

UHL No Deal EU-Exit Preparations

Authors: Emergency Planning Officer / Risk & Assurance Manager
Sponsor: Stephen Ward, Director of Corporate & Legal Affairs

Trust Board paper H

Executive Summary

Context

The UK is due to leave the European Union on 29th March 2019 and the Trust is required to plan for all eventualities, including a no deal EU-exit.

This report outlines the actions nationally and locally to ensure that the coordination is visible to the Board of Directors.

Questions

1. Is the Trust Board assured that the Trust has satisfactory arrangements in place to monitor the potential impacts which may arise from a no deal EU-exit?

Conclusion

1. The Trust has appointed a Senior Responsible Officer (SRO) and Operational Lead for EU-exit preparations and a risk assessment has been prepared for a no deal scenario. The Trust has established an EU Exit Group to manage the Trust and national plans. The Trust's response to the "EU Exit Operational Readiness Guidance" has not identified anything which may trigger significant disruption to any of its critical or essential functions at the present time.

Input Sought

The Trust Board is invited to note the contents of this report.

For Reference

1. The following **objectives** were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes]
Effective, integrated emergency care	[Yes]
Consistently meeting national access standards	[Yes]
Integrated care in partnership with others	[Yes]
Enhanced delivery in research, innovation & ed'	[Yes]
A caring, professional, engaged workforce	[Yes]
Clinically sustainable services with excellent facilities	[Yes]
Financially sustainable NHS organisation	[Yes]
Enabled by excellent IM&T	[Yes]

2. This matter relates to the following **governance** initiatives:

a. Organisational Risk Register [Yes]

Datix Risk ID	Operational Risk Title(s) – add new line for each operational risk	Current Rating	Target Rating	
New Risk	If there is disruption to the supply of goods and services in UHL following the United Kingdom's departure from the European Union, particularly in the event of no deal being secured, then it may result in disruption to the continuity of core services across the Trust, leading to potential for service disruption, harm, reputation and financial impact.	12	12	EU Exit Group

b. Board Assurance Framework [Elements included within]

3. Related **Patient and Public Involvement** actions taken, or to be taken: N/A

4. Results of any **Equality Impact Assessment**, relating to this matter: N/A

5. Scheduled date for the **next paper** on this topic: On Request

6. Executive Summaries should not exceed **4 sides** My paper does comply

7. Papers should not exceed **7 sides**. My paper does comply

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: UHL TRUST BOARD

DATE: 7TH FEBRUARY 2019

REPORT BY: DIRECTOR OF CORPORATE AND LEGAL AFFAIRS

SUBJECT: UHL NO DEAL EU-EXIT PREPARATIONS

1 INTRODUCTION

- 1.1 The UK is due to leave the European Union at 11pm on the 29th March 2019.
- 1.2 The UK Government continues to negotiate with both Members of Parliament and the European Union to secure an orderly exit from the European Union. As long as negotiations continue, there is a risk that the UK will exit the European Union without a deal.
- 1.3 The purpose of this paper is to update the Board on what preparations are being taken by the Trust for a no deal EU-exit.

2 NATIONAL GUIDANCE AND DIRECTION

- 2.1 The Trust received its first directive to begin planning for a no deal EU-exit from the Secretary of State, Matt Hancock, on 23 August 2018. This, and subsequent communications through the summer and autumn have outlined what steps are being taken by the government for a no-deal scenario and have asked NHS Trusts to develop business continuity plans in line with existing Emergency Preparedness, Resilience and Response (EPRR) arrangements.
- 2.2 The UK Government has published all subsequent guidance for industry and organisations involved in health and social care about contingency plans for a no-deal Brexit online <https://www.gov.uk/government/collections/planning-for-a-possible-no-deal-eu-exit-information-for-the-health-and-care-sector>.

3 RISK ASSESSMENT

- 3.1 The Trust has undertaken a risk assessment of the potential disruption which may be caused from a no deal EU-exit and a copy of the assessment, approved by the Executive Team in January, is attached in Appendix A.
- 3.2 The risk assessment is currently rated at moderate (12) and has been informed by:
- National and local guidance;
 - Outcomes of national returns to Department of Health & Social Care and NHS England.

4 CONTINUITY OF SUPPLY

- 4.1 On 12 October 2018, the Chief Executive was notified by the Secretary of State that NHS Trusts will be asked to undertake a contract review to ensure the continuity of supply of medicines, vaccines, medical devices, consumable goods, non-clinical goods and services before, during and after a no-deal EU exit. This was undertaken by the Head of Procurement and submitted to the Department for Health & Social Care in November 2018.

5 OPERATIONAL READINESS

- 5.1 On 21 December 2018, the Trust received a letter from Sir Chris Wormald, Permanent Secretary, outlining EU Exit Operational Readiness Guidance for the health and care system and what actions the health and care system in England should take to prepare for a 'no deal' scenario.
- 5.2 The EU Exit Operational Readiness Guidance set out that NHS England have established a regional NHS lead for EU Exit and their contact details have been shared with the Trust.
- 5.3 The EU Exit Operational Readiness Guidance required the Trust to identify a Senior Responsible Officer (SRO) for EU Exit and an Operational Lead with whom the regional EU Exit team can communicate with. The Chief Executive subsequently appointed the Director of Corporate & Legal Affairs, Stephen Ward, the SRO and the Director of Safety & Risk, Moira Durbridge as the Operational Lead.
- 5.4 The EU Exit Operational Readiness Guidance set out the need to test business continuity plans with Local Resilience Forum (LRF) partners by the end of February 2019. The Trust is currently awaiting notification from the LRF on when these tests will be undertaken.
- 5.5 The EU Exit Operational Readiness Guidance asks providers to review capacity and activity plans, annual leave, on-call and command and control arrangements for the time immediately before, during and after the 29th March. Based on the outcomes of the Trust's local no deal EU-exit risk assessment, there is no need at this time to amend operational plans for capacity, activity or annual leave. However, there may be need for on-call and command and control structures to be modified as there will likely be a number of Tactical Coordination Group (TCG) and Strategic Coordination Group (SCG) meetings held with LLR partner organisations before, during and after the 29th March.
- 5.6 Finally, the EU Exit Operational Readiness Guidance set out a number of actions providers should take in the following seven domains:
- 1) Supply of medicines and vaccines;
 - 2) Supply of medical devices and clinical consumables;
 - 3) Supply of non-clinical consumables, goods and services;
 - 4) Workforce;
 - 5) Reciprocal healthcare;

- 6) Research and clinical trials;
- 7) Data sharing, processing and access.

5.7 NHS England requested assurance from the Trust against the actions set out in the EU Exit Operational Readiness Guidance and this was submitted in January 2019.

6 OVERVIEW: UHL FOCUS

6.1 The Executive Team has agreed to establish an EU Exit group, led by the UHL SRO, to consider any emerging requirements of a no deal EU-exit with representation from the following departments:

- Risk Management
- Emergency Planning
- Communications
- Pharmacy
- Supplies & Procurement
- Medical Physics
- Human Resources
- Finance
- Estates
- Research and Innovation
- Informatics.

7 CONCLUSION AND RECOMMENDATIONS

7.1 Planning is underway for the UK's exit from the European Union, however it is an area of uncertainty and plans must remain flexible to respond. UHL is integrated into the whole system planning and work to mitigate the level of risk to the Trust will continue and progress be escalated appropriately.

7.2 The Trust Board is invited to note the contents of this report.

*Report prepared by Emergency Planning Officer & Risk and Assurance Manager,
31/01/2019*

Appendix A: UHL Risk Assessment for a No Deal EU-Exit

UHL RISK MANAGEMENT ASSESSMENT FORM			Local Ref. No.	TBA	
Date of Assessment	29/01/2019	Assurance Source	BREXIT National Guidance		
Risk Description:					
<p>If there is disruption to the supply of goods and services in UHL following the United Kingdom's departure from the European Union, particularly in the event of no deal being secured, then it may result in disruption to the continuity of core services across the Trust, leading to potential for service disruption, harm, reputation and financial impact.</p> <p>Causes:</p> <ul style="list-style-type: none"> Due to tighter border/custom arrangements when leaving the European Union under a no-deal "Brexit" <p>Effect:</p> <p>Harm (Patient/Non Patients):</p> <ul style="list-style-type: none"> Delays with treatment due to lack of supplies <p>Service Disruption:</p> <ul style="list-style-type: none"> Services not running as normal or not functioning at all Patients having to be rebooked <p>Reputation:</p> <ul style="list-style-type: none"> Targets being breached Increase in complaints <p>Financial Loss:</p> <ul style="list-style-type: none"> Costs (both revenue and capital) incurred in complying with national guidance. 					
Controls:					
<ul style="list-style-type: none"> Follow national protocols and guidance from government. UHL SRO (with Board level position) and Ops Lead (with support from EPO and Risk Manager) identified and meeting regularly to review continuity arrangements and seek assurance on existing plans to ensure they respond to the possibility of a 'no deal' Brexit. UHL SRO / Ops Lead ensures Local Health Resilience Partnerships, Local Resilience Forums and Local A&E Delivery Boards are sighted on EU Exit preparation in UHL. Awareness raised with UHL core service leads (for seven identified areas) in line with the NHSE guidance. UHL EU Exit Group established and escalation structure. Analysis of performance and usage quotas at CMG and Executive forums. UHL core service leads notified about national guidance and review of local controls and contingency arrangements. 					
Current Risk Rating:					
Risk category:	Consequence (C)	x	Likelihood (L)	=	Risk Rating
Service Disruption	4	x	3	=	12

Action Plan:

Action Plan	Assigned to	Start date	Due date	Done date	Cost £
Monitor and review government position and technical notices/ advice as it is published by the Government / NHSE/NHSI/NHS Providers. The target risk rating will be adjusted based on actions the Trust can take to mitigate level of risk.	SRO / Ops Lead	Jan 2019	March 2019		
Monitor stock levels and maintain regular liaison with UHL supplies Dept	Service Managers	Jan 2019	March 2019		
Test existing contingency arrangements and incident management plans against EU Exit assessment scenarios	Service Managers	Jan 2019	March 2019		
Escalate progress on EU Exit preparation to Executive Team and Trust Board meetings	SRO / Ops Lead /	Jan 2019	Monthly.		
Review capacity and activity plans, as well as annual leave, on call and command and control arrangements around the 29 March 2019 (but at this point there is no ask to reduce capacity or activity around this time)	COO / Deputy COO	Jan 2019	March 2019		

Target Risk Rating: Tolerate risk until national position is known.

Risk category:	Consequence (C)	x	Likelihood (L)	=	Risk Rating
Service Disruption	4	x	3	=	12

Risk Assessment Approval:

Risk Assessor name	Ops Lead / Emergency Planning Officer / Risk & Assurance Manager	Line Manager name	Stephen Ward, SRO	Date approved	29/01/2019
Approved by Board: name	EPB Jan 2019	Evidence	EPB Minutes	Date	29/01/2019