



SPiC Members

Useful Information –Preparing for a ‘No Deal’ Brexit

Contingency Planning

A ‘No Deal’ Brexit could affect your care business. If you have not already done so consider looking at your policies, plans and procedures to consider and minimise any potential impact to your ability to provide continuity of care to the people you support.

Your insurance company might also be able to provide you with further advice on whether your policy may provide any cover for the contingencies arising from a ‘No Deal’ Brexit. You may wish to contact them for any additional information they may have prepared for their policyholders.

The following are some things you might consider including as part of your contingency planning. There may also be other aspects you wish to consider significant for your business to include and plan accordingly:

1. Availability of medicines and medical devices
2. Availability of personal hygiene products
3. Availability of personal protective equipment (PPE)
4. Food: continuity of supply and safety
5. Utilities (electricity, gas, water, heating fuel, etc.)
6. Telephones: mobiles and landlines
7. Transport & Access to fuel for vehicles
8. Requests from councils or NHS commissioners
9. Workforce considerations

1. Availability of medicines and medical devices

Medicines and medical devices are manufactured and traded internationally and at present, the UK is part of the EU network of approvals and trade.

However, after Brexit, particularly if there are no agreed transitional arrangements, resulting from the UK leaving without a deal with the EU, there could be supply difficulties and increased tariffs which may affect the availability and prices of some products.

Such difficulties could affect any of us, as individuals, but in some cases, care providers may be the only people who can ensure that people have access to the products they need.

You should continue to manage medicine and vaccine supply issues in the usual way.

If you are concerned about any supply issues, whether or not they are related to Brexit, report them through your community pharmacist.

If you experience disruption to your supplies after exit day then [contact the National Supply Disruption Response centre \(NSDR\)](#).

Help with supply of medical devices, clinical consumables and non-clinical goods and services

Start by following your usual processes. Check with your supplier or, where relevant, with other teams in your organisation.

Consider if alternative products are available.

If this does not satisfactorily resolve the issue, or if you have any other concerns around the supply of medical devices, clinical consumables, and non-clinical goods and services, contact your Director of Adult Social Services, relevant local authority EU Exit leads, or talk to your [Local Resilience Forum](#).

If you experience disruption to your supplies after exit day, contact the [National Supply Disruption Response centre \(NSDR\)](#).

If at any stage disruption to the supply of medical devices, clinical consumables and/or non-clinical goods and services poses a risk to service delivery, it is important to notify your local commissioner, director of adult social services and the Care Quality Commission as soon as possible.

It is a good idea to review your current Medicine Administration Charts (MAR), look at what products are critical for each person you support and consider what contingency plans you can put in place to mitigate risks to them from interruption to supply.

The Government is currently advising that “...There is no need to change the way that you order prescriptions or take your medicines. Always follow the advice of GPs and other health professionals who prescribe your medicines and medical products. There are enough medicines and medical products to meet current needs but if patients order extra prescriptions, or stockpile, it will put pressure on stocks, meaning that some patients may not get the medicines they need...”

Continence pads

The NHS has provided guidance on continence products:

www.nhs.uk/conditions/urinary-incontinence/incontinence-products/

If you are not responsible for supplying continence products do reassure yourself that there are arrangements in place to make sure the people you support have access to the products they need and that alternative arrangements are in place should normal supplies be disrupted.

If you are responsible for supplying continence products, you might want to consider reusable alternatives that would be safe and fit for purpose should disposable products not be available. A thorough risk assessment should be carried out and in conjunction with appropriate medical professionals consider whether there are any skin integrity risks associated with the use of reusable products and factor these into your risk assessments and contingency plans, including the need for any additional staff training or support.

2. Availability of personal hygiene products

The same considerations will apply to other items used by the people you support and staff on a daily basis, consider access to cleaning products, toothpaste, emollient creams, moisturisers etc. You may consider keeping a small back-up stock of items used most frequently by your staff, such as handwash or disposable towels just in case normal supplies are disrupted.

You might also consider alternative suppliers of products and check what contingency plans your current suppliers have in place to minimise disruption to your supplies.

3. Availability of personal protective equipment (PPE)

Where there is a need for single-use equipment you need to make sure that you have access to sufficient supplies to ensure that you do not place your care workers at risk.

Consider how and where you would store and manage any additional stock to ensure its availability, safety and quality when used, making sure you have contingency plans to manage the continuity of your supplies.

Contact your suppliers to understand what arrangements for stock holding and distribution is available to you as a customer.

Consider how you would manage any potential supply shortages in disposable gloves and aprons.

4. Food: continuity of supply and safety

Transitional arrangements for the food supply chain would be put in place as part of an agreed Withdrawal Agreement but in the case of a 'No Deal' Brexit the need for additional border checks may slow down or prevent the supply of foods, particularly fresh fruit and vegetables, currently sourced from the EU.

You may want to consider (or talking to clients you support at home or their families/representatives):

- holding additional stocks of more non-perishable (tinned, dried) foods 'just-in-case';
- having additional frozen food stocks in freezers.

Make sure that staff understand the meanings of and importance of "Best before", "Use by" dates as well as "Display Until" or "Sell By".

- Foods used after their "Best Before" dates will still be safe to eat but may not taste as good.
- Foods should not be used after their "Use By" date as they will not be safe to eat.
- Some foods may carry a "Display Until" or "Sell By" date. These dates tend to be shown in-store, on shelves and are used for stock control purposes by the retailer. They are not required by law and are instructions for shop staff, rather than customers.
- The important dates are the "Use By" and Best Before" dates.

More information on this is available from the Food Standards Agency's website:

www.food.gov.uk/safety-hygiene/best-before-and-use-by-dates

The NHS has also published guidance on food labelling:

www.nhs.uk/live-well/eat-well/food-labelling-terms

5. Utilities (electricity, gas, water, heating fuel, etc.)

If mains services are affected then you may wish to consider contingencies such as:

- using temporary heating or lighting devices, including a safety assessment before they are used;
- identifying a “place of safety” for the person, deciding when such a place of safety would be needed and knowing who will be responsible for ensuring they reach it.

6. Telephones: mobiles and landlines

Continuity of your communications systems is vital for continuity of your business but, as we saw in December 2018, one day of data-outage by O2 exposed problems for some care providers in getting access to rotas, care plans, etc.

If you have not done so already, make sure you review your contingency arrangements and put appropriate measures in place.

7. Transport and Access to fuel for vehicles

SPiC has liaised with the local authorities and have been assured that fuel shortages are not expected, we have however requested that care staff are considered as essential workers should any fuel shortage contingency measures be put into action. We have requested that they ensure that the local emergency planning team understand that care sector staff are essential users and priority workers should any LA contingency plans come into effect for fuel shortages.

Although we have been advised nationally and locally that it is unlikely that fuel supplies will be affected over a long period there may be localised shortages, perhaps due to panic buying.

You may wish to adapt your existing contingency plans for bad weather, etc. to deal with this situation.

To prepare your contingency plans for this situation it would be prudent to keep up to date lists of essential drivers and their car details.

If staff use their own cars to get to and from work or to carry out visits you should review your existing plans and procedures to identify any issues that would prevent you or your staff being able to use their own cars. Car sharing may be worth considering.

A proportionate approach to this is advised, building on any existing plans and for example, making sure you and your staff keep your fuel tanks topped up.

Make sure staff know what to do in the event of a fuel shortage and who to call in the event of an emergency.

If there are major fuel shortages Government contingency plans would come into effect.

You may also want to consider what access there is to public transport for you and your staff and write into your contingency plans what arrangements may be available.

Alternative arrangements may mean that extra time is needed for visits and clients and commissioners will need to be made aware of any knock-on effects on rostering.

8. Requests from councils or NHS commissioners

Our local authorities and NHS commissioners are responsible for producing local contingency plans which feed into national planning processes. In order to do this they may ask you to provide information about your contingency plans and you should comply with reasonable requests.

However, you have the right to challenge unnecessary or burdensome requests for information and seek clarity as to why the information has been requested and how it will be used.

If you are supplying services to a local authority or the NHS you may also reasonably ask them what contingency plans they have in place to enable you to deliver continuity of care to council or NHS-funded clients to make sure your plans are aligned and to minimise duplication of information should similar data requests be made by multiple organisations.

9. Workforce Considerations

“Freedom of Movement”, which is a fundamental right of EU membership, will end when the UK exits the EU, with or without a deal.

At the time of writing the UK does not have a Withdrawal Agreement, ratified by Parliament, in place with the EU.

If the UK leaves the EU with a deal:

- “Transition arrangements” to extend free movement would be agreed.
- A new immigration policy would then be implemented.

If there is a “No Deal” Brexit:

- Freedom of movement will end immediately when the UK leaves the EU.
- EU or EEA nationals entering UK will not have an automatic right to work in the UK.

In either event, non-British nationals who wish to continue to remain in the UK after Freedom of Movement ends will need to apply for settled or pre-settled status.

EU Settlement Scheme

At present, EU, EEA or Swiss citizens, and their families can apply to the UK’s EU Settlement Scheme to continue living in the UK.

If their application is successful, ‘settled’ or ‘pre-settled’ status may be granted.

The EEA includes the EU countries and also Iceland, Liechtenstein and Norway.

At present, Irish citizens or those with indefinite leave to remain may not need to apply for settled status.

If the UK leaves the EU without a deal people will need to be living in the UK before it leaves the EU to apply. The deadline for applying will be 31 December 2020.

Irish citizens and those with indefinite leave to remain in the UK do not need to apply for settled status.

Further information may be found at

www.gov.uk/settled-status-eu-citizens-families

Consider how you will support your non-British workers to gain 'Settled Status', if they so wish.

You should also consider the potential impact of, and how you would manage, any delay or disruption to pre-employment checks for workers.

More information

- We will continue to update our SPiC Brexit website page with new information relating to Brexit for Social Care providers and this can be found at;

<https://www.spic.co.uk/resource-category/brexit-planning/>

- The Care Provider Alliance has useful resources and information available here;

<https://www.careprovideralliance.org.uk/no-deal-eu-exit-planning.html>

- Telford and Wrekin Council website and information;

<https://www.telford.gov.uk/info/20359/food/3725/brexit>

- Shropshire Council website and information;

<https://shropshire.gov.uk/brexit-information-for-residents-and-businesses/>