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Guidance Annex (UK and Wales)

Version History

Date	Update		
18 December 2020	Updated to reflect the end of the Transition Period and impact of COVID-19		
30 October 2019	Updated to reflect no deal planning		
25 July 2019	Created		



Introduction

As the membership body representing all the organisations making up the NHS in Wales: seven Local Health Boards, three NHS Trusts and Health Education and Improvement Wales, we have been at the centre of EU Transition developments.

The impact of the UK leaving the EU is far reaching; no matter the outcome; but NHS organisations across Wales have worked together to plan for any outcome. The priority is that patients are not affected as a result of the UK leaving the EU.

The **UK left the EU on 31 January 2020** with a **Withdrawal Agreement**. That left the UK Government 11 months to establish a Free Trade Agreement with the EU before the the of the Transition Period on 31 December 2020.

This was an ambitious goal, and was made even more challenging with the outbreak of Coronavirus (COVID-19) at the start of 2020.

There still remains a high level of uncertainty about what the future relationship between the UK and the EU might look like.

Throughout the Transition Period, we have continued to our work in managing what life outside of the EU will mean for the NHS in Wales in line with our **10 priorities** for health and social care. The health and care system is going to play a vital role in future negotiations and policy development.

Purpose

The purpose of this document is to provide members of the Welsh NHS Confederation with a high-level summary of current readiness preparations in place at the end of the Transition Period.

This document has been produced as part of the EU Transition Support Programme funded by the Welsh Government European Transition Fund and is intended to support the NHS and other stakeholders in understanding the implications of leaving the Transition Period on World Trade Agreement (WTO) terms and possible and potential mitigation mechanism. This document is intended to be a tool to spark thinking about the longer-term policy and service implications as well as opportunities leaving the European Union may have for the healthcare sector in Wales.

Key Messages

In June 2018, the Welsh NHS Confederation's Policy Forum released a publication summarising the ten key issues for health and social care organisations in Wales as the UK left the EU. Now that we are nearing the end of the Transition Period, this briefing will reiterate the key issues for the sector in Wales. The Policy Forum does not take any stance on the merits or otherwise of leaving the EU. Its aim is to make sure that we are in the strongest possible position once the UK leaves the EU.



1. Recruitment of **high calibre professionals and trainees** from the UK and abroad to work across the health and social care sector



2. Continue to recognise the professional qualifications for people trained in the EU27



3. Protection of workers' employment rights and the rights of patients and people who use care and support after the end of the Transition Period.



4. UK health and social care organisations continue to participate in EU networks and programmes



5. Patients continue to benefit from **early access to innovative technologies** on the EU market and participate in clinical trials



6. Regulatory alignment for the benefit of patients, people who use care and support, and public health to ensure early access to innovative health and care technologies



7. Reciprocal healthcare arrangements preserved



8. Robust co-ordination mechanisms on **public health and well-being standards** to guarantee equal or higher safety



9. A strong funding commitment for the health and social care sectors



10. Engagement between the Welsh Government and the UK Government protecting the interests of health and social care organisations in Wales

You can read the full briefing **here** or **here** in Welsh.



Areas of Responsibility

While health is devolved to the Welsh Parliament, there are many aspects that remain under the jurisdiction of the UK Government through to a local level.

Table 1: Summary of the areas of responsibility at UK and Welsh Government level

Area	Organisations involved
UK level	Medicines Radioisotopes Blood Product Supplies Public sector food Fuel supplies Reciprocal Healthcare – international agreements Mutual Recognition of Professional Qualification (MRPQ) Health protection security Health for Growth (Third Health Programme)
UK level with devolved areas involving Wales	Non-UK EU citizens Immigration (Settled Status and Skills based immigration system) Policy areas: Organs, Tissues and Cells, Blood Safety and Quality Standards, Tobacco Related Products, Nutrition legislation Research and Innovation Reciprocal Healthcare - delivery
Wales level	Medical Devices and Clinical Consumables (MDCCs) Operational readiness and preparedness in the service Information Security Cross border issues Workforce Health Equity Charging for Overseas Visitors healthcare

The UK Government has issued **guidance** in terms of leaving the EU and the role of the Welsh Government and the Welsh Parliament . The following are some examples of the guidance issued to date:

UK Guidance:

- Employing EU citizens in the UK
- Healthcare for EU citizens living in the UK
- EU guidance documents referred to in the Human Medicines Regulations 2012

Impact of COVID-19 on the Transition Period

The UK left the EU on 31 January 2020 with a **Withdrawal Agreement**. At that time, the UK entered a Transition Period whereby the UK and the EU must establish a Free Trade Agreement and new future relationship before 31 December 2020, a period of 11 months.

If a Free Trade Agreement is not agreed by that time, the UK exit the Transition Period on World Trade Agreement (WTO) terms – referred to as leaving 'with no trade deal'.

Throughout the Transition Period, **not much changed** for health and care. Despite having left the EU, the UK retained many benefits of being a Member State such as reciprocal healthcare and free movement.

In February 2020, the UK and EU established a timescale of negotiations. This was disrupted by the outbreak of COVID-19 and public health measures initiated across Member States in March 2020. Negotiation rounds were cancelled, key players in the negotiations on both sides contracted COVID-19, and almost all government and parliamentary time at a Wales, UK, and international level focused on responding to the pandemic. The NHS was inundated with the task at hand to provide care to those that contracted COVID-19 and public health measures were established to 'flatten the curve' and reduce demand on the system.

As part of the Withdrawal Agreement, the UK had the option to ask the EU for an extension to the Transition Period of up to two years by 1 July 2020. Despite the outbreak of COVID-19, lobbying across many sectors, and openness from the EU, the UK Government did not ask for an extension. As such, the UK will exit the Transition period at the end of December 2020.

Throughout the Coronavirus pandemic, the UK has continued to negotiate a trade deal with the EU. The UK and the EU agreed to host virtual negotiations and an accelerated timetable of talks throughout the rest of the Transition Period. Many items are still to be agreed such as establishing a trade mechanism for medicines and mutual recognition of professional qualifications, and both sides have strong red lines which have been causing blocks in talks, such as level playing field and competition agreements or arrangements for fisheries. As health and care is not a standalone component of trade deals, the inability to come to an agreement on these issues threatens the trade negotiations as a whole.

The Coronavirus pandemic has highlighted the importance of not just maintaining but strengthening **international collaboration**. While the negotiations are ongoing, the UK Government needs to consider the needs of the NHS and social care in devolved nations. Wales already has a number of health and care challenges while also doing all it can to manage and respond to a global pandemic.



Currently, the national and international priority is to protect public health, it would be difficult for the NHS to shift resources and capacity in the healthcare system to plan for significant divergence from the EU. The end of the Transition Period now comes at the same time as our health and social care services are continuing to respond to the COVID-19 pandemic and the pressures faced by services each winter. COVID-19 and winter pressures are having an impact on some NHS services, and we are encouraging people to use the right services at the right time.

If there is no Free Trade Agreement at the end of the Transition Period

The Welsh Government and the NHS in Wales are committed to maintaining highquality health and social care services after the end of the Transition Period.

Having not asked for an extension, the Transition Period will end on 31 December 2020 and the UK will formally be out of the EU.

NHS organisations in Wales need to have an open dialogue on progress with the UK Government so our health and care services and the treatment of our patients do not face any disruption.

Via Local Resilience Forums, arrangements have been put in place for information to flow into the Emergency Co-ordination Centre (Wales). NHS contingency planners will be aware of these arrangements, which are intended to support co-ordination and communications across the health and social care sector through the Brexit period.



Aim: To increase the resilience of supply chain disruption in Wales through targeted investment in dedicated warehousing and stock; and to connect effectively with the UK's National Supply Disruption Response arrangements where needed.

Medical Devices and Clinical Consumables (MDCC)

A medical device is broadly any piece of equipment or technology used when diagnosing or treating a disease (such as mechanical heart valves), while clinical consumables are those items that are to be used or consumed.

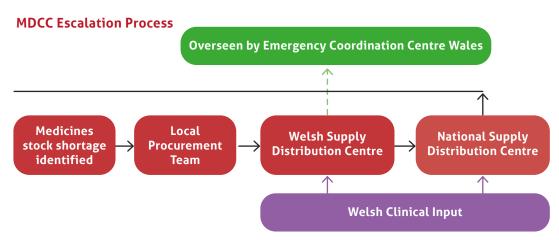
Preparations which have been taken include:

- An extensive review of supply and use of devices and consumables (approx. 12,0000 products) in Wales;
- Any higher risk items have been identified and are being managed;
- Continued investment in warehousing and additional stock. Any materials that were used in the response to COVID-19 have been replenished; date limited stock will be consumed and replaced; and
- The re-establishment of a Supply Disruption Centre in Wales.
- UK Guidance: Medical devices regulation and safety: detailed information.

Arrangements in place include:

- The NHS continuing to operate as usual through local procurement teams;
- Adequate buffer stocks in place to maintain supplies; and
- Contingency support for Social Care if needed.

NHS organisations have also revisited their local plans and arrangements to ensure they are fit for purpose for the coming period, including to take account of any changes required to previous plans in light of the COVID-19 pandemic.



As part of their business continuity arrangements, NHS organisations in Wales should consider:

- Any adjustments required should changes be made to the delivery of goods;
- The local management of potential substitutions (subject to Welsh clinical input); and
- Orders are placed at the earliest possible time.

The Welsh arrangements were tested by Welsh Government in the Autumn of 2020 and given a <u>reasonable level of assurance</u> that robust continuity arrangements are in place should they be required.





Aim: To maintain continuity and supply of medicines, including radioisotopes, and connect effectively with UK's National Supply Disruption Response arrangements where needed.

Medicines

Medicine shortages already occur. Wales has arrangements and expertise to manage with the support of the Medicines Supply Team in the Department of Health in England and is taking extra steps to prepare for any disruption.

Preparations which have been taken include:

- Six weeks stock buffer and revised assured arrangements for short life supplies (e.g. radioisotopes) at UK level;
- Detailed intelligence on 'at risk' medicines used in primary and secondary care in Wales is being developed and refined;
- Wales has a Medicines Shortages Advisory Group which gathers intelligence; secures appropriate clinical advice; and advises on a response to disruptions; and
- A Pharmaceutical Officer Contingency Planning (Medicines) has been seconded into Welsh Government to lead on essential work around current and potential medicines shortages.
- Consideration has been given to avoid duplication in reporting arrangements throughout the winter period and the continued response to COVD-19.

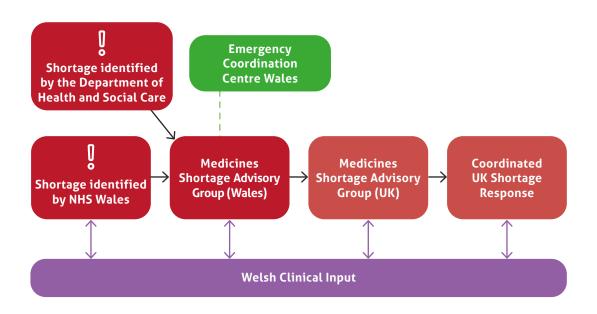
If there was a disruption to the supply of medicine, then there are well established procedures in place (Medicines Supply Chain Contingency Programme). In the event of a shortage, people might find the brand of the medicine they receive could change or in some circumstances they will receive another medicine that has the same clinical effect (see WHC/2019/005).

Other arrangements in place include:

- Tested and proven escalation arrangements for cases of longer-term shortages;
- High risk medicines monitored on case by case basis; and
- Providing effective information flows and local intelligence via their Chief Pharmacists.

For UK level Guidance on Medicine Supply, see Annex 1.

Medicines Escalation Process



The Welsh NHS and Welsh Government have a <u>high</u> level of assurance that robust continuity arrangements are in place should they be required.



Aim: To maintain the continuity and supply of blood, blood products or tissues, organs and cells; and to connect effectively with the UK's NSDR arrangements where needed.

Blood Supply Chain/ Organ and Tissues

Significant work has been undertaken across the UK in relation to providing assurance regarding the blood supply chain, blood components and blood products, and devolved nations are being engaged (in Wales this is done by the Welsh Blood Service (WBS)). Should supply issues occur as a result of leaving the EU, critical supply issues would be managed in the first instance via the National Emergency Planning and Resilience and Response Work Stream.

Work has also been undertaken across the UK in relation to providing assurance regarding organs and tissues, and devolved nations have been engaged. In event of a no deal, UK establishments responsible for the import or export of tissues and cells from/to EU member states will require a licence that covers this activity as the UK would become a 'third county' on existing the EU.



Preparations which have been taken include:

Blood

- Revised mutual aid agreement across UK and Ireland;
- Maximised critical inventory stock;
- Critical equipment maintenance programmes brought forward;
- Joint Professional Advisory Committee will consider derogations to Regulations if critical supply chain issue; and
- Will utilise the existing National Blood Shortage Plan.

Blood Products

- Welsh Blood Service holds the wholesaling license for Wales;
- Engagement with suppliers, UK level management of shortages; and
- International shortages exist and Medical Directors are aware.

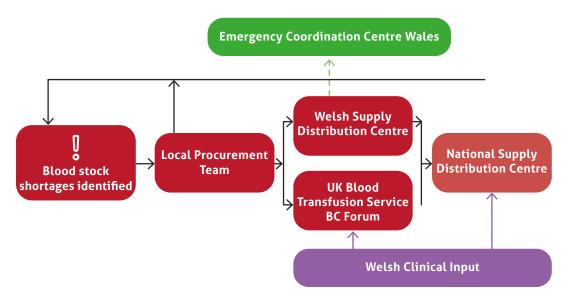
Tissues, Cells and Organs

- UK wide assurance on organ retrieval service run by NHS Blood and Transplant;
- Human Tissue Authority produced Statutory Instrument for import and export of tissues and cells; and
- Advice issued to NHS Wales.

UK Guidance:

- Quality and safety of human blood and blood products and human organs, tissues and cells if the UK leaves the EU without a deal
- Apply to release a vaccine or a blood product to market
- Applying for, or varying, a licence for human tissues

Blood Escalation Process



The Welsh NHS and Welsh Government have a <u>high</u> level of assurance that robust continuity arrangements are in place should they be required.

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Public Health Security

Aim: To maintain the continuity, supply and readiness of public health security measures.

Preparations which have been taken include:

Vaccines

- Assurance from Public Health England received on stocks centrally procured vaccines (six-month stockpile). The Department of Health in England has a position that coordinates arrangements for supply of non-centrally procured vaccines across the UK: and
- There are no major issues anticipated for any vaccination programme.

Port Health

Welsh sea ports - Port health plans have been reviewed, no gaps have been identified:

- Cardiff Airport The International Health Regulation State Party Self-Assessment Annual Porting Tool completed;
- All Health Protection Consultants are designated Port Officers; and
- The Port Health Expert Panel will monitor port health needs continuously.

Training and capability

- Training and capability arrangements are in place for epidemiology and microbiology. Alternative microbiology training remains unresolved at a UK-level, however this is deemed to be low risk;
- Alternative epidemiology training considered The two-year European Transition Funding awarded, will enable the Public Health Wales NHS Trust to join the UK Field Epidemiology Training programme; and
- Work is ongoing across the four nations regarding microbiology training and to source funding.

Surveillance and early alerting

- Assessment of alternatives to early alerting and response systems are currently provided by European Centre for Disease Control (ECDC) in the event of a no deal;
- Alerts will continue to be received via the UK national focal point through Public Health England under World Health Organisation International Health Regulations;
- The UK Government is in discussion with ECDC and other European agencies to explore alternative options.

Data and databases

• No patient and personal data in respect of Health Protection is held by EU authorities that is not already replicated in Wales.

Illicit drugs • Currently Public Health Wales receives intelligence from the European Monitoring Centre for Drugs and Drug Addiction. In the event of a no deal, access is likely to be removed.



Microbiology culture / media supplies and consumables

- Review of all suppliers and written assurance received of supply and continuity;
- Suppliers provided assurance of additional stocks; and
- Public Health England has both stocks and supply in the event of an outbreak.

Key chemical altering information

- Two alerting networks reviewed (Rapid Alerting System for Chemicals and Early Warning Response System), the impact remains unknown;
- International Health Regulations (IHR) apply to chemical alerts and will be unaffected.

See Annex 1 for UK level Guidance.

Specific assurance has been provided in relation to these issues, via Public Health England, and through the testing of arrangements. There is an overall high level of assurance that robust continuity and/or mitigating arrangements are in place should they be required.



Preparatory work has been undertaken by all Local Authorities in Wales with input from national bodies, including the Welsh Local Government Association, Care Forum Wales and the Association of Directors of Social Services (Cymru).

Social Care

As a result, it is anticipated that a 'business as usual' approach will be adopted with any issues being raised via providers to relevant Local Authority through existing processes. Mechanisms are also in place to gather intelligence and for this to feed into the Emergency Coordination Centre Wales (ECCW) to support early warnings around any potential areas for concern.

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Aim: To ensure that healthcare entitlement arrangements are in place for UK citizens living within the EU and that rights and entitlements to healthcare provisions are reciprocated to the EU nationals already living in the UK.

Reciprocal Healthcare

Preparations which have been taken include:

- Existing policy and procedures reviewed and new legislation has been passed.
 The UK Government is currently looking at the future arrangements for reciprocal healthcare; and
- Until a deal is passed, there can be little negotiations with the EU as a whole, therefore the UK Government has released several pieces of guidance on what this means through bilateral agreements.

In the event of no FTA, the UK government will <u>aim to continue the reciprocal</u> healthcare arrangements as far as this can be negotiated.

The UK Parliament has passed legislation, the **Healthcare (European Economic Area and Switzerland Arrangements) Act 2019**, to enable new reciprocal healthcare agreements with EU countries to be put in place. Without a deal while some reciprocal healthcare rights may continue through different mechanisms, they may not be available across the whole of the EU.

UK Guidance:

- Overseas visitor charging: guidance for NHS service providers on updates to regulations
- UK residents visiting the EU, EFTA and Switzerland: Healthcare
- UK nationals living in the EU, EFTA and Switzerland: Healthcare
- Healthcare for EU and EFTA nationals living in the UK
- Healthcare for EU and EFTA citizens visiting the UK

The Welsh and UK Government are working together to ensure the interests of Wales are properly recognised and represented.



Bilateral agreements to protect reciprocal healthcare and other rights for UK nationals living in Europe



Click on the map or the countries listed below.

Austria	Finland	Italy	Poland
Belgium	France	Latvia	Portugal
Bulgaria	Germany	Liechtenstein	Romania
Croatia	Gibraltar	Lithuania	Slovenia
Cyprus	Greece	Luxembourg	Slovakia
Czech Republic	Hungary	Malta	Spain
Denmark	Iceland	Netherlands	Sweden
Estonia	Ireland	Norway	Switzerland

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Other areas

Fuel Supply: Following further analysis at a UK level, the risk level has been reduced.

Food Supply: Preparations which have been taken include:

The Welsh Government is confident the food system will cope with a no deal situation in all parts of Wales. There will be enough food supply, but the choice and variety of products available, specifically some fresh produce, may be reduced for a period of time.

Arrangements in place include:

As part of the wider UK Government contingency planning work, the Welsh Government will help manage any difficulties that might arise in smaller or more remote communities.

The assessment is that the large public service providing organisations are secure.

Aim: Ensuring local organisations have robust, and tested, business continuity

Operational readiness: arrangements in place and ensuring that effective information flows exist across the health and care system and link to Local Resilience Forums (see page 6).

Preparations which have been taken include:

Organisations have reviewed and tested their business continuity plans. Specific national contingencies have also been put in place to provide increased resilience (e.g. MDCC supply chain arrangements).

Welsh Government is working with health and social care organisations across Wales to ensure services are protected, as much as possible, from any disruption at a local, Wales and UK level caused by exiting the Transition Period without a FTA.

Arrangements in place include:

- Business continuity plans within NHS Wales and Local Authorities can be activated if required;
- Gather, analyse and disseminate information locally, at a Wales level (Preparing Wales) and at the UK level (Preparations for Exiting the EU).
- The Welsh Government published its **End of Transition Action Plan** on 11 November which sets out key actions to prepare services in Wales, including specific actions relevant to health and social care.

Information Security:

Aim: Ensuring robust arrangements are in place to manage any information/data security incident.

Preparations which have been taken include:

- NHS organisations have reviewed information asset registers and business continuity testing has been undertaken;
- Existing cyber incident protocols and arrangements are activated;
- UK Guidance: Using personal data after Brexit.



If a
Free Trade
Agreement
is reached at
the end of the
Transition
Period

As we move closer to the point where a trade deal may be agreed, we will continue to highlight the potential impacts of the EU exit for health and care and for our members in Wales, the seven Local Health Boards, three NHS Trusts and Health Education and Improvement Wales.

We will also focus on what should be in place to minimise any possible disruption to patients and the medicines, technology and services they rely on. It is integral we are able to prepare for any outcome, particularly when the impacts could be significant and with the healthcare system having the broader responsibility to ensure population health and wellbeing.

Both the UK and the EU reiterated their intention to leave the EU with a deal, while having all preparations in place if a deal cannot be reached.

Until such a time that a deal is passed or there is more clarity around the situation, the NHS in Wales must ensure contingency plans are in place while working through a period of uncertainty.

The Welsh NHS Confederation will continue to represent its members and their views at the various forums, meetings and events that will take place during this time. We will continue to keep members and stakeholders informed of the developments through our regular Brexit Newsletter. To sign up please email

BrexitFAQs@welshconfed.org. Once a deal is reached, we will be able to move on to the next phase of negotiations, planning for the medium- and longer-term policy implications, and ensuring that people in Wales continue to have access to safe and high-quality health and social care services.

Issues beyond no-deal planning

For more information relating to health and social care workforce, please visit the Cavendish Coalition website.

Settled Status Scheme

The EU Settled Status Scheme is an initiative launched by the UK Government and is open to all EU/EEA citizens living in the UK prior to the exit from the EU, so they and their families can continue to live in the UK. It is now free to apply, and the deadline for applications is 30 June 2021.

Preparations which have been taken include:

- Assessments have been made by individual organisations of potential implications;
- A lead for each NHS organisation has been identified;
- Research was commissioned by Welsh Government into implications for social care workforce; and
- No short term issues identified, although the social care research highlighted that leaving the EU could exacerbate existing issues.

UK Guidance

- Pecyn cymorth y Cynllun Preswylio'n Sefydlog i Ddinasyddion yr UE:
 Cymraeg (Welsh) (Promotional material)
- Response to an inspection of the EU Settlement Scheme
- EU Settlement Scheme public beta testing phase report
- Stay in the UK after it leaves the EU ('settled status'): step by step (Services)
- Apply to the EU Settlement Scheme (settled and pre-settled status) (Services)
- Example case studies: EU Settlement Scheme (Case Study)
- EU Settlement Scheme community leader toolkit: Welsh materials
- EU Settlement Scheme: employer toolkit

For more information on the UK Guidance around the Settled Status Scheme, please see **Annex 1**.



Points-based immigration system

Health and social care employers want to reassure EU nationals working in Wales they are valued members of the workforce and we very much want them to stay. Currently there is no evidence that EU nationals employed by the Welsh NHS are leaving the workforce due to the UK leaving the EU.

From January 2021 the UK Government will introduce a **points-based immigration** system which all apply to all non-UK nationals who wish to live and work in the UK. We anticipate from January 2021 employers will need to implement procedures for check the entitlement of staff to work in the UK and EU citizens may need to be able to prove their rights. Details of the new immigration system have been released, including a **Health and Care Visa** that will fast-tack eligible health and care professionals. However this will still exclude social care roles, which will cause a **'workforce cliff edge'** for social care bodies, according to the Cavendish Coalition.

The Welsh NHS Confederation commissioned the Wales Centre for Public Policy to research which areas of the Welsh health and social care workforce are most vulnerable as a result of the UK Government's future immigration proposals and how it could impact future recruitment and retention efforts in Wales.

The **report** finds that due to changes to UK migration policy some EU nationals would be ineligible to work in the NHS in Wales (approx. 1% of the current workforce), suggesting that a small but not insignificant impact on future recruitment is likely for roles such as ambulance drivers, dental surgery assistants, social care support workers, health care support workers/healthcare assistants, patient care assistants, emergency care assistants, and pharmacy assistants.

The implications for social care are more severe. Fewer roles will qualify for the HCV or Skilled Worker visa because they have been labelled 'low skilled', and the greater turnover of staff in the sector presents particular challenges, with likely knock-on impacts for the NHS. These roles are essential and should not be forgotten when considering the new rules and their coverage. While the immigration proposals are more favourable for recruitment into the NHS, consideration also needs to be given to the social care sector.

Developing an integrated health and social care system focused on partnership and collaborative working across all sectors is one of the challenges facing the Welsh health and care system. In recent years, there have been significant pressures around capacity and demand for care services and the Coronavirus pandemic has exacerbated this problem.

UK Guidance

- Immigration and Social Security Co-ordination (EU Withdrawal) Act 2020
- The UK's points-based immigration system
- Health and Care Visa
- UK migration policy and the Welsh NHS and social care workforce

Mutually Recognised Professional Qualifications (MRPQs)

Aim: Ensure appropriate arrangements are in place for the registration of professionals qualified in EU to work in UK

From 1 January 2021, the EU Directive on the Mutual Recognition of Professional Qualifications (MRPQ) no longer applies in the UK. For a maximum period of two years (four for Swiss nationals), transitional recognition arrangements will apply. To read our breifing, click here.

How MRPQs will operate after the negotiated two year period is subject to the ongoing negotiations.

Preparations which have been taken include:

- Review of the current arrangements undertaken at UK level; and
- UK Government passing UK Healthcare (European Economic Area and Switzerland Arrangements) Act.

The UK Government is developing <u>Statutory Instruments to extend current</u> reciprocal arrangements on a transition basis.

UK Guidance

- Recognition of professional qualifications: guidance for regulatory bodies
- Guidance on qualified person responsible for pharmacovigilance (QPPV)
 including pharmacovigilance system master files (PSMF) if the UK leaves the
 EU without a deal
- EU guidance documents referred to in the Human Medicines Regulations
 2012



Useful Resources

UK Government Resources

Prepare for EU Exit

How to prepare if the UK leaves the EU with no deal Immigration if the UK leaves the EU with no deal EU Settlement Scheme Employer Toolkit

Apply to the EU Settlement Scheme

Welsh Government Resources

Preparing Wales

Preparing Wales for the end of the Transition Period.

Health and social care guidance and updates

Health and social care sector planning for the end of the Transition Period.

Welsh NHS Confederation Resources

Brexit Preparedness in NHS Wales Briefing
UK migration policy and the Welsh NHS and social care workforce
Managing EU withdrawal in health and social care in Wales FAQs

Brexit and health: what's at risk in event of no-deal?

Brexit Health Alliance

Bringing together the NHS, patient organisations, medical research and healthcare industries to campaign for the interests of patients and the wider healthcare sector post-Brexit

The Cavendish Coalition

Committed to working together to ensure a continued domestic and international pipeline of high calibre professionals and trainees in health and social care

Other

The Public Health Implications of Brexit in Wales: A Health Impact Assessment Approach

www.welshconfed.org

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