On 5 July 2018 I wrote to the relevant heads of the NHS in the UK to request that no documents, files or paperwork that may be of interest to the Inquiry be destroyed. I wrote again on 12 December about the delays some people have been experiencing accessing medical records and asking for action.

In Scotland, Wales and Northern Ireland the Inquiry's request was circulated to all NHS Trusts, Foundation Trusts, Health Boards and other statutory bodies within those countries.

The Inquiry has learned, through the diligent work of Jason Evans and Factor 8, that this did not occur within the NHS in England. I am grateful to Jason Evans for bringing this matter to my attention.

NHS England apparently interpreted my request as applying only to itself as a stand-alone organisation. It is disappointing both that this narrow approach was taken when NHS England presents itself as leading the National Health Service in England, and that NHS England did not tell the Inquiry that it did not intend to pass my request on to Trusts, Foundation Trusts and Clinical Commissioning Groups.

Those people participating in the hearings – whether in London, Belfast, Leeds, Edinburgh, Cardiff or following at home – should not have to worry about accessing medical records, nor about current NHS record keeping, whatever criticisms there may be of its record keeping in the past.

In these circumstances, and to avoid any further delay, I have instructed the Solicitor to the Inquiry to contact each NHS Trust, NHS Foundation Trust and Clinical Commissioning Group in England direct, rather than now relying on NHS England to do so. We will request and require that each Trust and Group retains all relevant documents and waives fees for people seeking copies of their medical records. I will also seek to determine whether any relevant documents (and if so which) are likely to have been destroyed in the meantime. I look for the fullest co-operation from NHS England in this.

I am being told that the great majority of people at the heart of this Inquiry have for years felt that they have been ignored, and that when they ask for information or explanation, are met with a wall of silence. Many have complained about being kept in the dark. I am determined that the Inquiry itself should not be a body against whom such allegations can be made. Whoever the participant is, whether a person, organisation or official body, trust in the work of the Inquiry can only be achieved through transparency. Accordingly, I have set out what did not happen, why it did not happen, and what is being done to put the position right.

Sir Brian Langstaff
Chair of the Infected Blood Inquiry

This statement was provided in advance to NHS England