Written Ministerial Statement

The content of this written ministerial statement is as received at the time from the Minister. It has not been subject to the official reporting (Hansard) process.

Department of Health

REFORM OF FINANCIAL ASSISTANCE FOR PEOPLE INFECTED OR OTHERWISE AFFECTED BY CONTAMINATED NHS BLOOD OR OTHER BLOOD PRODUCTS

Published at 2.30 pm on Thursday 22 December 2016.

Mrs O'Neill (The Minister of Health): Before heat treatment of blood products and a test for HIV were introduced in 1985, and a test for hepatitis C was developed and introduced in 1991, a number of people in the north of Ireland and Britain contracted hepatitis C or HIV or both as a result of treatment with NHS-supplied blood products including whole-blood transfusions.

In the north of Ireland around a hundred of these patients are living with hepatitis C, and a small number of these patients are living with HIV. Some are co-infected with HIV and hepatitis C.

In recognition of the special circumstances of these infections, a financial support package was set up in the late 1980s, initially for people who had been infected with HIV by NHS-supplied blood products, and their families. In 2003, a financial support package was set up for those also infected with hepatitis C, and there are now five ex-gratia payment schemes in operation.

These schemes have been reviewed with a view to making them better, and a public consultation led by the Department of Health in England was conducted in 2016. All beneficiaries in the north of Ireland were invited to respond to this consultation.

Having considered the options for reform I have decided to adopt the reforms that are being adopted in England.

There will be a single scheme. Its key features will be as follows.

- All infected individuals will now receive an annual payment. These annual payments will be linked to the Consumer Prices Index (CPI) and include the £500 winter fuel payment as a standard payment without the need to apply for it.
- Those infected with hepatitis C at stage 1 will receive a new flat rate annual payment of £3,500, rising to £4,500 from 2018/2019.
- For those with hepatitis C at stage 2 or those with HIV, annual payments will increase to £15,500, rising to £18,500 from 2018/2019.
- Those co-infected with HIV and hepatitis C at stage 1 will receive £18,500, rising to £22,500 from 2018/2019.
- Those co-infected with HIV and hepatitis C at stage 2 will receive £30,500, rising to £36,500 from 2018/2019.
- Discretionary support will continue and will be enhanced from 2018/2019.
- The £50,000 lump sum payment for those infected with hepatitis C stage 1 who progress to stage 2 will continue.
- Partners or spouses at the time of death of a primary beneficiary will be entitled to a £10,000 one-off lump sum where the HIV/hepatitis C infection contributed to the death of their partner or spouse. This will apply both to those who have already been bereaved and those who are newly bereaved.

Increased annual payments and new annual payments will take effect this year and will be backdated to April 2016. These payments will continue to be additional to any other income a person may receive, and are disregarded when calculating income tax and eligibility for other state benefits.

My officials will continue to work with the Department of Health in England and with the existing financial scheme administrators to provide the additional financial support as soon as possible to beneficiaries in the north of Ireland.

No amount of money could ever make up for the life-changing and tragic impacts that these events have had on people, but those people in the north of Ireland who have been adversely affected by NHS treatment with infected blood should be provided with the financial support that they need.