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Chairs
Chief Executives

Copy to: HR Directors
Employee Directors
Communications Leads
Finance Directors
Resilience Leads

19 December 2018

Dear Colleagues,

EU WITHDRAWAL UPDATE

This letter provides a summary of the key developments and announcements relating to EU Withdrawal which have taken place since my last letter of 9 November.

The Home Office's 'Settlement Scheme' for EU27 and EEA citizens

As trailed in my letter of 9 November, the Home Office is currently running a pilot of its 'Settlement Scheme' for EU citizens living in the UK post-Brexit. The pilot is open to all staff working in the health and social care sectors UK-wide. The pilot opened on 3 December and will close at 23:59 on 21 December. The pilot has allowed workers in these sectors the early opportunity to confirm their settlement status in the UK post-Brexit. The plan is that the Scheme proper will open to all EU citizens in the UK from early next year. EU Withdrawal Team in my Directorate has been in close contact with your HR Directors, making sure they have information from the Home Office about the pilot, via us, as soon as we have it. HR Directors have also been provided with 'lines to take' about the Scottish Government commitment to cover the settlement scheme fee being imposed on EU citizens by the Home Office. Further information will be circulated in the coming weeks.

UK Government Policy Paper on Citizens' Rights

On 6 December, the UK Government published a policy paper on 'Citizens' rights in the event of a no deal Brexit'. The policy paper explains the UK Government's announcement on what would happen to citizens' rights in the event of the UK leaving the EU without a deal, both for EU citizens in the UK and UK nationals in the EU. Crucially, the paper makes clear that EU citizens and their family members living in the UK are welcome to stay in the UK in the event of a 'no deal' scenario. EU citizens and their family members resident in the UK by 29 March 2019 will be able to stay and carry on with their lives broadly as now. They will

continue to be able to work, study, and access benefits and services in the UK on the same basis after we exit the EU as they do now. For further details, the policy paper can be found at:

<https://www.gov.uk/government/publications/policy-paper-on-citizens-rights-in-the-event-of-a-no-deal-brex-it>

UK Government Letters to NHS Trusts, etc

On 7 December, the UK Secretary of State for Health and Social Care, Matt Hancock, wrote to all NHS Trusts, suppliers and manufacturers of medicines, and suppliers of medical devices and clinical consumables. The letters provide an update on no deal planning, a change to the UK Government's Planning Assumptions, and updates on the ongoing work on stockpiling of medicines, medical devices and clinical consumables to cover possible disruption to supply chains in the event of a no deal outcome to the negotiations with the EU, work on supply of blood and other products of human origin, vaccines, research and clinical trials. Full details of the letters can be found at:

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

UK-wide and Scottish contingency planning

As set out in my letter of 9 November, the Scottish Government has been intensifying its preparations for all EU exit possibilities in order to protect the Scottish economy, our businesses and workers. Alongside work being led by the UK Government on a UK-wide basis, the Scottish Government is now working closely with local authorities and other key partners and service providers in detailed civil contingencies planning around many aspects of an EU Exit which might have an immediate and direct effect on our citizens.

To support Health Boards further work is being taken forward and includes:

- (1) Scottish Government Health Resilience Unit establishing an EU Exit Health Resilience Group, to support co-ordination across Scottish Government and its partners. The group will coordinate health resilience activity including reviewing priority risks, assess mitigation measures and ensure planning information is shared with Boards to support NHS service delivery;
- (2) A Short Life Working Group set up by NSS National Procurement, including both National Procurement and Board Procurement leads to assure the supply chain in terms of identifying, triaging and managing any shortages;
- (3) the Scottish Resilience Partnership's Brexit sub-group, with representation from Jeff Ace and the Scottish Ambulance Service. NHS Boards and local authorities are also represented on the regional and local resilience partnerships; and
- (4) NHS Scotland workshops being planned for January. These will be in addition to and complement those planned by Resilience Partnerships and are being led by the EU Exit Resilience Group. Further details will be issued separately.

At a local level Boards should continue the work to identify and take steps to mitigate risks relating to EU Exit, taking account of planning assumptions and potential impacts across the Board's operations. There should also be a process of continuous review which allows

issues to be appropriately escalated and treated in a timely way, and this may include tracking any emerging trends within their services. Boards should also be engaging with resilience partners to understand interdependencies and impacts, e.g. linking with local authorities on social care sector.


As you will already be acutely aware, business continuity is the foundation of NHS service delivery. On a day to day basis, Boards are operating against a backdrop of challenges. This will include forthcoming winter pressures, as well as EU Exit. Boards should therefore now be reviewing and mapping their business continuity arrangements and organisational resilience against some of the likely EU Exit impacts, working with clinicians, resilience, procurement and other key colleagues as required.

Communications

The importance of clear, consistent communications – internally with health and social care staff, and externally in terms of public and patient messaging and also media handling – is vital. I hope to be in a position to provide you with further guidance on communications, including how and when you should be communicating both internally and externally, in early January. At this stage, Boards may wish to ensure that their Communications leads are linked into any local partner groups, Scotland-wide arrangements, and the Scottish Government.

I hope that these regular updates are useful in ensuring that Boards are fully engaged in all the ongoing work towards ensuring their organisations are operationally prepared for EU Exit. To this end, I will aim to provide a further update to you with details of ongoing work in these areas very early on in the New Year. It would be helpful if you could ensure that the information in this letter is cascaded across your organisation, as appropriate, and that the necessary conversations are taking place.

Yours sincerely,

A handwritten signature in black ink that reads "Shirley Rogers". The signature is written in a cursive, flowing style.

Shirley Rogers

Director of Health Workforce, Leadership and Service Transformation