

Meeting of Lanarkshire
NHS Board:
30 January 2019

Lanarkshire NHS Board
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SUBJECT: Brexit Preparations

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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The purpose of this paper is to provide Lanarkshire NHS Board with an update on actions to respond to the United Kingdom's decision to leave the European Union, commonly known as Brexit.

2. ROUTE TO THE BOARD

This paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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Prepared by Gabe Docherty and Kay Sandilands and considered by Corporate Management Team

3. SUMMARY OF KEY ISSUES

The United Kingdom (UK) voted to leave the European Union (EU) following a referendum in 2016. The process of Brexit is a matter reserved to the Westminster Parliament. Parliament voted to initiate the withdrawal process known as article 50 which will conclude with the UK's exit on the 29th March 2019.

Brexit continues to be a political issue that has polarised opinion across political leaders and the public in general. The continued debate has created a number of potential outcomes that are broadly recognised as leaving with a deal, leaving with no deal, extending Article 50 or remaining within the EU. This ongoing debate and options has created uncertainty across the public and private sectors.

The current circumstances of leaving the EU and the ongoing uncertainty has potential significant issues for NHS Lanarkshire (NHSL) across a range of disciplines including, but not exclusively, Human Resources, Medical Equipment, Pharmaceuticals, Research, Information Sharing and Regulation. Wider issues include potential disruption to the fuel and food chain which obviously would impact NHSL severely.

NHSL has identified Brexit as a corporate risk and initiated an EU Withdrawal short life working group to consider the potential implications of Brexit. This process has not been without its difficulties given a lack of factual information and limited knowledge of the

political process and the negotiations being conducted between the UK and EU on a withdrawal deal. The group has tried to engage EU nationals within the workforce but only have had responses from 43 members of staff.

NHSL is also working with Community Planning Partners on this issue. A copy of a questionnaire submitted for a South Lanarkshire Community Planning Partnership event on 30 January 2019 is included in Appendix 1.

Other planning groups have also been active at a UK and Scottish level led by government officials and resilience groups. Board Chief Executives have featured Brexit routinely at their monthly meetings and are advocating a Scottish wide NHS response. Advice and guidance from these groups, and other emerging detail, should now be used to step up NHSL preparations.

This issue was discussed at the Corporate Management Team meeting held on 21 January 2019. At this meeting the following was agreed:

Corporate Level:

- Move from a preparation posture to full response mode. This should be through the activation of a live incident and putting in place command structures to manage this.
- Cease the preparation short working life group of the 15th February 2019 and move to a live incident on the 6th March 2019.
- Establish and run two half day NHSL Corporate Level preparation workshops between the above dates to share known information and provide a focus on moving to a response stance.
- Establish the response command structure to provide robust command with an ability to scale up or down in response to changing circumstances as required.

These plans are now being put in place.

Operational level:

- Acute Division, both Health and Social Care partnerships, Public Health and all Corporate services are to review their Business Impact Analysis (BIA) and Business Continuity Plan (BCP) with direct consideration of the impacts of Brexit. This should include internal and external Dependencies.
- Risk registers to be reviewed at corporate and operational level.
- All staff to be informed BCPs to be tested against a Brexit scenario.
- Plan for the inclusion of Brexit issues on briefing and meeting agendas.
- Consider additional monitoring and reporting protocols for risks associated with withdrawal.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	LDP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input checked="" type="checkbox"/>
Urgent operational issue	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

The challenge will be for NHSL to continue to provide safe and effective services not that of improving services.

7. FINANCIAL IMPLICATIONS

It is not possible to quantify the financial impact of Brexit upon NHSL.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

Brexit is already included in the Corporate Risk Register

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability	<input type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Not applicable.

11. CONSULTATION AND ENGAGEMENT

Not applicable.

12. ACTIONS FOR THE BOARD

The Board are asked to:

Approval	<input type="checkbox"/>	Endorsement	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input checked="" type="checkbox"/>	Ask for a further report	

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact Gabe Docherty Telephone: 01698 858241, Email: gabe.docherty@lanarkshire.scot.nhs.uk or Kay Sandilands Telephone: 01698 377719 Email: kay.sandilands@lanarkshire.scot.nhs.uk.

Appendix 1

NHS Lanarkshire response to South Lanarkshire Council Community Planning Partnership (SLC CPP) questionnaire on Brexit - Pre-Risk Workshop

Community Planning Partnership
Brexit – Pre Risk Workshop Questionnaire

NHS Lanarkshire response

1) *In preparation for Brexit, please provide a summary of work undertaken by your organisation in the following areas:*

General:

NHS Lanarkshire has convened an Operational Readiness for EU Withdrawal Short Life Working Group to lead the response to the proposed exit from the European Union. The group covers issues including staffing, procurement, finance, medical supplies and resilience. The Scottish Government, with the support of Board Chief Executives are seeking to provide a consistent NHS response. In order to support Health Boards further work is being taken forward by the Scottish Government that includes:

- i. Scottish Government Health Resilience Unit establishing an EU Exit Health Resilience Group, to support co-ordination across Scottish Government and its partners. The group will coordinate health resilience activity including reviewing priority risks, assess mitigation measures and ensure planning information is shared with Boards to support NHS service delivery;
- ii. A Short Life Working Group set up by NSS National Procurement, including both National Procurement and Board Procurement leads to assure the supply chain in terms of identifying, triaging and managing any shortages;
- iii. The Scottish Resilience Partnership's Brexit sub-group, with representation from Board Chief Executives and the Scottish Ambulance Service. NHS Boards and local authorities are also represented on the regional and local resilience partnerships; and
- iv. NHS Scotland workshops are being planned for January. These will be in addition to and complement those planned by Resilience Partnerships and are being led by the EU Exit Resilience Group.

- **Workforce/employment**

NHSL have developed a Brexit webpage and regular communication to inform staff that are EU/EEA Nationals.

- An EU Nationality Survey was issued to identify EU/EEA Nationals and enable NHS Lanarkshire to provide direct support to them. This was completed by 43 EU/EEA Nationals. This is lower than the estimated level of NHS Lanarkshire workforce (3-5% /360-600 staff) and is likely to under report the position.

This group of 43 were contacted directly with details of the EU Settlement Scheme pilot. Details of the pilot were also communicated to all staff. NHSL staff have been advised that NHSL will cover the £65 fee and recover this cost from Scottish Government in due course.

- **Procurement/Trade**

Due to the nature of procurement within the Health Service, much of this work is being led either nationally or regionally. National procurement contracts are likely to be stable however outwith national contracts work is ongoing to identify where issues may arise. There is significant concern regarding the supply of medicines (supply chain & regulation), medical devices, medical isotopes. Again national solutions are being sought to these concerns.

- **Finance/Funding**

At this stage it is not possible to quantify the financial impact upon the organisation or the potential impact upon EU funded research programmes. There is an expectation that there will be an increase in Drug & Therapeutic costs.

- **Contingency Planning**

Subject to the vote in the UK parliament and the outcomes of such, NHSL is considering moving from a preparation posture to full response mode. This should be through the activation of a live incident and putting in place command structures to manage this. This will be fully discussed by NHSL's Corporate Management Team after the vote. At an operational level the following will be addressed:

Contingency plans for securing supplies of medicines in the event of a no-deal Brexit have been led by the UK Government Department of Health (DoH) who have made contact with medicine manufacturers to invite them to increase their stockpiles of medicines which were considered likely to be impacted by delays at the UK Border with the aim of ensuring that there is an additional six weeks of supplies on top of normal stocks in the UK. Alongside the stockpiling arrangements the DoH have plans to air freight medicines that may require specific cold chain transportation.

Review of Business Impact Analysis (BIA) and Business Continuity Plan (BCP) with direct consideration of the impacts of Brexit. This should include internal and external Dependencies.

Risk registers to be reviewed at corporate and operational level.

All staff to be informed BCPs to be tested against a Brexit scenario.

Plan for the inclusion of Brexit issues on briefing and meeting agendas.

Consider additional monitoring and reporting protocols for risks associated with withdrawal.

2) *Has Brexit been recorded in your organisation's risk register and if so how has this been articulated?*

NHS Lanarkshire has set out a corporate risk (risk ID 1661) which was initially assessed as high and has been increased to very high commensurate with the position regarding the 'no-deal' uncertainty as below:

Open Date	Title	Description of Risk	Risk level (initial)	Mitigating Controls	Risk level (current)	Risk level (Tolerance)	Review Date
12/07/18	European Union Exit (Brexit) Impact on NHS	There is a risk that NHSL will not be in full operational readiness for EU withdrawal, especially in areas where there is limited detail regarding change and impact over the workforce and a range of broader product, access and legislation issues with the potential to adversely disrupt continuity of delivery of healthcare services across NHSL.	High	<ol style="list-style-type: none"> 1. SG Communication with all Boards on EU Withdrawal Issues 2. SG Operational Readiness for EU Withdrawal Checklist has been completed and returned to SG (used at CE development day) 3. Implementation of the 'settled scheme status' for EU citizens for roll-out December 2018 4. Communication plan through HR on supporting and communicating with EU staff. 5. NHSL SLWG to complete SG assessment tools, review the risk analysis and review mitigation. 6. Escalation to the SG where mitigation cannot be reached. 7. NHSL Business Continuity Plans. 8. NHSL have agree that a collaborative approach will be taken with the other West of Scotland 9. NHS Boards to work together to help address the risks / impacts associated with Brexit 10. NHSL European Union Exit Short Life Working Group set up 11. Review with Board Chief Executives has led to an agreement that there will be public statements on Brexit made once the detail of the 'deal' or no-deal' position are clear 	Very High	Low	30/01/19

3) What do you consider to be the top five Brexit risks/implications to the Community Planning Partnership and the delivery of the Community Plan?

No.	Risk/Implication	Risk Rating High/Medium/ Low
1	The potential of severe service disruption will disrupt efforts to deliver on the Community Planning agenda and the Community Plan as organisations focus on their individual contingency efforts.	High
2	The predicted financial impact upon the country could significantly reduce public sector funding and limit the ambitions of the CPP.	High
3	The potential disruption of the 'supply chain' e.g. fuel, food will have very significant impacts upon the CPP (note this links with No.1).	High
4	The predicted negative impact upon employment will worsen the health and wellbeing status of the population making the challenge for the CPP greater. n.	High
5	There is the distinct possibility that inequalities will widen as it is predicted that the poorest in society will suffer most from Brexit.	High

4) From the Community Planning Partnership's perspective, are there any specific areas that you would wish to highlight from the Audit Scotland Brexit Questionnaire, as detailed in Appendix 2 below?

All the questions in the Audit Scotland questionnaire are valid. The potential impact upon the regulatory framework for medicines is an example of the challenge faced under Rules and Regulation section.

Audit Scotland

Withdrawal from the European Union – key audit issues for the public sector

Key questions for public bodies

People

- How are we communicating with staff about the potential impact of EU withdrawal and preparing to support any employees who may be affected?
- How are we reflecting the implications of EU withdrawal in our long-term workforce planning?
- What are the workforce implications for the third sector and private organisations that provide services in partnership with us or on our behalf?
- Which parts of the workforce (sectors/skills/services/regions) are most at risk from the impact of EU withdrawal?
- How are we reflecting the implications for the local workforce in our economic strategies?

Finance

- What level of funding do we, and our partners, receive from the EU and through which funding streams?
- What financial risks are associated with any changes after the UK has left the EU, during any transition period and beyond?
- How are we reflecting the implications of EU withdrawal in our long-term financial planning?
- How can we capitalise on opportunities to access alternative funds or redesign replacement funding streams?

Rules and Regulations

- What are the potential implications of changes to trade and customs rules to our supply chains and the cost and availability of products and services?
- What EU regulations/legislation are directly relevant to our role (e.g. monitoring and compliance)?
- What impact would potential changes to regulations/legislation have on how we deliver services and our service users?
- How can we capitalise on opportunities to streamline or improve the regulatory environment?
- How are we planning for the possibility that the UK Government and the EU fail to reach an agreement on arrangements for the UK's exit from the EU?