

From Nadine Dorries MP Minister of State for Patient Safety, Suicide Prevention and Mental Health

> 39 Victoria Street London SW1H 0EU

> > 020 7210 4850

18th June 2021

RE: Infected Blood Support Scheme Parity Agreement 25 March 2021

Dear Maree,

Thank you for your continued commitment to working to achieve parity of support for all beneficiaries of the respective infected blood support schemes across the UK. I am writing in relation to the parity agreement announced in the Written Ministerial Statement by Penny Mordaunt on 25th March 2021.

We announced in the WMS that 'We have agreed with health Ministers that any future changes to national schemes would be subject to consultation between the UK Government and devolved administrations.' By way of this letter, please accept this as confirmation of my commitment to working in consultation going forward.

I understand discussions are ongoing at official level, including with the Cabinet Office, to ensure arrangements are in place to enable any future changes to be made in consultation, without compromising the integrity of the individual devolved schemes and their ability to respond to the specific needs of their respective beneficiary communities in a timely way. This work has my full support.

The Department of Health and Social Care (DHSC) will fund the additional lump sum payments and the increases to annual payments for beneficiaries of all the UK infected blood support schemes, up to and including 2021/22. The funding to be provided for the period up to the end of 2021/22 will be up to £13.8mil. This funding is intended to support implementation of the parity changes announced in the WMS on 25th March 2021. Any further or additional changes to schemes will need to be agreed between the four nations, as outlined above with funding identified separately as appropriate.

I ask that we work together to seek funding for 2022/2023 onwards in the next spending review and that you work in good faith to secure sources of funding yourselves.

Annex A provides an overview of the purpose of the funding, while **Annex B** provides the agreed payment rates for 2021/2022.

Payment will be made by DHSC to the Devolved Administrations via invoice on a quarterly basis in arrears. Full details of how to claim payment will be advised to your officials.

Claims for payment should be supported by completing the monitoring report. An example is provided in **Annex C**. This will be provided as a working template to your officials. The information provided in this report may be passed to Cabinet Office or the Infected Blood Inquiry.

I am really pleased that we have been able to make significant progress in improving support for those infected and affected by contaminated blood across the UK and look forward to continuing to work with you on this matter in the future.

I am also writing a similar letter to Minister Robin Swann and Minister Eluned Morgan. I would be grateful if you could write to myself, Minister Robin Swann and Minister Eluned Morgan to confirm your commitment to working in consultation going forward to ensure parity across the UK infected blood support schemes.

Your faithfully,

NADINE DORRIES

MINISTER OF STATE FOR PATIENT SAFETY, SUICIDE PREVENTION AND MENTAL HEALTH

Annex A

Funding to be provided by DHSC in support of parity changes to Infected Blood Support Schemes

DHSC will provide funding in support of implementation of parity changes announced on 25 March 2021 by the Paymaster General. https://questions-statements.parliament.uk/written-statements/detail/2021-03-25/hcws895

Definitions:

Current scheme member (infected): Individual who was registered with EIBSS, WIBSS, SIBSS or NI Scheme on 25 March 2021 as an infected individual; or had applied to EIBSS, WIBSS, SIBSS or NI Scheme on or before 25 March 2021 and are subsequently accepted; or who previously registered with an AHO and re-join a current scheme; and were alive on 25 March 2021.

Current scheme member (bereaved): Individual who was registered with EIBSS, WIBSS, SIBSS or NI Scheme as a bereaved partner on 25 March 2021; or applied to EIBSS, WIBSS, SIBSS or NI Scheme on or before 25 March 2021 as a bereaved partner, or whose partner was a registered beneficiary with EIBSS, SIBSS, WIBSS, NI Scheme or AHO who died prior to 25 March 2021 and are subsequently accepted; and are living.

Deceased scheme member (infected): Individual who was registered with EIBSS, WIBSS, SIBSS or NI Scheme as an infected person who has died.

Deceased scheme member (bereaved): Individual who was registered with EIBSS, WIBSS, SIBSS or NI Scheme as a bereaved partner who has died.

Infected person: Individual infected with HIV/HEP C as a result of NHS treatment, the person who was the spouse/partner of a scheme member (bereaved).

New scheme member (infected): Individual who applies to join EIBSS, WIBSS, SIBBS or NI Scheme after 25 March 2021 and are subsequently accepted.

New scheme member (bereaved): The bereaved partner of a current scheme member (infected) who dies after 25 March 2021 or bereaved partner of an deceased infected person who would have been eligible to receive support had they applied or deceased scheme member (infected) who applies to join EIBSS, WIBSS, SIBSS or NI Scheme after 25 March 2021 and are subsequently accepted. The date of the first payment to a bereaved person shall be backdated to the commencement of that Financial Year in which the application was made, provided that the deceased passed away before the beginning of that Financial Year. If the Scheme Beneficiary passed away during the course of the Financial Year, the date of the first payment to the bereaved person shall be the date of death.

Posthumous estate: Executor or recognised representative for the estate, including bereaved partners, of an infected person who was never registered with EIBSS, SIBSS, WIBSS, NI Scheme or one of the AHO schemes, where no previous claims have been made.

Beneficiary estate: Executor or recognised representative for the estate of a deceased scheme member (infected).

Parity rate: Rates that apply for lump sums and annual payments following the parity agreement 25 March 2021 (see Annex B)

Existing scheme: Infected blood support schemes as they would have operated / rates which would have applied if the parity changes had not been introduced.

Start of scheme: The date at which the current operator began administering the scheme, the date that a current national support scheme came into operation.

Beneficiary	Payment type	DHSC Funding detail (see Annex B for scheme rates)	Applies to	DHSC funding exclusions		
Hepatitis C Stage 1 including Special Category Mechanism and Co-infected	Lump Sum	£30,000/each to bring total lump sum received by an infected individual to £50,000.	Current scheme member (infected). New scheme member (infected). Posthumous estates where the date of death is after 25 March 2021. Deceased scheme member (infected) where date of death is on or after 25 March 2021.	Lump sum payments which have been paid or would be due under existing scheme. Lump sum payments for deceased scheme member (infected) where date of death is before 25 March 2021. Posthumous estates where the date of death is before 25 March 2021 (rate at death to apply).		
Hepatitis C Stage 2	Lump Sum	N/A Parity changes do not require additional funding.				
HIV including co- infected	Lump Sum	Up to £57,000/each to bring total lump sum received to £80,500	Current scheme member (infected). New scheme member (infected). Posthumous estate claims where the date of death is after 25 March 2021. Deceased scheme member (infected) where date of death is after 25 March 2021.	Lump sum payments which have been paid or would be due under existing scheme. Lump sum payments for deceased scheme member (infected) where date of death is before 25 March 2021. Posthumous estate claims where the date of death is before 25 March 2021 (rate at death to apply).		
Bereavement	Lump Sum	£10,000/each	All deaths of current and new scheme members (infected) since start of scheme. Includes cases where sum not paid due to cause of death criteria and payments to beneficiary estates.	Payments that have been or would normally be made under the existing scheme.		
Those infected (all conditions)	Backdated Annual Payments	Difference between parity rate and existing scheme rate from the later of 1 April 2019 and effective date of registration to commencement of uplifted annual payment. Rates for financial year in question to be applied. Winter fuel to be included.	Current scheme member (infected). Deceased scheme member (infected) from 1 April 2019 to date of death.	Payments that would normally have been made under the existing scheme. Backdating beyond the date an individual joined the scheme. Deceased scheme member (infected) dying before 1 April 2019.		

	New Annual	Difference between parity rate	Current scheme member (infected).	Payments that would normally have
	Payments	and existing scheme rate. Winter fuel to be included.	New scheme member (infected).	been made under the existing scheme.
	Backdated	Difference between parity rate	Current scheme member (bereaved).	Backdating of payments to before date
Bereaved partners	Annual	calculated as 100% of infected	Deceased scheme member (bereaved)	of infected person's death.
-	Payments	person rate for Year 1 and 75%	latter of 1 April 2019 or date of	Payments that would normally have
		of infected person rate for	bereavement to date of their death.	been made under the existing scheme
		subsequent years and existing		including discretionary Income Top-Up
		scheme rate.		but excluding other discretionary
				payments.
		Year 1 starts on the latest of 1		Deceased scheme member (bereaved)
		April 2019, start of financial		dying before 1 April 2019.
		year in which partner applied to		Winter fuel payments.
		join scheme, or the date of		
		bereavement.		
	New	Difference between parity rate	Current scheme member (bereaved).	Payments that would normally have
	Annual	calculated as 100% of infected	New scheme member (bereaved).	been made under the existing scheme.
	Payments	person rate for Year 1 (as		Winter fuel payments.
		defined above) and 75% of		
		infected person rate for		
		subsequent years and existing		
		scheme rate.		

Annex B Summary of infected blood scheme parity rates.

Beneficiary	Payment Type	Rate		
		2019/20	2020/21	2021/22
Hepatitis C stage 1/ chronic	One-off lump sum payment	£50,000 (cumulative)		
	Annual payment	£18,458	£18,772	£18,912
Hepatitis C stage 1 'plus'	One-off lump sum payment	No additional payment.		
Includes Special Category Mechanism (EIBSS),	Annual payment	£28,000	£28,476	£28,680
where life is severely affected (SIBSS), Enhanced				
Stage 1+ (WIBSS), "enhanced support" (NI				
Scheme)				
Hepatitis C stage 2/ advanced	One-off lump sum payment	£20,000 (£70,000 for new entrants at Stage 2)		
	Annual payment	£28,000	£28,476	£28,680
HIV (new applications due to HIV infection are	One-off lump sum payment	£80,500 (cumulative)		
unlikely)	Annual payment	£28,000	£28,476	£28,680
Co-infected: hepatitis C stage 1 and HIV	One-off lump sum payment	HEP C Stage 1 + HIV lump sum (cumulative £50,000+£80,500=£130,500)		
	Annual payment	£38,000	£38,646	£38,928
Co-infected: hepatitis C 'plus' and HIV	One-off lump sum payment	No additional payment		
	Annual payment	£44,000	£44,748	£45,072
Co-infected: hepatitis C stage 2 and HIV	One-off lump sum payment	HEP C Stage 2 + HIV lump sum (Additional £20,000 if moving to Stage 2,		
		cumulative £70,000+£80,500=£150,500)		
	Annual payment	£44,000	£44,748	£45,072
Winter Fuel Allowance	Single annual payment for	£531	£540	£544
	infected beneficiaries			
Bereaved partners/ spouses	One-off lump sum payment	£10,000 (can also be paid to deceased's estate).		
	Annual payments	100% of annual payment infected person would have received in Year 1 and		
		75% for subsequent years.		

Ministear airson Slàinte Phoblach, Slàinte Bhoireannaich agus Spòrs Maree Todd BPA



Minister for Public Health, Women's Health and Sport Maree Todd MSP

T: 0300 244 4000

E: scottish.ministers@gov.scot

Nadine Dorries MP Minister of State for Patient Safety, Suicide Prevention and Mental Health psnadinedorries@dhsc.gov.uk

Your ref: Infected Blood Support Scheme Parity Agreement 25 March 2021 20 July 2021

Dear Nadine,

RE: Infected Blood Support Scheme Parity Agreement 25 March 2021

Thank you for your letter of 18 June 2021 about parity of support for infected blood scheme members.

I am grateful for your written confirmation of your Department's commitment to provide funding of up to £13.8 million to the Scottish Government this financial year to cover the additional costs of delivering the parity payments via the Scottish Infected Blood Support Scheme (SIBSS) for 2019-20 to 2021-22. I am also grateful for the work that your officials have put into finalising this agreement.

In relation to funding for future years, as you will be aware the Scottish Government and the other devolved administrations had entered into the discussions and confirmed our support at very short notice in March to the parity agreement and only did so on the understanding that the UK Government would be providing funding for our additional parity-related costs until at least 2025-26. Scottish Government officials will be happy to support your officials in seeking funds from the Treasury via your upcoming spending review to cover these extra costs for SIBSS. However, even if this bid to the Treasury is not successful, we would expect the Department for Health and Social Care to continue to underwrite this funding until 2025-26, along with the annual funding we currently receive from DHSC for payments for those beneficiaries with or affected by HIV. This will help avoid any uncertainty for beneficiaries about whether their increased payments continue to be guaranteed in the future.

Tha Ministearan na h-Alba, an luchd-comhairleachaidh sònraichte agus an Rùnaire Maireannach fo chumhachan Achd Coiteachaidh (Alba) 2016. Faicibh www.lobbying.scot

Scottish Ministers, special advisers and the Permanent Secretary are covered by the terms of the Lobbying (Scotland) Act 2016. See www.lobbying.scot

Taigh Naomh Anndrais, Rathad Regent, Dùn Èideann EH1 3DG St Andrew's House, Regent Road, Edinburgh EH1 3DG www.gov.scot







Unfortunately, due to significant pressures on the Scottish Government's budget, it will not be possible for the Scottish Government to fund these extra costs itself. Since 2016, we have invested significant extra funding to support SIBSS beneficiaries (with our funding for infected blood payments having more than trebled since 2015-16), but we do not have the funds available to increase this budget further at the moment.

I am happy to confirm my commitment to working in consultation with you and Welsh and Northern Irish Ministers and officials going forward to support parity across the four UK infected blood support schemes. As you will be aware, while the Scottish Government has been keen to support increased parity of payments to reduce any unfair or unjustified disparities between the four schemes, there are of course some differences in how SIBSS has developed which we will wish to retain. Therefore, while we would want to maintain flexibility to ensure we can continue to make our own decisions where appropriate if Scottish stakeholders' priorities differ from those elsewhere, I very much support the process of ensuring we consult one another before confirming or announcing any future changes to allow us to maintain or increase parity wherever possible.

I hope we can continue to work together to make improvement to financial and non-financial support for those infected or affected by infected blood and to respond jointly where appropriate to any recommendations the Infected Blood Inquiry makes. I am copying this letter to Eluned Morgan MS and Robin Swann MLA.

Yours sincerely,

Maree Todd MSP

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