

	The Welsh NHS Confederation response to the External Affairs and Additional Legislation Committee follow-up inquiry into how the Welsh Government is preparing for Brexit – health and medicines.
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### Introduction

1. The Welsh NHS Confederation, which represents the seven Health Boards and three NHS Trusts in Wales, welcomes the opportunity to comment further on Wales’ preparedness for exiting the European Union. As you noted in your letter, this is done amid ongoing negotiations between the UK Government and the European Union (EU) and the continued uncertainty about the eventual outcome. The comments below should be seen in this light, with developments happening on a weekly basis between the EU and the UK Government, the UK Government and the Welsh Government and the information shared and engagement between the Welsh Government and the NHS in Wales.
2. The Welsh NHS Confederation has previously provided detailed responses to the External Affairs and Additional Legislation (EAAL) Committee inquiries into Brexit, namely:
  - In November 2016 we provided a written response to the EAAL Committee consultation on the implications for Wales of Britain exiting the European Union;
  - In October 2017 we provided a written response and gave oral evidence to the EAAL Committee inquiry into resilience and preparedness: The Welsh Government’s administrative and financial response to Brexit.
  - In January 2018 we attended and provided evidence to the EAAL Committee roundtable discussing the implications of Brexit for Wales.
  - In February 2018 we responded to EAAL Committee inquiry into Wales’ future relationship with the European Union.
3. Our response on this occasion highlights the key developments following our written response in February 2018 in relation to how the Welsh Government and the NHS in Wales are preparing for the UKs departure from the EU.

### Key issues for health and social care organisations

4. As previously highlighted to the Committee, there are a number of issues for health and social care organisations as the UK prepares to leave the EU. Due to the issues being a concern for a range of health and social care organisations the Welsh NHS Confederation’s Policy Forum published a briefing in June 2018, *“The key issues for health and social care organisations as the UK prepares to leave the European Union”*,<sup>i</sup> which was endorsed by 20 organisations. The Policy Forum briefing is submitted with this written response because it provides the most up to date information around the key issues and puts forward the desired outcomes when the UK leaves the EU. The outcomes highlighted with the briefing include:

- a. A continued domestic and international pipeline of high calibre professionals and trainees in health and social care to deliver sustainable NHS, social care, and independent health services to ensure the best care for our communities and people who use our services.
- b. Continued recognition of professional qualifications for people trained in the EU27 and mechanisms to alert each other of health and social care professionals who are prohibited or restricted to practice.
- c. Protection of workers' employment rights and patients' rights post-Brexit.
- d. Health and social care organisations across the UK continuing to participate in EU collaborative programmes, and lead and contribute positively to European Reference Networks and other collaborative EU networks, such as those which support medical research, post-Brexit.
- e. Patients continue to benefit from early access to the wide range of innovative health technologies available on the EU market and not miss out on participation in EU clinical trials.
- f. Regulatory alignment for the benefit of patients and the public's health, so that UK patients continue to have early access to the wide range of innovative health technologies available.
- g. Reciprocal healthcare arrangements preserved.
- h. Robust co-ordination mechanisms on public health and wellbeing with the same or higher level of safety guaranteed through domestic standards and regulations.
- i. A strong funding commitment to the healthcare sector, promoting solutions to minimise any additional pressures which may result from Brexit, as well as advocating for any loss of EU funds to be offset by alternative funding.
- j. Continued engagement between the Welsh Government and the UK Government to ensure the interests of the health and social care sector in Wales are safeguarded during the withdrawal process and beyond.

### **Welsh Government and UK Government**

5. As previously highlighted, the exact terms on which the UK will leave the EU are not yet clear, and this presents challenges in terms of forward planning for the Welsh Government. However, over the period since the referendum the Welsh Government has engaged with health and care bodies to identify areas that may be affected by leaving the EU, including NHS Executive Board and Wales NHS Partnership Forum.
6. The Welsh NHS Confederation and our members have been working with Welsh Government officials to consider and assess the scale of impact for Welsh health and social care services post Brexit, including contingency options. Since October 2017 the Welsh NHS Confederation has agreed to be the main contact for coordinating specific Brexit actions across NHS organisations and working with the Welsh Government. This work is intended to support discussions on managing risks effectively within health and social care and will support the development of a shared work programme considering priority areas including; workforce, professional qualifications, reciprocal healthcare, regulatory issues, medicines, research and innovation, procurement and competition law, public health, disease prevention and employment rights. Other relevant areas will also be considered as they arise.

7. Since our previous written submission in February 2018 the Welsh Government has now established a Health and Social Care EU Transition Leadership Group, of which the Welsh NHS Confederation is a member. The Leadership Group met for the first time in August 2018 and will now be meeting on a monthly basis. The vision of the Group is to maintain a strategic oversight of arrangements for EU Transition, including risks and mitigation actions pre and post EU exit. The purpose of the Group is to advise the Director General for Health and Social Services in Wales on: the challenges faced by Welsh services, including potential impacts of Brexit on services and on outcomes for people and patients; the development of appropriate responses to address challenges and potential impacts, and co-ordinated actions by service providers and partners, including the Welsh Government's strategy on EU transition for health and social services; the status of contingency planning for different credible scenarios, including 'no deal'; and encouraging co-ordinated communication by service providers and partners, with the public and other stakeholders, across Wales and beyond.
8. Specifically in relation to medicines, during the NHS Chief Pharmacists monthly meetings the Welsh Government has made the Chief Pharmacists aware of the work being undertaken by the Department of Health and Social Care in England to assess risks to the UK medicines supply chain. The NHS Chief Pharmacists expect to have further discussions regarding mitigating actions once further information is made available and following the UK Government Technical Notices issued on 23 August 2018 around the planning for a potential no-deal Brexit. The Chief Pharmacists will continue to discuss Brexit during their regular conference calls and Brexit has been added as a standing agenda item in their face to face meetings.
9. On 23 August the UK Government published the first batch in a series of technical notices advising businesses and citizens what they need to do to prepare for an unlikely 'no-deal' Brexit scenario. The Secretary of State for Health and Social Care, Matt Hancock, **wrote to all health and social care organisations**<sup>ii</sup> in England to update them on the UK Government's ongoing preparations to protect patients and health and social care services in the event of a March 2019 "no deal" scenario. The letter sets out what the health and social care system needs to do to step up preparations on the ground to ensure business continuity. In particular it announces a new scheme to ensure a sufficient and seamless supply of medicines, in collaboration with pharmaceutical companies, which will mean that hospitals, GPs, pharmacies and patients will not need to "stockpile" unnecessarily. Under the scheme, pharmaceutical companies are asked to ensure they have an additional six weeks supply of medicines in the UK on top of their own normal stock levels. This is the current planning assumption but will be subject to revision in light of future developments. The scheme also includes separate arrangements for the air freight of medicines with short shelf-lives, such as medical radioisotopes. The UK Government is working closely with companies who provide medicines in the UK to ensure patients continue to get the medicines they need. On the basis of the work they have undertaken, the UK Government are confident that supplies of medicines to patients can continue unhindered in the event of a no-deal Brexit. The Department of Health and Social Care has also written to **pharmaceutical companies**<sup>iii</sup> and **suppliers of medical devices**<sup>iv</sup> asking for their contingency plans and pinpointing where their concerns lie (e.g.

short-life products, warehousing, distribution) in order to focus national-level support where necessary.

10. The UK Government published the first tranche of a series of papers setting out how the UK plans to deal with a range of issues, including health, in the event that we leave the EU in March 2019 without an agreement. Papers published so far cover:<sup>v</sup>
  - [How medicines, medical devices and clinical trials would be regulated](#)
  - [Submitting regulatory information on medical products](#)
  - [Batch testing medicines](#)
  - [Ensuring blood and blood products are safe](#)
  - [Quality and safety of organs, tissues and cells](#)
  - [Labelling tobacco products and e-cigarettes.](#)
11. Following the UK Government announcements, the Deputy Chief Executive – NHS Wales, Simon Dean, sent a letter (also on 23 August 2018) to all NHS Chief Executives setting out their applicability in Wales, especially around Continuity of Supply. The NHS in Wales has been advised that they do not need to take any steps to stockpile additional medicines beyond their current stock levels and there is no need for clinicians to write longer NHS prescriptions. Brexit will be a key agenda item for consideration at the next NHS Wales Executive Board meeting at the end of September.
12. The Welsh NHS Confederation will be hosting a Brexit Roundtable Event on 11 September. Over 25 health and social care organisations have been invited to the Roundtable event to discuss the key risks for the health and care system in Wales and what action is being taken to mitigate them. The Cabinet Secretary for Health and Social Services and the Minister for Children, Older People and Social Care will be attending the event and we will keep the Committee informed of any developments.

### **Brexit Health Alliance and Cavendish Coalition**

13. As an active member of the [Brexit Health Alliance](#)<sup>vi</sup> and [Cavendish Coalition](#)<sup>vii</sup> we have ensured that any briefings produced or any submissions to the UK Government, House of Lords or Westminster Committees reflect the issues impacting on the health and care system in Wales.
14. Since our previous submission to the Committee the Brexit Health Alliance has:
  - Published a briefing in February: [The impact of Brexit: Patient access to medical research](#).<sup>viii</sup>
  - Published a joint briefing with the Faculty of Public Health in June: [Protecting the public's health across Europe after Brexit](#).<sup>ix</sup>
  - Responded to the UK Government technical notices on 23 August "[Time for planning not panic, says Brexit Health Alliance after government publishes no-deal guidance](#)"<sup>x</sup> and "[No-deal guidance only a first step toward assurance for patients](#)".<sup>xi</sup> As highlighted in the "No-deal" press release the Brexit Health Alliance is calling for "*categorical assurance that patients will continue to get the medicines and treatment they need, no matter what happens in the negotiations. This guidance is a first step, but only a first step, towards*

*that. The NHS will now want to see more comprehensive operational advice on issues such as the stockpiling of medicines and equipment, medical research and public health, in time for them to take robust action locally well before the UK leaves the EU.....Of course the real prize must be no disruption in supply to or from the UK - it may be acceptable to argue about delays to some consumer products at the border - it cannot be acceptable when patient's lives are put at risk. We cannot afford to get this wrong".*

### **NHS Workforce updated figure**

15. According to the latest figures (June 2018), 1420 individuals directly employed by the NHS in Wales identified themselves as EU nationals on the Electronic Staff Record. This equates to 1.6% of the total workforce.<sup>xii</sup> This is a significant number of trained, qualified and dedicated staff who could not be replaced in the short term – for example the percentage of medical and dental professionals working in the Welsh NHS is a higher percentage at 6.1%.

<b>Number of directly employed staff identifying as EU National</b>	<b>September 2016</b>	<b>% of total directly employed workforce</b>	<b>Excluding Unknown %</b>	<b>June 2018</b>	<b>% of total directly employed workforce</b>	<b>Excluding Unknown %<sup>xiii</sup></b>
<b>Add Prof Scientific and Technic</b>	49	1.6%	2.8%	66	2.1%	3.2%
<b>Additional Clinical Services</b>	162	0.9%	1.6%	185	1.0%	1.7%
<b>Administrative and Clerical</b>	95	0.5%	0.9%	96	0.5%	0.8%
<b>Allied Health Professionals</b>	110	1.8%	2.9%	124	2.0%	3.1%
<b>Estates and Ancillary</b>	104	1.2%	2.1%	110	1.3%	2.3%
<b>Healthcare Scientists</b>	31	1.5%	2.8%	37	1.8%	3.1%
<b>Medical and Dental</b>	410	5.8%	7.1%	434	6.1%	6.9%
<b>Nursing and Midwifery Registered</b>	352	1.4%	2.5%	368	1.4%	2.5%
<b>NHS Wales</b>	<b>1,313</b>	<b>1.5%</b>	<b>2.5%</b>	<b>1,420</b>	<b>1.6%</b>	<b>2.5%</b>

## **Conclusion**

16. The Welsh NHS Confederation, on behalf of our members, will continue to highlight the possible implications of Brexit on NHS Wales with the Welsh Government, Assembly Members and our stakeholders. In addition, as a member of the Cavendish Coalition and the Brexit Health Alliance, we will ensure that the impact for Wales is being made clear at a UK level by highlighting the likely effects on Welsh policy and legislation.

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## **References**

<sup>i</sup> Welsh NHS Confederation Policy Forum, June 2018. The key issues for health and social care organisations as the UK prepares to leave the European Union.

<sup>ii</sup> Department of Health and Social Care, August 2018. Government’s Preparations for a March 2019 ‘No Deal’ scenario.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/735742/Govt\\_preparations\\_for\\_potential\\_no\\_deal\\_-\\_letter\\_to\\_health\\_and\\_care\\_sector.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/735742/Govt_preparations_for_potential_no_deal_-_letter_to_health_and_care_sector.pdf)

<sup>iii</sup> Department of Health and Social Care, August 2018. EU Exit – Human medicines supply in a March 2019 ‘no deal’ scenario

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/735745/brexit-medicines-letter.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/735745/brexit-medicines-letter.pdf)

<sup>iv</sup> Department of Health and Social Care, August 2018. EU Exit – Medical Devices and Clinical Consumables supply in a March 2019 ‘no deal’ scenario.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/735746/brexit-medical-devices-letter.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/735746/brexit-medical-devices-letter.pdf)

<sup>v</sup> <https://www.gov.uk/government/collections/information-for-the-health-and-care-sector-about-planning-for-a-potential-no-deal-brexit>

<sup>vi</sup> Brexit Health Alliance, [nhsconfed.org/BrexitHealthAlliance](https://nhsconfed.org/BrexitHealthAlliance)

<sup>vii</sup> Cavendish Coalition, [nhsemployers.org/your-workforce/need-to-know/brexit-and-the-nhs-eu-workforce/the-cavendish-coalition](https://nhsemployers.org/your-workforce/need-to-know/brexit-and-the-nhs-eu-workforce/the-cavendish-coalition)

<sup>viii</sup> Brexit Health Alliance, February 2018. The impact of Brexit: Patient access to medical research.

<sup>ix</sup> Brexit Health Alliance, June 2018. Protecting the public’s health across Europe after Brexit.

<sup>x</sup> Brexit Health Alliance, August 2018. Time for planning not panic, says Brexit Health Alliance after government publishes no-deal guidance.

<sup>xi</sup> Brexit Health Alliance, August 2018. Brexit Health Alliance: No-deal guidance only a first step toward assurance for patients

<sup>xii</sup> This is the number recorded on the Electronic Staff Record as at November 2017. 34,563 individuals nationality are unknown/ blank therefore the number could be higher.

<sup>xiii</sup> Over 34,500 people, 38% of the workforce, do not state which nationality they are on the Electronic staff record.