

From the Director of Primary Care



Via Email

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Dear Donall,

PREPARING FOR EU EXIT

The Department of Health has been leading a programme of work across the HSC to make preparations for EU exit. This work has included developing contingency measures for different scenarios including a “no deal” exit from the EU. I thought it would be helpful to write to you to provide reassurance about the work that has been taking place, which the Hospice will want to factor into its own planning.

Patient welfare is the overriding priority for the Department and the wider Health and Social Care system. Work to support this aim has focussed on three particular areas: the healthcare supply chain (including medicines and devices); cross-border movement and the free movement of people; and data transfer.

A key issue is maintaining access to medicines, medical devices and clinical consumables and the Department is participating in UK-wide contingency arrangements to ensure that patients continue to get the supplies they need, in a timely way. Providers of care should therefore not stockpile medicines but should rely on these UK-wide contingency arrangements.

Current arrangements for reciprocal healthcare (which includes the use of EHIC cards, S1 and S2 routes and the Cross-Border Directive) will continue until the date of EU Exit. The Department will provide further updates and information on reciprocal healthcare arrangements after the UK leaves the EU. It should be noted that we expect cross-border services which are not reliant on European regulations or frameworks, such as the cross-border radiotherapy service at Altnagelvin, to continue.

The Department has developed EU Exit Operational Readiness Guidance which has been issued to health and social care organisations and independent providers in Northern Ireland. The Operational Guidance sets out actions to be taken if the UK leaves the EU

without a ratified deal – a ‘no deal’ exit. This will ensure organisations are prepared for, and can manage, the risks in such a scenario.

A link to the Operational Guidance is provided below. As an organisation delivering health and social care services you should familiarise yourself with the contents of this Guidance and the actions in it. This builds on guidance issued by the Department for Health and Social Care in London.

<https://www.health-ni.gov.uk/department-health-ni-eu-exit-operational-readiness-guidance>

You will no doubt have considered the potential impact of EU Exit on your workforce, including making relevant staff aware of the EU settlement scheme which will fully open by 30th March. Further information on the settlement scheme can be viewed at <https://www.gov.uk/settled-status-eu-citizens-families/applying-for-settled-status>. You will also want to have considered any potential impact on travel, though border disruption is not anticipated at this stage. Guidance on driving in the EU after exit can be viewed at <https://www.gov.uk/guidance/prepare-to-drive-in-the-eu-after-brexite>. You may wish to review these websites regularly as more information becomes available and advice is updated.

Structures have been put in place to deal with any potential disruption caused by EU Exit. At the Department of Health, a Departmental Operations Centre will report into the Northern Ireland HUB being established by The Executive Office. Alongside this, the HSCB and HSC Trusts will have an Operational Support Structure for EU Exit in line with existing emergency planning arrangements which are well-tested for dealing with emergencies – whether that emergency is triggered by EU Exit or not.

In line with normal procedures, independent sector or third sector organisations providing services under contract from an HSC Trust or any other HSC organisation should contact the relevant HSC organisation if they have any queries, or experience any issues which significantly impact on service continuity.

I hope this provides some reassurance of work underway in the Department in relation to EU exit and assistance to you as a service provider. I would like also to take this opportunity to thank you for very valuable role that you and your staff and volunteers play in supporting people living with palliative care needs and those who are important to them.

Yours sincerely,



Mark Lee
Director of Primary Care
Department of Health

