Trust contingency planning for a 'no deal' EU Exit

Briefing Paper - 31st July 2019

Introduction

This paper gives an overview of the contingency planning the Trust is putting in place for a 'no deal' exit of the EU on 31st October 2019 summarising both national and local planning focused on the impacts of a 'no deal' EU Exit.

Overview of National Planning and Guidance

National guidance has been issued covering seven areas of focus for health and social care which are being focused on nationally by the Department of Health and Social Care. Planning is focused on a 'no deal' EU Exit and ensuring robust contingencies are in place nationally. The seven streams are summarised below including what national and local planning is being undertaken. All streams have been summarised to give an overview of national planning even where the impact on the Trust is minimal.

1. Supply of medicines and vaccines

The government has developed a UK wide contingency plan to ensure the flow of medicines and vaccines in a no deal scenario. This work includes analysis of the supply chain for all medicines including vaccines and medical radioisotopes, liaising with industry to ensure a minimum of six weeks additional supply above usual stocks as well as arranging air freight for stocks with a short life span. Medicines will be prioritised on all ports of entry. UK health providers have been instructed not to undertake any stockpiling of additional medicines beyond usual stock levels.

2. Supply of medical devices and clinical consumables

Stock levels of medical devices and clinical consumables are being increased nationally and all suppliers who source from the EU are reviewing supply chains and risks. UK healthcare providers have been instructed not to stockpile additional devices or consumables beyond usual stock levels with further guidance expected by the end of January 2019 of this advice changes.

3. Supply of non-clinical consumables, goods and services

The Government is engaging with suppliers and industry experts to identify risks and plan for any supply disruption. If risks are identified guidelines will be developed for health and social care on suitable substitution arrangements to mitigate these risks.

To support the supply all of the above there are plans to introduce dedicated NHS sea and air freight routes as per the plans for 31st March however this is yet to be confirmed.

4. Workforce

EU citizens will be able to register for settled status in the UK if they have been here for five years or pre-settled status if less than five years. The Government portal for applications will go live in March 2019 with fees being covered by the Government.

5. Reciprocal healthcare

The Government is seeking to protect current reciprocal healthcare arrangements with UK nationals in the EU, EEA and Switzerland.

6. Research and clinical trials

The Government has guaranteed funding committed to UK organisations for certain EU funded projects in the event of a 'no deal' exit until the end of 2020. Successful bids for EU programme funding until the end of 2020 will receive their full financial allocation for the lifetime of the project. All supplies for research will also be able to access the dedicated NHS supply routes.

7. Data sharing, processing and access

The Government recognise it is imperative that personal data continues to flow between the UK and EU. The Information Commissioners Office have released guidance on data protection in a 'no deal' scenario. Transfer of data from the UK to EU should not be affected as it will be covered by existing domestic legislation. There is ongoing work to safeguard EU to UK transfers of personal data with further information to be issued in due course.

Trust Governance

As per national guidance the Trust has appoint Mark Smith, Deputy Chief Executive and Chief Operating Officer as the Senior Responsible Officer for EU Exit Planning. Simon Steele, Resilience Manager, is the designated Single Point of Contact for the Trust. Regionally NHS England have appointed EU Exit leads who act as the link to national planning schemes.

The Trust planning is overseen by the EU Exit Planning Group, chaired by Simon Steele which reports to the Civil Contingencies Steering Group, chaired by Mark Smith. The Resilience Manager will coordinate Trust plans as per national guidance and attends the Local Health Resilience Partnership where EU Exit planning will be coordinated across the region.

Divisional leads have been designated by all divisions including estates and facilities to support in coordination of plans, assessment of risk and reporting of information requested. The work being undertaken by the trust is summarised below. There are also specific workstream leads for those mentioned below and clinical leads are being appointed to support.

Internal Workstreams

Alongside divisional leads the Business Continuity Planning Group undertook a risk assessment of the impacts of a 'no deal' exit. Accounting for national guidance and instructions not to stockpile two areas where highlighted as risks. The Risk ID on Datix is 2973.

a) Workforce

The Trust continues to recognise the significant contribution made by staff who are from right across the EU and who form over 10% of our workforce at UHBristol. Whilst the Senior Leadership Team had agreed to fund the £65 fee to help EU staff who wish to apply for 'Settled Status' this is now being covered nationally.

When the Government portal to receive applications goes live the HR Resourcing team will be arranging drop in sessions to help staff with the application process. Communications have been sent to all EU nationals working within the Trust to communicate this.

b) Supply Chain

In partnership with Bristol and Weston Purchasing Consortium (BWPC), North Bristol Trust and Weston Area Health trust, the Trust is undertaking a risk assessment of supply chains and impacts of delays at ports of entry. As risks are highlighted further work will be undertaken with suppliers to mitigate the risks. The Trust is instructed not to stockpile however divisions are assessing the impact of delays on activity and are able to order to account for longer lead times if required.

The Trust is also ensuring we have a plan to be able to take out of hours deliveries if required following a no deal exit.

c) Medicines

Whilst there is an instruction not to stockpile the Trust is reviewing any high risks, particular medicines such as radio pharmacy with short life span. Clinical leads are also being identified to ensure early visibility and escalation of any shortages at a service level. The Trust is also engaged with the pharmacy network and the ongoing regional and national planning.

d) Waste Management

There are national concerns about a backlog of removal of waste management however having discussed with the Trust's waste manager there are no particular concerns due to a no deal Exit as all our waste is treated within the UK.

e) Overseas Patients

Any potential impacts are being reviewed by the private patients and oversees manager however impact is expected to be minimal

f) Security

Whilst security is not expected to be impact the Trust are able to utilise contractors if required

g) Clinical Trials

There is ongoing engagement with clinical trials leads to understand any impacts, particularly where sponsors are based in the EU. Sponsors have been contacted with no impact expected from a no deal exit. All clinical trial supplies will have access to NHS specific supply routes.

h) Data Transfers

The Trust has reviewed any data and systems which are linked to EU countries however there is not anticipated to be an impact on our systems from a no deal exit.

Business Continuity Planning

The Business Continuity Planning Group maintains an overview of the Trust plans with a continued focus to ensure plans are up to date and in a position to be utilised for disruption to services. The Trust has been asked to ensure plans are up to date as per current legislation and EU Exit planning will be a standing agenda item for the Business Continuity Planning Group. There are divisional leads who ensure business continuity plans remain up to date and fit for purpose with oversight at the business continuity planning group who report to Civil Contingencies Steering Group.

Operational planning for managing disruption from 31st October

At a national level there is an expectation we will not leave the EU without a deal. Alongside this the Trust is working to mitigate any impacts however if this scenario was to occur plans are also being put in place to ensure we monitor and respond to any disruption to services. The Trust will utilise both its overarching business continuity plan alongside any local business continuity plans of disrupted services in this instance.

Alongside this a structure of leads will be in place to support communication between departments and allow the coordination and escalation of any issues arising. All divisions currently have a planning lead as do the workstreams named above. Clinical leads for all departments will be identified to support identification of service delivery issues. A single point of contact will then be in place to escalate any issues required to the regional EU Exit team who are maintaining an incident coordination centre based in Taunton.

Reporting

Whilst there are currently no daily reporting requirements this will likely begin in October and be led by the Resilience Manager. Assurance returns will also be required to evidence our preparedness to NHS England.

If you have any questions on the ongoing planning and arrangements for a no deal EU Exit please speak to [content removed].