

### December 2020

# **Daily Sitrep - EU Exit questions for Commissioners**

### Introduction

Commissioners (CCGs) should respond **on behalf of commissioning organisation and** also on behalf of the contracted, small non-statutory providers, community interest companies (CICs), independent sector (IS) and primary care providers from whom you commission healthcare services; and should not consider NHS Trusts as they have been asked to complete and return their own SitRep.

- Are there any EU Exit related issues which are expected to impact\* business critical services\*\* until the next daily sitrep is due, for each of the following areas:
  - Supply of Medicines & Pharmacy
  - Supply of Medical Devices & Clinical Consumables
  - Supply of non-clinical consumables, goods and services
  - Supply of blood products, transplant organs and tissues
  - Workforce
  - Estates & Facilities
  - Clinical Trials
  - Data sharing, processing & access
  - Reciprocal Healthcare
  - Cost recovery
  - Partner organisations that are essential to delivery of healthcare.

#### **Guidance**

Are there any EU Exit related issues which are expected to impact\* business critical services\*\* until the next daily sitrep is due, for each of the following areas:

Please indicate whether you are expecting any potential disruptions to business critical services, as a result of the UK's transition period with the EU, ending on 31 December 2020. If the answer is 'no', please indicate **No** and there is <u>no need to</u> continue.

Only complete the following (a-k), if the end of transition period is likely to cause a disruption to the delivery of business critical services. Please respond **Yes** against the relevant category(s), highlighting issues other than existing COVID-19 related operational challenges or staffing absences reported elsewhere. This may include any changes to services (see Annex for more details) related to:



- a. Supply of Medicines & Pharmacy
- b. Supply of Medical Devices & Clinical Consumables
- c. Supply of non-clinical consumables, goods and services
- d. Supply of blood products, transplant organs and tissues
- e. Workforce
- f. Estates & Facilities
- g. Clinical Trials
- h. Data sharing, processing & access
- i. Reciprocal Healthcare
- j. Cost recovery
- k. Partner organisations that are essential to delivery of healthcare

Should you enter **Yes** in a-k please ensure this is concurrently raised with your Regional Incident Team/Regional ICC as per your established EPRR processes and via business as usual processes where appropriate.

\*Impact - further disruptions to business critical services, attributable to EU Exit end of transition rather than COVID-19 or winter pressures.

\*\*Business critical service - defined as one whose loss or disruption would cause serious interruption to care delivery, risks to the health and safety of patients, public or staff, an affect upon service capacity, reputational damage, financial damage or contravening a legal or statutory obligation. (Trust Business Continuity Plan)

## Annex: Potential EU Exit related disruptions

Areas	Description of potential issues
a. Supply of Medicines &	Stock issues/transport delays for:
Pharmacy	all prescribed medicines
	over the counter medicines
	<ul> <li>nutritional products</li> <li>medicines that are derived from blood plasma such as</li> </ul>
	immunoglobulin, albumin, and clotting factors
	vaccines
	medicines for clinical trials
b. Supply of Medical	Stock issues/transport delays for:
Devices & Clinical	any medical devices or clinical consumables e.g. surgical
Consumables	instruments, gloves and gowns
c. Supply of non-clinical	Stock issues/transport delays for:
consumables, goods and	goods and services that do not relate to supplies of medicines or
services	medical devices e.g. laundry (indicate also f) services and food
	(indicate also f).
d. Supply of blood	Stock issues/transport delays for:
products, transplant	blood products, transplant organs and tissues
organs and tissues	
e. Workforce	any issues with capacity and workforce including
	employed/contracted or bank and agency staff, not related to staff
	on leave or existing sickness absences, but related to immigration
	issues such as employment contracts, settlement status, visa,
	professional qualification recognition, transport to workplace.



f. Estates & Facilities	Interruptions related to:
	buildings and facilities, redeveloping existing premises, or the
	disposal or demolition of redundant resources
	maintenance and systems such as heating and lighting
	laundry and sterile services (indicate also c)     distant people for vulperable patients (seeds about there be supply)
	<ul> <li>dietary needs for vulnerable patients/goods should there be supply chain disruption of any food items (indicate also c).</li> </ul>
g. Clinical Trials	Interruptions to continuity of research or supply:
g. Official Thats	participation in and recruiting to multinational trials and running
	multistate trials that involve UK patients.
	continuity of supply of products for clinical trials and investigations
	e.g. IMPs, Medical devices, IVDs, ATMPs, radioisotopes,
	biosamples, consumables etc; note also a
	disruptions of data flows, as per note h.
h. Data sharing,	Interruptions to data flows due to:
processing & access	transfers of data, storage and access
	data adequacy     data protection
i. Reciprocal Healthcare	data protection  Issues related to:
i. Rediprodui ricultiloare	Services offered to EU citizens who visit the UK after 31 December
	2020 and whose country does not have a reciprocal healthcare
	agreement with the UK. Those visitors will be charged for accessing
	NHS healthcare, unless it is a service that would be free of charge
	for everyone, or they are exempt from charging; including
	UK nationals living and working in the EU/EFTA on 31 December
	2020, who will continue to be entitled to Member State-funded
	healthcare under their domestic rules and a Member State issued
	<ul><li>EHIC.</li><li>UK state-pensioners (S1 holders) or people exporting a UK benefit,</li></ul>
	resident in the EU/EFTA on 31 December 2020, who will continue to
	be entitled to UK-funded healthcare, including a UK-issued EHIC.
	• EU/EFTA nationals resident in the UK on 31 December 2020, who
	will continue to be entitled to access the NHS and a UK-issued
	EHIC.
j. Cost recovery	Issues related to:
	recovering costs from individuals receiving treatment who are non-
	UK nationals. EU nationals living in the UK would need settled
L Doubon	status to access NHS services for free.
k. Partner organisations that are essential to	Interruptions caused (directly or indirectly) by partner organisations'
delivery of healthcare	difficulties or organisations from which you commission or subcontract services (including clinical and non-clinical support services).
delivery of fleatificate	Applicable to for example CCGs commissioning clinical services
	from an Independent Sector provider, or an acute hospital
	contracting domestic services from an independent cleaning
	company.
	Also relevant to the secure and detained (or other health and
	justice) settings, although health and justice issues are already
	captured in a separate collection.