## West Dunbartonshire HSCP EU- Exit Assurance Action Plan – October 2020

<u>Background:</u> The themes of Issues/Risks identified below are based on the updated UK and Scottish Planning assumptions (September 2020). This document will remain live, and regularly updated throughout the response to any "No Deal" EU Exit. The Transition Period will end on 31 December 2020 and no request for an extension will be made or EU request agreed to.

Contributing Officers – Jen Watt, Civil Contingencies Officer (CCS); Lynda Dinnie, Facilities Manager; Audrey Slater, Head of People and Change; Julie Slavin, Chief Financial Officer (HSCP); Sylvia Chatfield (Marie Rooney – Acting), Head of Mental Health, Learning Disability and Addictions and Jo Gibson, Head of Community Health and Care Services.

Travel, Freight & Borders – Jen Watt – October 2020				
Broad Risk	WD HSCP Impact Action/Mitigation		Comments Updated – Jen Watt October 2020	
Transport	- Key medicines/equipment and	New transport routes and being	Radioisotopes with short shelf lives will be transported via	
	PPE may be delayed.	determined by UK and Scottish	air freight routes to help preserve. There are limits on	
		Governments.	time of transit, and/or mean product must be transported	
		Department of Health and Social	under temperature controlled conditions, and delays may	
		Care will implement a multi-layered	lead to products spoiling and wasting.	
		approach to mitigate these risks		
		across the UK. This plan includes		
		stockpiling (where this is possible),		
		rerouting away from the short		
		straits, driving high levels of trader		
		readiness, seeking to introduce		
		regulatory flexibilities such as		
		recognition of batch testing, and		
		enhancing existing shortage		
		management structures.		
Disruption to Service – Jen Watt, Lynda Dinnie, Julie Slavin - October 2020			a Dinnie, Julie Slavin - October 2020	
Broad Risk	WD HSCP Impact	Action/Mitigation	Comments Update - Jen Watt/ Lynda Dinnie October	
			2019	
Reduction, delay or	- While this issue is being	Continue the positive dialogue with	NHS have nationally provided updates as follows:	
stoppage in supply of	coordinated nationally by the	GPs and Pharmaceutical colleagues	Pharmacy team have reviewed & updated local	
medicines and medical	NHS, there is potential impact on	that have been in place.	processes for managing medicines shortages including assessing whether additional people resource is required	

Care Homes, Care at Home and Healthcare  - A shortage of some medicines has been reported but not necessarily attributable to EU-Exit.	Liaison with Civil Contingencies Officer, NHS GGC - Department of Health and Social Care (DHSC) /UK Government urged the NHS not to take steps to stockpile medicines beyond business as usual levels and to maintain normal prescription lengths. Pharmaceutical companies have been asked to stockpile an additional 6-week supply of medicines with a supply touch point in the EU and reroute supply routes away from the 'short straits' ensuring continuity of medical supplies to NHS and social care providers. Remains valid Oct 2020 WD HSCP to consider alternative supplies to maintain BAU.	The formation of a senior pharmacy incident response team has been agreed to address urgent and emerging issues with medicines supply if these increases significantly following a no deal exit. There are a number of drugs in short supply – including anti-depressants which at the moment has led to significant increases in price/item.  UK Govt needs to ensure that regulatory and licencing arrangements are in place to ensure continued access to medicines, medical supplies and medical radioisotope.  SG has established a Scottish Medicine Shortage Response Group which will review evidence and intelligence, recommend action, and instigate escalation to the UK Medicines Shortage Group, of which SG is a member.
	Pharmacy teams are constantly reviewing and updating local processes for managing medicine shortages.	
<ul> <li>Insufficient Incontinence Care Products, Hand Hygiene Products, Aprons, Bibs gloves, moving handling products etc</li> </ul>	Incontinence Care products are hosted across Glasgow Greater and Clyde (GGC) so any additional cost would be picked up by the host.  Hand Hygiene Products – Care	With regards to "clinical consumables" the bulk of these are done monthly to maintain BAU. Guidance stated that a minimum of a 6-week should be purchased. A survey was carried out by Scotland Excel on "clinical supplies".
	- A shortage of some medicines has been reported but not necessarily attributable to EU-Exit.  - Insufficient Incontinence Care Products, Hand Hygiene Products, Aprons, Bibs gloves, moving	Healthcare  Liaison with Civil Contingencies Officer, NHS GGC - Department of Health and Social Care (DHSC) /UK Government urged the NHS not to take steps to stockpile medicines beyond business as usual levels and to maintain normal prescription lengths. Pharmaceutical companies have been asked to stockpile an additional 6-week supply of medicines with a supply touch point in the EU and reroute supply routes away from the 'short straits' ensuring continuity of medical supplies to NHS and social care providers. Remains valid Oct 2020  WD HSCP to consider alternative supplies to maintain BAU.  Pharmacy teams are constantly reviewing and updating local processes for managing medicine shortages.  Incontinence Care products are hosted across Glasgow Greater and Clyde (GGC) so any additional cost would be picked up by the host.

estimate that 6K per month is spent on aprons, bibs and gloves, pressure care products and protective clothing. PPE should be procured through BAU routes however NSS Hub arrangements will remain in place until March 2021 However, this is only for HSCP internal services. Current costs have inflated due to COVID-19 and the need for additional PPE.  Moving and Handling products – this type of equipment is purchased through Equipment of Editional Costs. Reduction in activity due to COVID-19 restrictions and backlog in assessments.  Certain types of fresh food supply may decrease / prices of certain foods may increase food increase of 15% to 20% due to tariff changes, sterling depreciation and boarder disruption.  Facilities Services maintain a very limited stock of tinned and diried food that is maintained year round, in case of single premise emergencies — while this is not EU Exit specific, it could be utilised in the event of a localised issue being experienced. It has recently been suggested that Care Homes should hold their own emergency stock items. School Food Legislation is very strict and the types of products which Facilities Services hold are unlikely to			T (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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and boarder disruption. items. School Food Legislation is very strict and the types	increase	food increase of 15% to 20% due to		issue being experienced. It has recently been suggested
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				of products which Facilities Services hold are unlikely to
benefit in the HSCP setting.				benefit in the HSCP setting.
At this stage, and in line with Scottish Government and				At this stage, and in line with Scottish Government and
COSLA advice, there is no intention to stock pile beyond				
this contingency as storage capacity and freezer space				

Care Home Closures	- Commissioned care being handed back to HSCPs	Central Procurement contacted all external providers of care services – Care homes, Home Care and Supporting Living to complete a template which covered across employeesing and supply chain.  Surveys were also sent to Care homes to review their EU-Exit	In addition catering managers and cooks have their own procurement cards which they presently use to purchase provisions via Scot Exel Suppliers however the cards can also be used elsewhere if necessary.  Potential additional expenditure has been highlighted to CoSLA via the Brexit Cost template.  The response was only around 20%. However, those who did reply didn't highlight any immediate risks to workforce as those employed are mainly British Nationals. Although, concern about the availability of fresh food and medicines was highlighted.
		preparedness.	
		drey Slater HR Lead HSCP – Octobe	
Broad Risk	WDC HSCP Impact	Action/Mitigation	Comments
Loss of employees – both highly skilled and lower skilled / entry level	<ul> <li>Impact on Care for People.         Agency Employees</li> <li>Potential risk if contracts are subcontracted companies employing EU nations</li> <li>Increased pressure on unpaid carers</li> <li>Potential Failures of external</li> </ul>	Signposting of key information / support in relation to EU Workers within the Council https://www.gov.scot/brexit/	90% of Care at Home is delivered by Council Workforce with no immediate concerns around EU Nationals as this is predominately comprised of local residents who are UK citizen. In addition, WDC does not have reliable figures for the numbers of EU nationals living and working in West Dunbartonshire. WD HSCP has deemed this risk as LOW.  The Council itself invests in apprenticeships training and

	providers delivering Care at Home due to employees shortages  - The impact of EU withdrawal may result in a loss of skilled labour in key sectors. Whilst construction is one obvious area of risk where skilled labour is already tight, West Dunbartonshire also has a significant Healthcare workforce in the Golden Jubilee Hospital which is due to expand as an NHS centre of excellence.		works closely with local Colleges to increase the number of apprenticeships in specific areas of predicted demand. However, these actions will not be of sufficient scale and will not address short term shocks to labour supply. Shocks can also be expected in Health and Social Care and Hospitality.  The loss of EU workers will inevitably drive up demand for labour, and the current labour pool in the City Region cannot easily and quickly replace these people. As a consequence one can anticipate pressures on the supply and costs of skilled and indeed unskilled labour. This may be low currently but could rise in years to come  Based on extrapolation from the work of the Fraser of Allander there could be between 2000 to 4000 EU nationals living in West Dunbartonshire, However, it is considered that this figure is unlikely to be representative of WD area. It is more likely that the majority of them are employed/reside elsewhere in the City Region.
	Concurrent Risks	□ s – Julie Slavin and Jen Watt – Octol	per 2020
Broad Risk	WD HSCP Impact	Action/Mitigation	Comments
Seasonal Flu	If there is an impact on the procurement to the flu vaccination this could have impact on the well-being of our most vulnerable in society	Continued engagement with Scottish Government Health Resilience Unit, NHS Boards and Health and Social Care Partnerships.	Seasonal Vaccination Programme Vaccines for the Seasonal Programme as procured by NHS Scotland National Procurement.  Flu Vaccinations are currently underway there is no issue with vaccine supply. Covid-19 restrictions will impact timescales for completion which has been extended.
Disruptive Weather	Potential for unprecedented weather conditions which leads to reduction of employees, putting pressures on services to deliver	Business Continuity Plans in place. Resilience Structures currently in place for COVID-19 and can flex accordingly.	Childhood Vaccination Programme Vaccines for the Childhood Programme are procured by Public Health England (PHE) on behalf of the UK

	Other Impacts - Ju	ılie Slavin Finance Lead HSCP – Oct	PHE have confirmed they do not anticipate any delays to the vaccine for the children's flu programme as a result of EU Exit.  Deliveries will be routed direct to the UK from the US.  The time of year that the UK is to leave the EU means that there is a greater likelihood of a range of concurrent events happening that may exacerbate or be exacerbated by no deal. These could include hazards such as seasonal flu or severe weather.
Broad Risk	WD HSCP Impact	Action/Mitigation	Comments
Significant impact on support for older/disabled people/those with mental health issues	At present there may be many older people that do not require any services from the HSCP – however if there are medicine or food shortages this may impact their wellbeing and subsequently require support from HSCP. The same could also be said from those with addictions and mental health issues.	Continue to monitor	Should there be a delay to mental health and addictions medication in particular, it is likely there will be an increased demand on services given potential for imminent relapse, chaotic behaviours and crisis for service users.  This comment remains valid and has an elevated risk due to the impact of Covid-19 on the global medicines supply chain. There are a number of drugs in short supply – including anti-depressants which at the moment has led to significant increases in price/item.
Increase in unscheduled care and delayed discharge		Continue to monitor	For those who are not known/open to services at this stage. There is opportunity to access HSCP services are an emergency.
Social care providers willing but unable to		Continue to monitor	There were some concern that externally commissioned services of older people's residential and nursing care

Children and families Social Work Section 12 payment	May increase due to increase food costs and inflation putting pressure on HSCP to fund those falling below the breadline.  There will be an impact to all services in particular Mental Health, Addictions and Learning Disability.	Continue to monitor	and other social support could be impacted if EU nationals returned home. This was not highlighted as a risk by local external providers. Impact of Covid-19 restrictions re community based services and respite, coupled with disruption when both service users and support workers requiring to isolate either through actual positive result and being identified as a close contact.  Again Covid-19 already impacting on family life and cost of household supplies. Could be exacerbated by EU Exit.  There are plans in place for care homes and buffer PPE stocks through procurement.
Adult Social Care - consider loss or shortage of workers who provide routine services	The impact on the adult social care workforce is expected to be minimal in West Dunbartonshire as this workforce is predominantly comprised of local residents who are UK citizens.	Continue to monitor. Transferring employees within the HSCP who have received appropriate training to pressure points. This isn't as a result of EU Exit.	Risk low

Business Continuity – Jen Watt – October 2020			
Broad risk	WD Impact(s)	Action	Comments
Assess impact of no deal	Potential disruption to	WDC have undertaken a full	Business Continuity planning remains an operational focus. Any changes
EU- Exit on Business	services	review of all Business	pre/post EU-Exit will be reflected into the respective Business Continuity Plans.
Continuity Plans	- Food	Continuity Arrangements	
	- Medicines		CoSLA has recently asked LAs to submit a questionnaire to provide
	- Employees	Reporting into the Multi Agency Coordination Centre	information relating to resilience structures, additional structures and areas of risk.
		(MACC) (when active)	
			CoSLA has reinstated EU Exit calls, the Civil Contingencies Officer regularly

	Business Continuity – Jen Watt – October 2020				
Broad risk	WD Impact(s)	Action	Comments		
		Reporting to CoSLA and Scottish Government	dials into these meetings, to discuss any arising issues and requests from Scottish Government and CoSLA.		
		Dialling into teleconferences	Local Authority Resilience Group Scotland (LARGS) has 'stood up' EU Exit Transition and Concurrent Risk teleconference which is currently held every		
		Concurrent Risk Workshop for key officers will be held on the 17 <sup>th</sup> November via MS Teams	Friday. The Civil Contingencies Officer dials into this.		
		Resilience Structures in place: Local Response Management Team (LRMT), Strategic Resilience Group (SRG), Operational Resilience Group (ORG) and Resilience Group (RG)			