EU Exit – Human medicines supply in a March 2019 ‘no deal’ scenario: An update

On 23 August 2018, I wrote to all pharmaceutical companies that supply prescription only medicines and pharmacy medicines to the UK that come from, or via, the European Union (EU) or European Economic Area asking you to ensure you have a minimum of six weeks additional supply in the UK, over and above existing business-as-usual buffer stocks, by 29 March 2019.

I am now writing to update you on the progress made to date and some updates to the Government planning assumptions.

As you will be aware, the Government and the EU have now agreed the basis upon which the UK will leave the EU in March 2019. This represents a significant step towards the UK’s objective of securing an orderly exit from the EU. Nevertheless, as a responsible Government it is only right that we should continue to plan for all scenarios.

Progress to date
To address the potential border delays should we leave without a deal, the Department established the Medicines Supply Contingency Planning Programme. The Programme has been working with industry to support stockpiling activities of prescription only and pharmacy medicines, and to engage with companies that supply short shelf-life products in order to work through air-freight arrangements.

I want to thank the industry for the positive engagement with the Programme to date – I fully recognise the substantial amount of effort undertaken. I know that you are just as concerned as I am to fulfil your responsibilities and maintain the continuity of medicines supply to UK patients in the event of a ‘no deal’ scenario and I am grateful for industry support. Any company that has not yet responded should contact the Programme as soon as possible by emailing medicinescontingencyplanning@dhsc.gsi.gov.uk.

We recognise that manufacturers may need to make additional arrangements and we are considering how Government may support this.
In October, the Department invited wholesalers and pre-wholesalers of pharmaceutical warehouse space to bid for government funding to secure the additional capacity needed for stockpiled medicines. I’m pleased to report that we had a good response to that invitation and funding for selected organisations has now been agreed.

Update to cross-Government planning assumptions
In my previous letter I advised that the cross-Government planning assumption about potential border delays would be subject to revision in light of future developments. Government departments have been working to design customs and other control arrangements at the UK border in a way which ensures goods can continue to flow into the country, and won’t be delayed by additional controls and checks. On the UK side this work is proceeding well, and we have been clear we will not impose additional controls and checks.

However, the UK Government does not have control over the checks which member states impose at the EU border. The European Commission has made it clear that, in the event of a ‘no deal’ scenario, it will impose full third country controls on people and goods entering the EU from the UK. Whether this happens or not is in their hands, not ours.

Although we cannot know exactly what each member state will do with respect to checks on the EU border, the cross-Government planning assumptions have been revised so we can prepare for the potential impacts that the imposition of third country controls by member states could have. These impacts are likely to be felt mostly on the short straits crossings into Dover and Folkestone, where the frequent and closed loop nature of these mean that both exports and imports would be affected.

The revised cross-Government planning assumptions show that there will be significantly reduced access across the short straits, for up to six months.

This is very much a worst-case scenario. In a ‘no deal’ exit from the EU we would, of course, be pressing member states hard to introduce pragmatic arrangements to ensure the continued full flow of goods which would be to their benefit as well as ours. Nevertheless, as a responsible Government, we have a duty to plan for all scenarios. And in areas where we cannot tolerate significant risk to the flow of goods, such as with medicines and medical products, we need to have contingency plans in place for this worst-case planning assumption.

This means that whilst the six-week stockpiling activities remain a critical part of our contingency plans, this now needs to be supplemented with additional actions. The
Government recognises the vital importance of medicines and medical products and is working to ensure that there is sufficient roll-on, roll-off freight capacity to enable these vital products to continue to move freely into the UK. The Government has also agreed that medicines and medical products will be prioritised on these alternative routes to ensure that the flow of all these products will continue unimpeded after 29 March 2019.

We are well aware that you will need adequate notice and guidance to put arrangements in place to reroute your supplies and my officials running the Medicines Supply Contingency Planning Programme will follow up with you very shortly. A corresponding letter is being sent out today to suppliers of medical devices and clinical consumables.

Thank you for your continued support with this important programme. We are confident that, with adequate preparation and your support, we can together safeguard patient care in the unlikely event of a disorderly ‘no deal’ exit from the EU.

Yours ever,

MATT HANCOCK