NHS trusts struggling to produce Brexit plans amid continuing uncertainty
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NHS trusts are struggling to produce contingency plans for Brexit because of the continuing uncertainty about the UK's future relationship with the European Union, reveals an investigation published by The BMJ today.

Many have been unable to accurately forecast how crucial areas such as supply chains, medicines, and workforce will be affected after the 29 March exit deadline.

The BMJ sent Freedom of Information (FOI) requests to all 231 NHS trusts in England and 26 health boards across Scotland, Wales, and Northern Ireland and received 182 responses (a 71% response rate) - 161 from NHS trusts and 21 from health boards.

The analysis found that only 9% of English trusts (15 out of 161 that responded) have established a committee or body to oversee preparations for Brexit. Out of the 21 health boards in Wales, Scotland, and Northern Ireland that responded (out of a total of 26), 14 have set up a committee.

The BMJ also asked trusts and health boards to disclose any current risk assessment related to Brexit.

Only a quarter (26%) of those that responded (47 out of 182) were able to disclose this information, with a number saying they were still assessing the risk. Those that have been done are largely thin on detail and similar risks have often been assessed differently from trust to trust.

Saffron Cordery, deputy chief executive of NHS Providers, the body representing NHS trusts in England, told The BMJ: "All of the uncertainty has just exacerbated an already difficult situation. Trusts have planned as far as they can, but so much of this is reliant on central government action."

The Department of Health and Social Care, which is overseeing central coordination of risk areas such as medicines, food, medical devices, and clinical consumables, has said trusts are responsible for their own contingency activity. On Monday 17 December, the health secretary Matt Hancock told the BBC's Newsnight that the Department had instituted "full no-deal planning" for the NHS.

Hancock has sought to reassure MPs that NHS supplies, workforce, and medicines regulation will be secure in the event of a no deal "if everybody does everything they need to do." But with the terms of Brexit still uncertain, much of the detail of what trusts actually "need to do" is not clear.

Trusts have drawn up lists of contracts that could be affected by a "no deal," but most have been unable to move beyond basic scenario planning for Brexit.

The investigation did find that some trusts and health boards are taking action to support their EU staff, including paying for them to achieve settled status, while others have issued instructions not to stockpile medicines or write longer prescriptions for patients in the weeks leading up to Brexit, as requested by the Government.

For example, Royal United Hospital Bath NHS Trust, which has set up a Brexit committee, said it would advise doctors not to overprescribe, but it said that some products, such as furosemide and EpiPens, were "already in short supply."

Commenting on the findings, Martin McKee, professor of European Public Health at the London School of Hygiene and Tropical Medicine, said: "The picture painted by these responses is extremely concerning. It is clear that any form of Brexit will have profound implications for the NHS."

He added: "Even though ministers have been
unable to provide reassurance that patients will not die as a result of their policies, they have been unable to offer any useful guidance for trusts. It is inconceivable that the NHS will be prepared for anything other than a situation that, in effect, continues the current arrangements by the end of March 2019."


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