## The Infected Blood Inquiry weekly summary



## A summary of inquiry hearings: week of 14 November 2022

In this final week of oral evidence, 16 expert witnesses gave their views on a range of issues, including vigilance in monitoring blood and blood products, guidelines for the medical profession and the civil service and how licensed medical products are monitored. **Professor Mark** Bellamy, of the Serious Hazards of Transfusion (SHOT) steering group, estimated that 1 in 300 'near-miss'

medical mistakes were not reported. which made it difficult to improve systems before things seriously went wrong. Almost all the experts said the Covid pandemic had disrupted their work. Scotland's target of eliminating hepatitis C by 2024 will probably not be met for this reason. Dr Susan Hopkins, Chief Medical Advisor for the UK Health Security Agency,

said Covid had brought the importance of detecting. analysing and responding to infectious diseases into 'stark focus'. Professor Colin Melville of the General Medical Council explained how doctors were trained and monitored. They were encouraged to 'have a conversation' with patients, not 'inform' them about what to do. he told the inquiry.

## Inquiry focus: what happens next?

This week marked the end of oral evidence, but the inquiry set out a great deal of work which will take place in the next few weeks. Reports are being prepared on a variety of topics, including some haemophilia centres, use of factor IX and the global picture on contaminated blood. The next deadline is 16 December for written submissions on what findings of fact and recommendations core participants believe Sir Brian Langstaff should include in his final report. Anyone wishing to submit a statement about their personal experiences must now do so before 31 December 2022. The last hearings will begin on 17 January with submissions from lawyers on behalf of core participants. The final day of the inquiry will be 3 February 2023. Sir Brian paid tribute to the 'impressive' support he and his team have received from those infected and affected. He said: 'It is a tribute to the sense of community, resilience and patience that you have continued... to support one another and to give this the inquiry the support it needs to complete its task.'

## Quotes of the week

'All at the civil service leadership are very committed to acting on the findings of the inquiry and learning all the possible lessons and applying them in practice.' Alex Chisholm, Chief Operating Officer for the Civil Service

'You must work in partnership with patients, sharing with them the information they will need to make decisions about their care.'

Good Medical Practice guidelines from the General Medical Council

'If you want a system which is robust, which is going to stop the real harm taking place, you're not going to do that by waiting until real harm occurs. You need to recognise the patterns beforehand.'

Professor Mark Bellamy on the importance of reporting 'nearmiss' mistakes in the NHS

'I think many clinicians outside the blood transfusion area really don't consider transfusion-related risk as a major issue and I think complacency is a problem.' Prof James Neuberger

'I think it's important just to be utterly straight'.

Prof Jonathan Van-Tam on giving advice to ministers