

EU Exit: Suggested Exercise Scenarios

The scenarios contained hereafter are generic in nature and have been written against a single set of risks which have been described by EPRR practitioners. None are region or locality specific and are therefore designed to be adapted by users to suit the needs and context of your organisation.

The scenarios can be used singly to test particular aspects of your Business Continuity Plans or as part of a broader exercise programme to address system wide impacts.

These are not a substitute for any Off the Shelf Exercise related to EU exit assurance which organisations will be required to complete, they are an interim measure to start the process of checking your preparedness for potential impacts of the UK's departure for the European Union.

Each of the scenarios has been reviewed and edited by EPLOs from commissioner and provider organisations and the authors are grateful for their support with this work.

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Scenario A: High Priority Issue - Demand

Three months post EU Exit:

Adult Social Care teams are reporting that they are unable to staff their rotas due to large numbers of vacancies and limited bank staff being available. This is the result of EU workers returning to their home countries as the cost of living in the UK is rising and as a consequence of pre-Brexit austerity measures wage rises not keeping pace with inflation.

The inability to cover shifts is resulting in NHS Trusts being unable to discharge patients due to care packages not being available to provide the necessary community-based support.

The pressures on bed capacity is resulting in excessively high bed occupancy rates and cancellation of elective surgery and other routine procedures.

The issue with Adult Social Care is likely to be ongoing.

Issues to consider:

1. What are the potential short, medium and long-term impacts for the organisation in relation to:
 - a. Staff Welfare inc. sickness and absenteeism
 - b. Patient Safety
 - c. Recovery
 - d. Finance
2. Would there need to be any changes to policies/procedures?
3. Are there any plans the organisations can put in place individually or collectively to help ease the pressures?
4. What are the options for escalation and to whom?
5. What are the key communications issues related to this issue?

Scenario B: Low Priority Issue – Demand

12 months post EU Exit:

There are increases in the numbers of expat citizens living in the EU temporarily coming back to the UK to receive treatment on the NHS. This is having an additional impact on the Trust's workload.

Some of these individuals are also making regular return trips to access repeat medications or being prescribed medication, which is now too expensive because of the drop in the value of the pound against the Euro.

Many UK Nationals who have retired to the EU have now decided to move back to the England permanently because the value of their pensions and other assets have suffered significantly. This latter group are clustering together in the cheaper areas of the country and in some cases claiming additional benefits.

Issues to consider:

1. What considerations are needed in terms of follow up care for those UK citizens who are coming back to the UK to receive treatment?
2. For those UK nationals who chose to permanently live abroad, how do they register for primary care services?
3. What are the potential short, medium and long-term impacts for the healthcare commissioners and providers in relation to:
 - a. Demand for services
 - b. Finance
4. What are the key communications issues related to this issue?

Scenario C: High Priority Issue – Research & Development

Three months post EU Exit:

The Trust has been notified that several of the EU clinical trials and research projects it is participating in have either been cancelled, or their membership has been curtailed due to the change in the UK's EU status.

The project management team for one of the projects has also notified the Trust that following an audit a breach of contract has been identified and the organisation is now required to pay back all the money it was given to fund its participation. The grant ran into tens of thousands of Euros, much of which already been used to fund additional specialist posts and equipment. The current exchange rate is also adding to the repayment costs.

Patients who were previously part of one clinical trial are in uproar as they have been advised that the treatment regime has been withdrawn due to the Trust has being dropped from the research programme. The Trust's Commissioner is refusing to fund the treatment as it is not authorised for use in the NHS.

Affected patients are threatening to go to the media as it is "outrageous" they are not being given a course of treatment which has shown to significantly improve outcomes for their condition. The patients are also concerned that personal data they supplied to the project team is now in the hands of the EU and they want re-assurances that it will be destroyed and not passed on to other agencies.

A Patient Action Group has been formed and they are pursuing legal proceedings against the Trust and the Commissioners. Patient's local MPs are supporting the campaign asking questions in the House to both the Prime Minister and the Secretary of State for Health and Social Care.

Issues to consider:

1. What are potential short, medium and long-term impacts in relation to;
 - a. Staff
 - b. Patients
 - c. Procurement
 - d. Finance
 - e. Research and Development
 - f. Reputation
2. What options are available to mitigate the impacts of this issue on;
 - a. Patients
 - b. The organisation
 - c. Future involvement in research and development programmes
3. What are the key communications issues related to this issue?

Six Months post EU Exit:

Since being excluded from the EU programmes the Trust has seen a decrease in the number of patients coming across from mainland Europe for specialist treatment and income from this work has diminished.

The Trust's status as a 'centre of excellence' has also been lost and as a result, experienced staff are leaving, and it is becoming difficult to attract suitable candidates to the vacant roles.

Issues to consider:

Review this information against Q1 and Q2 above.

Scenario D: Reserve scenario

One-month post EU Exit:

An EU national is admitted on the Cardiac Care pathway and in line with current practice has bypassed ED. The patient received immediate medical treatment as defined in the guidance but has now been moved on to a ward for ongoing treatment which includes surgery and rehabilitation. They are too sick to travel at this time.

In accordance with the guidance the Trust is now advising the patient that they will be billed for all further treatment, but the patient is refusing to pay.

Staff working in the Trust from the patient's home country are aggravating the situation by conducting protests and threatening action short of a strike.

Issues to consider:

1. What are the next steps in terms of the patient's care?
2. Is the Trust able to recover any of the costs from the commissioners?
3. What are the potential short, medium and long-term impacts in relation to;
 - a. Reputation
 - b. Finance
 - c. Industrial relations
 - d. Staff and patient welfare across the organisation
4. What are the key communications issues related to this issue?

Scenario E: Medium Priority – Recruitment and Training

24 months post EU Exit:

University fees for EU students have increased resulting in decreased numbers of foreign students applying for all types of clinical degrees. The University status of the Trust is under threat and associations with other educational establishments are being dissolved as they themselves struggle to deliver specialist courses.

The reduced pool of newly qualified staff is impacting on the ability to recruit to vacancies, especially to General Practice. The situation has also given rise to concerns that the Trust is no longer a suitable environment for teaching across all grades and disciplines.

Issues to consider:

1. What are the potential short, medium and long-term impacts in relation to;
 - a. Reputation
 - b. Staff welfare and morale
 - c. Finance
 - d. Patient care
 - e. Performance
 - f. Strategic planning

Due to the large number of vacancies and ongoing issues with recruitment, the Trust has had to redeploy senior clinically qualified managers to fill gaps in operational roles. Reduction in GPs and Health Care Professionals working in Primary/Community Care means that more patients are coming into Emergency Departments for treatment of minor ailments and illnesses.

Issues to consider:

1. What are the potential short, medium and long-term strategic impacts on the organisation?
2. What are the likely impacts on staff welfare, morale and patient care?
3. What are the key communications issues related to this issue?

Scenario F: Reserve Scenario – Key suppliers

12 Months post EU Exit:

Following the UK's exit from the EU the prices paid by the NHS for imported medication have increased. In order to save money and maintain services to patients, cheaper alternatives have been sourced and GP etc. have been asked to prescribe these lower cost drugs. However, patients are not responding to the alternative medication and re-attendances are on the increase putting extra burden on staff and budgets.

Issues to consider

1. What are the potential short, medium and long-term impacts in relation to;
 1. Reputation
 2. Staff welfare and morale
 3. Patient care
2. What immediate actions can the organisation take to address this problem?
3. What are the key communications issues related to this issue?

Scenario G: Low Priority – Supply Chain

Three months post EU Exit:

One of the Trust's key suppliers has transferred its operation to mainland Europe. Delays at ports of entry are impacting on the timely deliveries of critical goods.

Additionally, the Trust has now been advised that the organisation concerned has filed for bankruptcy and as part of the winding up process the EU based administrators are insisting that the organisation settles all of their outstanding invoices in 30 days.

Issues to consider:

1. What are the impacts on the Trust from this situation?
2. What actions can the Trust take?
3. What support would the Trust expect from the commissioners?
4. What are the key communications issues related to this issue?

Scenario H: High Priority – Supply Chain

6 weeks post EU Exit:

The NHS organisations have identified issues with importing medicines and other products that require a temperature-controlled supply chain (cold chain). Medicines, such as insulin, and human tissue which is only available from overseas are facing delays at ports with limited or no cold chain storage facilities. Due to the ongoing issues with supplies issues the UK stockpile of these medicines are low.

Increased traffic congestion around points of entry to the UK is further delaying deliveries and when supplies do arrive, increasing proportions of the orders are being discarded due to concerns over the maintenance of the cold chain.

Issues to consider:

1. What are the impacts from this situation?
2. What actions can organisations take?
3. What are the potential short, medium and long-term impacts in relation to;
 - a) Patient care
 - b) Finance
 - c) Reputation
4. What are the key communications issues related to this issue?

Scenario I: High Priority – Supply Chain

12months post EU Exit:

Due to a change in the regulations governing waste disposal, the third-party contractor is beginning to experience delays in safely managing the destruction of hospital waste. In addition to the issues at their site the company is also having problems with its vehicles which are, amongst other things are reliant on spare parts from the EU. Collections from the Trust are sporadic, there is now a significant backlog of material requiring incineration.

The local residents have become aware of the situation are expressing concern about the impact on the nearby school, nursery and playground.

Issues to consider:

1. What are the potential short, medium and long-term impacts for the Trust in relation to:
 - a) Staff/Patient Safety
 - b) Finance
 - c) Reputation
2. What plans would the Trust put in place with commissioners?
3. What are the key communications issues related to this issue?

Scenario J: High Priority – Staff Welfare

12 months post EU Exit:

Following the intense period of planning for and response to the EU Exit organisations are now returning to a near normal business status.

The focus of many staff has been on Brexit and Operational staff and managers have been working extended hours to deal with the various problems that have arisen. Those staff now find themselves having to return to their substantive roles.

Many core activities have been suspended or curtailed including staff training which is now threatening the renewal of professional registrations which require the submission of portfolios to evidence maintenance of skills etc. Mandatory and Statutory Training (MAST) has also been affected with many staff being shown on Staff Record Systems as non-compliant which could impact on their pay bandings.

Staff are suffering from fatigue, some are struggling to re-adjust to normality and sickness and absenteeism rates are increasing. Individuals also have significant amounts of annual and compensatory leave to take.

Issues to consider:

1. What are the potential impacts in relation to;
 - a. Staff welfare and morale
 - b. Patient care
 - c. Operational efficiency
 - d. Retention of staff
 - e. Finances
 - f. Industrial relations
2. What immediate actions can the organisation take to address this problem?
3. What changes to policy and procedure are likely to ensue?
4. What are the key communications issues related to this issue?

Scenario K: Medium Priority – Supply Chain

24 months post EU Exit:

With the UK leaving the EU, the Medicines and Healthcare products Regulatory Agency (MHRA) have seen a dramatic increase in the number of requests for UK licences. MHRA are stretched by the extra workload and as a result the UK approval process for new drugs is getting slower.

Some companies are now threatening not to get their drugs licensed in the UK stating that it is easier and quicker to get a license via the European Medicines Agency (EMA) as this authorises use across the whole of the EU providing a much larger market for their products. If this situation is not resolved many of these new drugs will not be available for patients in the UK.

1. What are the potential impacts of this situation?
2. What immediate actions can organisations take to address this problem?
3. What are the key communications issues related to this issue?

Scenario L: High Priority – Supply Chain

3 months post EU Exit:

A vital piece of equipment (e.g. CT scanner, ventilator, incubator, vehicles) has broken down and the engineer has said that a new part is required. UK agents do not have these parts in stock and state that the required items can now only be imported directly from the manufacturers in the EU.

Due to the significant fall in the value of the pound, there has been an increase in the cost of importing goods and services from the EU. The delivery time of the part is expected to be much longer than usual due to new regulations resulting in long delays at the ports. The remaining equipment is having to be used more often and is now starting to show signs of deterioration.

1. What are the potential impacts in relation to;
 - a) Patient care
 - b) Operational efficiency
 - c) Finances
 - d) Capital replacement programmes
2. What immediate actions can the organisation take to address this problem?
3. What are the key communications issues related to this issue?

Scenario M: High Priority – Supply Chain

6 weeks post EU Exit:

Distribution of fuel supplies (Gas oil, Diesel, Super Unleaded and LPG) from coastal fuel depots is being affected by heavy goods vehicles being stacked on approach roads.

Overall stock levels are high but there are local shortages at filling stations due to panic buying and direct deliveries are being disrupted. The Government has decided not to invoke the National Fuel Plan.

1. What are the potential impacts in relation to;
 - a. Staff
 - b. Patient care
 - c. Operational efficiency
 - d. Finances
 - e. Infrastructure
2. What are the key communications issues related to this issue?

Scenario N: High Priority – Supply Chain

4 weeks post EU Exit:

The Trust is experiencing delays with the delivery of medical radioisotopes as shipments from the EU are being held up at the ports. When the medical radioisotopes finally arrive the actual number of usable doses are less than half of what was originally ordered. As a result, some procedures have had to be cancelled and additional supply of isotopes ordered.

The company supplying the isotopes have stated that they will not be offering any compensation as the delays are beyond their control and they are not liable.

1. What are the potential impacts in relation to;
 - a) Patient care
 - b) Operational efficiency
 - c) Finances
2. What immediate actions can the organisation take to address this problem?
3. What are the key communications issues related to this issue?