

January 2019

PSNC Briefing 005/19: Key actions for pharmacy contractors to prepare for a no-deal exit from the EU

The Department of Health and Social Care (DHSC) issued EU Exit Operational Readiness Guidance in late 2018. This guidance sets out the actions that contractors should take to prepare for a no-deal exit from the EU and can be found [here](#). It was highlighted in a [PSNC news story](#) in late December 2018.

This PSNC Briefing highlights aspects of the guidance that are of most relevance to community pharmacy contractors.

At the current time of writing, contractors have been asked to take particular note of Action Card 1 of the guidance (pages 16-24), which indicates that all providers of NHS services, including NHS trusts and foundation trusts, primary care organisations and independent sector organisations which provide NHS services, *'must consider and plan for the risks that may arise due to a 'no-deal' exit'*.

Key actions for contractors as part of business continuity planning for EU exit readiness include:

- *Undertake an assessment of risks associated with EU Exit by the end of January 2019, covering, but not limited to:*
 - *The **seven key areas** identified nationally and detailed below.*
 - *Potential increases in demand associated with wider impacts of a 'no deal' exit.*
 - *Locally specific risks resulting from EU Exit.*

The seven key areas are:

1. Supply of medicines and vaccines;
2. Supply of medical devices and clinical consumables;
3. Supply of non-clinical consumables, goods and services;
4. Workforce;
5. Reciprocal healthcare;
6. Research and clinical trials; and,
7. Data sharing, processing and access.

Contractors – owners, board directors and officers/senior managers of the business – should assess the implications of the UK's exit from the EU for their business and review their business continuity plans. DHSC advises that assessment plans and incident management plans should be tested before the end of February 2019 (which can only be so far as is possible).

Scope to mitigate one of the main risks for community pharmacy - obtaining medicines and medical devices for supply to patients - will be limited, because DHSC advice is that contractors should not stockpile additional medicines or medical devices beyond business as usual stocks. Other mitigations include the concession price

mechanism, which is already in place, and a system for Serious Shortage Protocols (SSPs), which is being introduced.

PSNC discusses concession pricing regularly with DHSC, and PSNC and other pharmacy representative groups are discussing the introduction of SSPs with DHSC. PSNC has identified potential implementation issues [here](#).

- *Follow the Secretary of State's message not to stockpile additional medicines beyond their business as usual stock levels. No clinician should write longer prescriptions for patients. The Department's UK-wide contingency plan for the continued supply of medicines and vaccines from the moment we leave the EU is being developed alongside pharmaceutical companies and other government departments.*

Contractors should not stockpile additional medicines beyond business as usual stocks and should continue to report current shortage issues – e.g. to PSNC if a concession price may be necessary.

Contractors should ask staff to reassure patients that the Government has contingency plans for a no-deal exit from the EU and that they should not stockpile additional medicines at home – perhaps also saying that GPs and other clinicians have been asked not to write longer prescriptions for patients. PSNC has produced a leaflet suitable for patients [here](#).

- *There is no need for health and adult social care providers to stockpile additional medical devices and clinical consumables beyond business as usual stock levels. Officials in the Department will continually monitor the situation and if the situation changes, will provide further guidance by the end of January 2019.*

Contractors should not stockpile additional medical devices and clinical consumables beyond business as usual stocks. More guidance is expected from DHSC and PSNC will alert contractors once this becomes available.

- *Continue commercial preparation for EU Exit as part of your usual resilience planning, addressing any risks and issues identified through your own risk assessments that need to be managed locally... that include EU Exit workforce planning.*

Contractors should reassure members of the pharmacy team from other European countries that they have the same rights (including any current registration with the General Pharmaceutical Council) following the UK's exit from the EU.

Contractors should inform staff of the UK's EU Settlement Scheme, which will open fully by March 2019 and will remain open until 31st December 2020 in a 'no deal' scenario, as appropriate.

Contractors should consider any potential impact on staff retainment and recruitment.

- *Continue to update local business continuity plans to ensure continuity of supply in a 'no deal' scenario. Where appropriate, these plans should be developed in conjunction with your Local Health Resilience Partnership. All health organisations should be engaged in their relevant Local Health Resilience Partnership, which should inform Local Resilience Forum(s) of local EU Exit plans for health and care.*

Contractor communication with Local Health Resilience Partnerships is likely to be through Local Pharmaceutical Committees (LPCs). LPCs should ask their local NHS England teams about Local Health Resilience Partnerships, if they are not already involved with a partnership.

Currently, DHSC's EU Exit Operational Readiness Guidance is the main source of information on Government plans to maintain the supply of medicines to patients in the event of a no-deal exit from the EU. These plans include (page 7 of the guidance):

- the ‘manufacturers’ six-week stockpile of Prescription Only Medicine and Pharmacy-only medicines imported into the UK, from or via the EU or European Economic Area (EEA);
 - arrangements for air freight where appropriate;
 - additional plans for alternative roll-on, roll-off freight ferry capacity (medicine supplies will be prioritised on these alternative routes);
 - other contingency plans including supply on a named patient basis of medicines licensed overseas (other than the EU); and,
 - the developing plans for SSPs.
- *Ensure that your data and digital assets are adequately protected by completing your annual Data Security and Protection Toolkit assessment. This self-audit of compliance with the 10 Data Security Standards is mandatory to complete by the end of March 2019, but completing it early will enable health and adult social care providers to more quickly identify and address any vulnerabilities.*

Ideally, contractors should complete the new Data Security and Protection (DSP) Toolkit well before 29th March 2019 – PSNC has provided guidance [here](#).

A key data protection issue is the transfer of personal data from the UK to the EU/EEA. DHSC guidance is that such transfers should not be affected in a ‘no deal’ scenario, because ‘it would continue to be lawful under domestic legislation for health and adult social care organisations to transfer personal data to the EU/EEA and adequate third countries in the same way we do currently’ (page 13 of the guidance).

Finally, contractors are asked to note that DHSC has set up a National Operational Response Centre, with support from NHS England, NHS Improvement and Public Health England. Also, that NHS England and NHS Improvement plan to establish an Operational Support Structure for EU Exit, which will operate at national, regional and local levels. Email contacts for regional EU exit leads are listed in the guidance.

The full EU Exit Operational Readiness Guidance can be found [here](#). PSNC will notify contractors as and when further guidance becomes available.

If you have queries on this PSNC Briefing or you require more information, please contact [Gordon Hockey, Director of Operations and Support](#).