



Valproate and Pelvic Mesh Redress Scheme

A report on what we think should happen



Easy Read



This is an Easy Read version of some information. It may not include all of the information but it will tell you about the important parts.



This Easy Read booklet uses easier words and pictures. Some people may still want help to read it.



Some words are in **bold** - this means the writing is thicker and darker. These are important words in the booklet.



Sometimes if a bold word is hard to understand, we will explain what it means.



<u>Blue and underlined</u> words show links to websites and email addresses. You can click on these links on a computer.

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About this report



The Patient Safety Commissioner supports patients by:

• Improving the safety of medicines and healthcare equipment.



• Making sure they are listened to by healthcare services and the Government.



The Government has asked us to find out what help is needed for people who have been harmed by **valproate and pelvic mesh.**



Valproate and pelvic mesh are explained on pages 6 and 7.



Any help the Government agrees to provide will be called a **Redress Scheme**.



We collected and looked at lots of information. We also spoke to people who have been harmed.

We used what we found out to write this report.



Our main point in this report is that we think people who have been harmed by valproate and pelvic mesh deserve a redress scheme.



This report is our advice to the Government about what is now needed for them to set up a successful Redress Scheme.

Valproate and pelvic mesh



Valproate

Valproate is a type of medicine that is given to patients.



It helps lots of different health issues, like bipolar disorder and epilepsy.



It has been found that valproate can sometimes be harmful when it is taken by pregnant women.



Pregnant women who have taken valproate have given birth to babies who have serious health issues.

These health issues were caused by valproate.



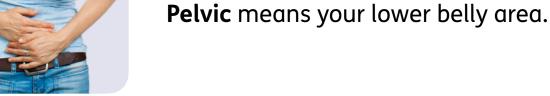
• Caused women pain and given them infections.

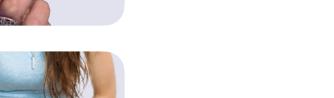


and often made them worse.



It has been found that pelvic mesh has sometimes:





Pelvic mesh is a strip of medical material that is used to help women with **pelvic** issues.

Pelvic mesh

What we found out

From the information we looked at, we found out that:

- Valproate and pelvic mesh have harmed people:
 - Physically this means their body has been harmed.



 Mentally - this means their thoughts and feelings have been harmed.



• The families of people who have been harmed by valproate and pelvic mesh have also been hurt.



• People who have been harmed by valproate and pelvic mesh are dealing with challenges every day.

From the information we looked at, we also found out that:

• It is taking NHS England a long time to collect information about pelvic mesh and the harm it causes.



England

• Some people are not happy with the NHS Specialist Mesh Centres.





• People who have been harmed by valproate and pelvic mesh are finding it hard to get **compensation** through the courts.

People get **compensation** when something unfair happens to them.

• No work has been done by the Government to set up a plan for **financial compensation**.

Financial means money. So **financial compensation** is when someone who has been harmed by valproate and pelvic mesh is given some money.



 Most people we spoke with who have been harmed by valproate and pelvic mesh say that they want more than just financial compensation.

What we think should happen



Based on what people have told us, we think:

• There should be a clear Redress Scheme for people harmed by valproate and pelvic mesh.



• A Redress Scheme should involve both financial and non-financial compensation.



• The Government should make sure that work to improve the safety of valproate and pelvic mesh is done.

This will help make sure something like this does not happen again.

Non-financial compensation

We think non-financial compensation should include:

- Support workers for people who have been harmed.
- Helping people who have been harmed by valproate and pelvic mesh find and pay for housing.



• A specialist health service for people who have been harmed by valproate.



• Support for parents who have children with serious health issues caused by valproate.



We think non-financial compensation should also include:

• Saying sorry to people who have been harmed.



• More research that looks at understanding pelvic mesh and certain medicines, like valproate.

Financial compensation



We think financial compensation should be split into 2 payments:

1. An interim payment.



2. A main payment.



The **interim** payment would be a one off payment of a set amount of money from the Government to the person harmed.



The Government would pay this before working out how much each person harmed should get as their main payment.



From a survey we shared, we found out that most people think £25,000 would be a good amount for an interim payment.



People's main payment will be different amounts, because everyone was harmed differently.

Who we think should get compensation

Interim payments

We think the Government should have rules about who can get an interim payment:



1. Only people who have been directly harmed by valproate and pelvic mesh can get an interim payment.



2. Only people who were directly harmed during a certain time can get an interim payment.



3. Only people with certain injuries or types of harm can get an interim payment.



When we say directly harmed people, we mean:

• Anyone whose mother was taking valproate when she was pregnant.



• Anyone who has had pelvic mesh put into their body by doctors.



In the future, the Government should look at giving main payments to indirectly harmed people.



When we say indirectly harmed people, we mean anyone who has been affected by someone else being harmed by valproate and pelvic mesh.



For example, the husband of a woman who has been harmed by pelvic mesh.



Main payments

People who have been harmed by valproate and pelvic mesh may have lost money in different ways.



For example, someone's injury may have caused them to stop working for 1 year. So they lost 1 year of wages.



But another person's injury may have caused them to stop working for 10 years. So they lost 10 years of wages.



We call this lost money **financial losses**.



How the Government gives out main payments may change based on someone's financial losses.



We think the Government should decide what types of financial losses it will pay for through a main payment.

Other issues to think about

We think the Government should:

• Make sure it is easy for people to apply for the Redress Scheme.





• Choose an organisation to manage the Redress Scheme - it must be an organisation that people trust.



• Think about how to include people with disabilities in the Redress Scheme.



We also think the Government should:

• Make sure the Redress Scheme offers people emotional support.



• Set up a big campaign that shares information about the Redress Scheme.



 Start by giving out interim payments - this will give the Government a better idea of how many people have been harmed by valproate and pelvic mesh.

Find out more



For more information about the Redress Scheme, you can go to: <u>www.patientsafetycommissioner.org.</u> <u>uk/our-work/psc-re-dress-project/</u>

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