



NHS England
PO Box 16738
Redditch
B97 9PT

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20 March 2019

Dear colleagues,

Further to my letter of 4th February and the subsequent regional EU Exit events I am writing at the request of the Department of Health and Social Care to update you on progress with the UK's negotiations to exit the European Union. We are grateful for your excellent engagement over the last few months - our NHS plans are well advanced as a result.

As you will no doubt be aware, the House of Commons last week voted against the UK leaving the European Union without a deal, and in favour of extending Article 50. Votes this week mean it is still possible that we can leave on 29 March with a deal, although time is very short.

However, the Department has made clear to us that unless and until a Withdrawal Agreement is ratified by the UK and the European Parliament, or until any extension is agreed by the EU, the legal default in UK and EU law remains that the UK will leave the EU on 29 March 2019 without a deal. We must therefore **continue to plan for a no deal outcome** on 29 March.

The Department of Health and Social Care will continue to implement its no deal plans in full, and we are writing in similar terms to all other organisations in the health and care system to ask they continue with their no deal plans.

Please therefore continue to check that you are as ready as you can be for the possibility of a no deal exit from the EU. This includes working with your system partners to ensure you are on track with your operational and commercial preparations, as set out in the Department's [operational guidance](#) and the recent regional NHS events.

To achieve that readiness we now ask that by next Monday (25 March) provider trusts will have brought together members of their senior executive team with their EU Exit SRO and EU Exit team, and directors or lead managers from key areas (such as pharmacy, estates, facilities and procurement) to scrutinise preparations to operate under the conditions of a no deal. Representatives from your Clinical Commissioning Groups and Local Resilience Forum should also attend where possible. We also recommend that you include non-executive directors to critique that preparation. CCGs should organise similar sessions.

Please ensure your incident management procedures are now in place and are scalable if multiple issues arise, including:

- A single point of contact for local and national partners
- Clinical reference points in the event of issues such as supply shortages
- A local communication plan is in place
- On-call directors understand what is required of them and the escalation routes for problems

We will require an assurance from your Board of your organisation's plans and preparedness by close of play Monday 25th, using the attached template.

The EU Exit National Coordination Centre in Leeds is fully operational and our regional coordination centres are live and acting as the single point of contact for each area. Your local EU Exit team for return of the Board Assurance and your contact point for issues and questions are as follows:

Region	Email Account
North East	England.euexitnortheast@nhs.net
North West	England.euexitnorthwest@nhs.net
Midlands	England.mids-euexit@nhs.net
East of England	England.eoe-euexit@nhs.net
London	England.london-euexit@nhs.net
South East	England.se-euexit@nhs.net
South West	England.sw-euexit@nhs.net

As a reminder, all EU Exit information published specifically for NHS organisations is available on the [NHS England website](#). Information for the public and patients is available on the [nhs.uk](#) website. All information published by DHSC and other parts of Government can be viewed [here](#).

The NHS is well practised in managing operational risk – it's something we all do in daily practice. We will particularly benefit from the extensive planning undertaken to date. But we cannot be complacent and it's essential that we now finalise our preparations in anticipation of a possible no deal.

I will update you again as soon as I have further information.

Yours sincerely,



Professor Keith Willett
EU Exit Strategic Commander
Medical Director for Acute Care & Emergency Preparedness