

# Sharing information relating to Infected Blood Compensation Authority Claims

*[Sharing information relating to Infected Blood Compensation Authority claims - NHS Transformation Directorate](#)*

## Overview:

GP practices are required to prioritise the prompt release of medical information to the Infected Blood Compensation Authority (IBCA) when requested, as the IBCA have legal authority to access this information for compensation claims related to the infected blood scandal.

IBCA is an independent arms-length body set up to pay compensation to people infected and affected by HIV, hepatitis B and C through contaminated blood, blood products or tissue following the Infected Blood Inquiry.

There is no requirement to seek patient consent for release, as the law overrides the usual duty of confidentiality in this context.

## Key points:

### **Legal Basis:**

The IBCA's requests for information are backed by Section 53 of the Victims and Prisoners Act, which allows them to access necessary medical records.

### **No Consent Required:**

Unlike standard data requests, patient consent is not required for the IBCA to obtain information related to infected blood claims.

### **Prompt Processing:**

It's crucial to process these requests swiftly to ensure timely compensation for those affected by the infected blood scandal.

### **Purpose of Requests:**

The IBCA will only request information that is directly relevant to supporting a compensation claim, and only after discussing it with the claimant.

### **Interim Payments:**

Interim payments of £100,000 were made to those infected and bereaved partners registered on UK infected blood support schemes, and further payments are being considered.

### **Further Information:**

The [Infected Blood Inquiry](#) website and the IBCA website offer more details about the scheme and the process of accessing medical records.

In essence, GP practices should treat IBCA information requests as a priority, recognising their legal basis and the urgency of supporting those affected by the infected blood scandal.

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link to further information: [Sharing information relating to Infected Blood Compensation Authority claims - NHS Transformation Directorate](#)

### Process Flowchart

Nominated Single Point of Contact (SPOC) for co-ordinating and managing requests for information from the IBCA

1<sup>st</sup> contact - Sarah Southall: [sarah.southall@nhs.net](mailto:sarah.southall@nhs.net) / PA - Kayte Davies: [kayte.davies1@nhs.net](mailto:kayte.davies1@nhs.net)

2<sup>nd</sup> contact - Slinder Dyal: [slinder.dyal@nhs.net](mailto:slinder.dyal@nhs.net)

Caldicott Guardian – Dr R. Mohindroo

DPO – Paul Couldrey



#### Stage 1:

- IBCA will send request to the single point of contact for H&B practices giving x7 working days for a response.  
  
They will provide necessary details of the person claiming compensation and information required i.e.
  - **Evidence relating to the infection date**
  - **Evidence relating to the diagnosis date**
  - **Severity Level** - evidence that diagnosis has (or has not) progressed and the date that these changes happened  
severity levels are provided by IBCA when requesting information, for example hepatitis C only is defined as severity level 1 and hepatitis B only is defined as severity level 5
- Patients nearing the end of their life may also ask IBCA to consider their claim more urgently.  
[Read the information published by IBCA](#) IBCA may therefore also ask you to provide information to confirm that this is the case for a patient.



#### Stage 2:

- SPOC will acknowledge receipt of the request with IBCA and open a new case record within the H&B central register for IBCA claim requests and responses.
- SPOC will send the request including timeframe for response to the relevant Hub Lead GP (for the site at which the patient is registered) and cc' Director.



#### Stage 3:

- Hub Lead GP will be requested to check patient notes for the evidence required and send prepared response to the SPOC (cc' Director) - where any cause for concern to discuss with Director.
- Once the information request has been actioned and completed, SPOC will forward to the IBCA, record within the central register and close the case as complete.
- If exact evidence cannot be sent, a written statement with a timeline of events can be accepted, if this has been signed off by the clinician.
- Where the Lead GP anticipates a delay to the given timeframe, to inform SPOC explaining the reason (cc' Director) for a holding email to be sent to inform the IBCA.
- SPOC will provide information to relevant Hub Manager throughout, in order for the IBCA request and outcome to be recorded within the patient records.