Health Board: NHS 24

Completed by: Head of Risk Management & Resilience

Date: 20/09/2019

(1) How ready is your
Board to deal with the
potential operational
impacts of EU withdrawal
 including setting out
your overarching
governance e.g. Board,
EU Exit Groups in place?

NHS 24 has identified Executive Director EU leadership with clear reporting on EU Exit as a standing item on the Executive Management Team Agenda. The Clinical Governance Committee and Planning & Performance Committee have provided detailed scrutiny over the Boards preparations prior to updates being provided to the Board.

NHS 24 has limited workforce risk with less than 10 EU nationals currently employed.

NHS 24 are represented on the EU Exit Health & Social Care group to work with partners to manage operational challenges EU Exit may present.

NHS 24 have offered to use their telephony and online capability to support an EU Exit Health response. This, to date, is not in place with further work required with Scottish Government Primary Care colleagues to identify the information required, potential scale and demand of the service.

(2) Is your Board already seeing impacts of EU withdrawal and, if so, what are you doing to mitigate these impacts?

No impact has currently been identified at this time.

NHS 24 are collating data from our Health Information Advisor calls on EU Exit and have only received 1 call to date (28/08/2019).

(3) What risks is your Board identifying as a result of EU withdrawal, how are these being recorded and what sorts of mitigating actions are being identified to deal with them? The risks of EU Exit are identified as short and long term. The risks are recorded on the organisations corporate risk register and have been reported through appropriate governance routes.

The uncertainty of the long term staffing implications on NHS Scotland may have an indirect impact on NHS 24's ability to recruit nurses. Scottish Government Workforce directorate will take the lead on the long term mitigation strategy.

Short terms risks relate to the potential for issues with the community pharmacy supply chain and potential confusion over replacement/alternative drugs. This may result in increased demand on the 111 service during the out of hour's period. The NHS 24 mitiagtion includes the use of the telephony and online capability to signpost the public.

The level of demand for social care, as a result of clinical consumables shortages impacting on patient care during the out of hour's period could impact on the 111 service call volumes has been identified as a risk. To mitigate this risk SG Social Care leads will provide social care escalation information to NHS 24 when it becomes available.

The inherent risk regarding the availability and uptake of the seasonal flu vaccination has a significant impact on NHS 24 demand over the winter period. This is however a risk every year and one that NHS 24 builds into the winter plan. This is a concurrent risk with the timing of the EU Exit.

There is an additional risk that the scope and detail of the special helpline will not be appropriately defined in advance on EU Exit and may put additional demand on our 111 service. This includes what data and reporting requirements are expected. Scottish Government Primary Care colleagues have been tasked by the Health & Social Care EU Exit group to provide this detail to NHS 24.

(4) What more needs to be done now to ensure operational readiness in your Board (including working with social care and other partners)?

NHS 24 has a helpline number available though would need a very clear brief from Scottish Government colleagues on the following information:

- Expected nature and volume of calls
- Scripts to be able to respond accordingly. It's not appropriate for NHS 24 to develop those and we would require that to come as approved from SG to cover anticipated issues
- Start date and duration the helpline is expected to run
- Operating hours.

As outlined above SG Primary Care colleagues have an action to provide this information.

NHS 24 will continue to work with Scottish Government social care leads to ensure there is a clear understanding of out of hours escalation points, and signposting information for social care services that NHS 24 can provide to the public, if required. To date this information is not available.

(5) What is your Board doing to ensure it has the data it needs to (a) plan for the impact of EU withdrawal on your workforce and the local services you provide; and (b) consider the future immigration status of non-UK EEA staff?

Preparations have been ongoing for many months regarding the workforce although, impact is expected to be minimal. We will continue to communicate with our employees to keep them updated with EU Exit and its impact for our organisation. We will also continue to review immigration status of non-UK EEA staff and ensure they have all the relevant information and assurances they require.

In regards to local services NHS 24 have engaged with the National GP Out of Hour's Group to understand any potential risks. At present there is no anticipated impact on out of hours GP services.

NHS 24 will continue to engage with Scottish Government Social Care EU Exit leads to understand the impact on social care services. Any disruption to social care services may have an impact on NHS 24 demand during the out of hour's period.

(6) What is your Board currently doing to communicate with and support EU27 staff?

NHS 24 has published all the information currently available on our website, this includes information on the EU Settlement Scheme, NHS Staff and Manager Guidance and a dedicated email address for those non-UK EU citizens to receive updated information and support from NHS 24 as it becomes available.

(7) Have you assessed the potential financial implications for your organisation arising from EU withdrawal. If so, what measures have you put in place to address these? NHS 24 procurement have undertaken an impact assessment of all NHS 24 contracts with no significant contractual issues identified.

NHS 24 will require additional staff to support a special helpline, as well as, web development and communications to support any use of NHS Inform as a public health information tool. Costs have been outlined to Scottish Government at approximately £265k.

External auditors Scott Moncrief considered EU Exit within their annual accounts audit of 2018/19 and have not identified any significant risks for NHS 24. Board financial planning assumptions and strategic objectives will require to be managed in line with continued SG engagement and support.

Food Resilience:
Can you set out the contingency arrangements in place covering food resilience including work with local suppliers (where applicable) and wider

There are no anticpated direct risks to NHS 24 related to food shortages.

Food shortage would be included in the indirect risk of increased demand from social care.



plans on managing any
potential food supply
shortages in your Board.

Return to Lynn.Jeans@gov.scot by 20 September 2019

