wait decades for justice and compensation are continuing to die without seeing any resolution. This is not an acceptable situation and needs urgent resolution.

I am aware that you are engaged in work with the Cabinet Office around the framework for compensation for those infected and affected in Wales. I welcome this collaboration.

Today, I am therefore seeking clarification on your administration's position with regards to two recommendations – 16 & 18 – from the Second Interim Report.

**Inquiry Recommendation 16:** I recommend that the compensation scheme be delivered by one central body, appropriately resourced and staffed. Current support schemes should however continue to be provided as at present by schemes local to each nation.

**Inquiry Recommendation 18:** I recommend that a compensation scheme should be set up now and it should begin work this year.

Do you agree with Sir Brian's recommendations? If so, can you help us bring about their swift implementation? If not, can you please outline any points of difference you have and why?

We need to see urgent action for the people whose lives have been damaged by the impact of infected blood products administered to them by the NHS. We need it now.

I look forward to your response and hope we can make common cause on this issue.

Kind regards,



Richard Angell  
Chief Executive



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