

Project name	
Brexit – No deal	

Brexit no deal preparation

Health and Wellbeing Board update

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1 Brexit No deal Risks and Response

A no deal Brexit introduces risks of both:

- Acute impacts of border disruption associated with the exit event
- Structural changes caused by exit or anticipation of these

In many cases the same issues apply to both these mutually dependent sectors. Challenges in either sector can impact the other through Delayed Transfer of Care or delays in treatment increasing need for care.

Central Government has published guidance for both social care and health:

- [social care providers](#)
- [supplying medicine and medical devices](#)
- [Operational readiness for health and social care](#)

ECC will be writing shortly to all social care providers to remind them of the guidance documents and to encourage them to draw up appropriate contingency plans.

Regionally we are linked in through emerging work from ADASS, and any Government organised local events, to consider implications and planning for Brexit.

In many cases the risks need to be managed nationally:

- Guidance advises against localised actions such as stockpiling.
- Measures for mitigation are centrally controlled – e.g. import of medicines or immigration policy.

However, we are able to take local steps we've included potential actions below.

2 The acute impacts of disruption associated with a no deal exit

2.1 Essex response

The national risks from issues at the Border have been widely commented on – shortages of medicines, scarcity of some types of food, transport disruption, possible fuel distribution issues.

Locally the [Essex Resilience Forum](#) has assessed local risk and managing mitigations including localise transport risks. It is important that we manage the planning and response to acute issues through the Forum. We are working to confirm contact lists.

2.2 Business continuity

Partners will already have BCP plans for winter weather which can be used for the basis for localised travel or fuel disruption. There are benefits in sharing ideas for improved resilience:- e.g. encouraging the take up of leased electric vehicles in key staff to reduce fuel dependency, reviewing and publicising car share arrangements and matching tools, reviewing viability of childcare cover for key staff in case of local school disruption, reviewing plans for use of volunteer.

2.3 Demand management

Existing work on demand management will help. As potential dates for a no deal exit now fall in winter, we should look at support for the [NHS Winter campaign](#) including promotion to businesses.

3 The impacts of structural changes caused by a no deal exit

3.1 Potential impacts

The impacts potentially caused by a no deal exit include:

- Recruitment and retention - Settlement
- Supply chain for equipment - supply of non-clinical consumables, goods and services;
- Demographics
- Entitlements and charging for services

We have some options to develop localised responses.

3.2 Recruitment and retention

- Promotion of the settlement scheme and other activity to make existing EEA staff continue to feel welcome and valued.
- Review how to promote the benefits of Essex as a place to live and work to health and social care workforce in a competitive national market.
- Review of support measures such as [key worker housing](#) including options for social care.
- Review of plans for training and recruitment from existing providers in region.

3.3 Supply chain

- After a no deal exit the administration of importing may be more significant than the effect of tariffs themselves. Review scale of importing and identify existing capabilities or customs agent/ freight forwarding partners will help. Funds are available for [customs declaration](#) training and software.

3.4 Demographics

- Future immigration policy will influence population growth. Bilateral agreements of healthcare and EU protections of UK citizens settlement rights mean that there is no immediate risk of repatriation of citizens overseas. However, the level of population retiring abroad may decrease. Reviewing changes in demographics will help identify trends.

3.5 Entitlements and charging

- Government guidance on [charging for NHS services](#) has been published. Promoting the settlement scheme to vulnerable groups will avoid potential “windrush” type issues for EU citizens eligible to apply, but not doing so.