

Potential No Deal EU Exit Preparations

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Trust Board paper I

Purpose of report:

This paper is for:	Description	Select (X)
Decision	To formally receive a report and approve its recommendations OR a particular course of action	
Discussion	To discuss, in depth, a report noting its implications without formally approving a recommendation or action	
Assurance	To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan	X
Noting	For noting without the need for discussion	

Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
CMG Board (specify which CMG)	N/A	
Executive Board	N/A	
Trust Board Committee	N/A	
Trust Board	5.9.19	Assurance

Executive Summary

Context

This report updates the Trust Board on the current status of NHS and UHL no deal EU exit preparations.

Questions

Is there any further information the Trust Board wishes to receive on the current status of no deal EU exit preparations?

Conclusion

At the time of preparing this report, there are no specific material issues to highlight to the Trust Board regarding the Trust's no deal EU exit preparations.

Input Sought

The Trust Board is recommended to receive and note the contents of this report; and to receive a further report at its November 2019 meeting.

For Reference:

This report relates to the following UHL quality and supporting priorities:

1. Quality priorities

Safe, surgery and procedures	[Not applicable]
Safely and timely discharge	[Not applicable]
Improved Cancer pathways	[Not applicable]
Streamlined emergency care	[Not applicable]
Better care pathways	[Not applicable]
Ward accreditation	[Not applicable]

2. Supporting priorities:

People strategy implementation	[Not applicable]
Estate investment and reconfiguration	[Not applicable]
e-Hospital	[Not applicable]
More embedded research	[Not applicable]
Better corporate services	[Not applicable]
Quality strategy development	[Not applicable]

3. Equality Impact Assessment and Patient and Public Involvement considerations:

- What was the outcome of your Equality Impact Assessment (EIA)? N/A
- Briefly describe the Patient and Public Involvement (PPI) activities undertaken in relation to this report, or confirm that none were required – N/A
- How did the outcome of the EIA influence your Patient and Public Involvement? N/A
- If an EIA was not carried out, what was the rationale for this decision? N/A

4. Risk and Assurance**Risk Reference:**

Does this paper reference a risk event?	Select (X)	Risk Description:
Strategic: Does this link to a <i>Principal Risk</i> on the BAF?		
Organisational: Does this link to an <i>Operational/Corporate Risk</i> on Datix Register	X	Moderate risk
New Risk identified in paper: What <i>type</i> and <i>description</i>?		
None		

5. Scheduled date for the **next paper** on this topic: November 2019
6. Executive Summaries should not exceed **5 sides** [My paper does comply]

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 3rd OCTOBER 2019

REPORT BY: DIRECTOR OF CORPORATE AND LEGAL AFFAIRS

SUBJECT: POTENTIAL NO DEAL EU EXIT PREPARATIONS

1. Introduction

- 1.1 There is a possibility of a no deal EU exit at the end of the extension period on 31st October 2019.
- 1.2 The NHS continues to prepare for every EU exit scenario, including no deal.
- 1.3 This report updates the Trust Board on the current status of NHS and UHL preparations.

2. Government Planning

- 2.1 The Department of Health and Social Care (DHSC) is leading the response to EU exit across the health and care sector. NHS England and NHS Improvement are working closely with DHSC to best prepare the NHS.
- 2.2 The intention of all Government planning is to avoid any disruption of services to patients or supplies.
- 2.3 National contingency planning has focused on:
 - (a) supply of medicines and vaccines;
 - (b) supply of medical devices and clinical consumables;
 - (c) supply of non-clinical consumables, goods and services;
 - (d) workforce;
 - (e) reciprocal healthcare;
 - (f) research and clinical trials;
 - (g) data sharing, processing and access.
- 2.4 Of particular note are the actions taken by Government in relation to medicines, medical devices and clinical consumables which may be summarised as follows:
 - (a) supporting suppliers to secure alternative supply routes (away from the Dover and Folkestone crossings, where delays are expected),
 - (b) encouraging buffer stocks and stockpiling by suppliers (where this is practical), or asking industry or NHS Supply Chain to build up buffer stocks in the UK,
 - (c) adding to normal shortage management procedures, enabling Ministers to issue serious shortage protocols to pharmacists,

- (d) securing additional warehouse space for stockpiled medicines, including ambient, refrigerated and controlled drug storage,
- (e) working with industry to improve trader readiness in preparation for the new customs procedures that will come into force on day one of a no deal Brexit,
- (f) changing or clarifying regulatory requirements so that companies can continue to sell their products in the UK.

3. Operational Readiness

- 3.1 DHSC has produced EU exit operational guidance which outlines the actions that Providers and Commissioners of health and social care services should take to prepare for, and manage, the risks of a no-deal exit scenario.
- 3.2 The Trust's EU exit group, chaired by the Director of Corporate and Legal Affairs (as SRO) and comprising subject matter experts for each of the areas mentioned at paragraph 2.3 above, has met since the Trust Board meeting held on 5th September 2019. The group's discussions have been informed by the NHS England Regional EU Exit Workshop held in Leicester on 17th September 2019, attended by both the Director of Corporate and Legal Affairs and Emergency Planning Officer.
- 3.3 The Group has:
 - (a) reviewed our preparedness and made sure our planning assumptions and risk assessment remain fit for purpose and up to date,
 - (b) revisited the Trust's contract and supplier assurance processes,
 - (c) worked through various exercise scenarios with the relevant stakeholders, with the aim of providing further assurance.
- 3.4 UHL is also fully engaged with local system preparations around EU Exit through the Local Resilience Forum, linking with partner agencies including local authorities and Clinical Commissioning Groups to collaboratively manage and address issues.
- 3.5 NHS England is to assure the Trust's local preparations towards the end of September/early October 2019.
- 3.6 Daily situation reporting (sitrep) to NHS England is expected to commence on 21st October 2019.

4. Recommendation

- 4.1 The Trust Board is recommended to receive and note the contents of this report; and to receive a further report at its November 2019 meeting.

Stephen Ward
Director of Corporate and Legal Affairs

23rd September 2019