

Meeting of NHS Board
27 March 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. A further update will be provided at the meeting.

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 the Board Secretary 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.

A summary of the preparations being made was presented to the Planning, Performance & Resources Committee on 27 February 2019 and these included

At functional level:

1. All Directorates are reviewing their Business Impact Analysis (BIA) and Business Continuity Plan (BCP) with direct consideration of the impacts of Brexit. This includes internal and external dependencies.
2. Reviewing risk registers at corporate and functional level.
3. All Directorates to inform staff and test BCP against a Brexit scenario.
4. Plan for the inclusion of Brexit issues on briefing and meeting agendas.
5. Consider additional monitoring and reporting protocols for risks associated with withdrawal.

UPDATE

Services have reviewed and continue to refine their local Business Continuity Plans to take account of changing local circumstances.

At a Corporate level:

1. Move from a preparation posture to full response mode, through the activation of a live incident and putting in place command structures to manage this.
2. CMT agreed to step down the short working life group, as of the 15th February 2019, and move to a live incident from 6th March 2019.
3. Established two half day NHSL Corporate level preparation workshops (one has already been held on 18 February 2019) to share known information and provide a focus on moving to a response stance.
4. Established the response command structure (Appendix 1) to provide robust command with an ability to scale up or down in response to changing circumstances as required.

UPDATE

- The Corporate Management Team endorsed a move from a preparation posture to full response mode;
- The Short Life Working Group was stood down as of 15th February 2019;
- A decision to move to a live incident was discussed at the Corporate Management Team meeting on 4 March 2019, and it was decided to await the outcome of the various Parliamentary votes before making a decision to move to a live Command structure. This is kept under review on a weekly basis;
- Two held day Workshops have been held, the first to share known risks, and the second workshop held on 4 March was a full afternoon exercise to replicate the Command Structure and test the communication flows bewrtween Operational, Tactical and Strategic Command structures.

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
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