

Open Letter to the Secretary of State for Exiting the European Union

Cc Michael Russell MSP, Minister for UK Negotiations on Scotland's Place in Europe

Dear David Davis

Brexit and continuing to meet the care needs of people who are dying

The Scottish Partnership for Palliative Care (SPPC) is a longstanding collaboration of the main organisations in Scotland involved in providing care for people as they approach the end of their lives. As the Council of SPPC (comprising leaders and clinical experts in palliative and end of life care) we write to ask that you take account of the needs of people who are nearing the end of life as you continue to conduct Brexit negotiations. 56 728 people died in Scotland in 2016ⁱ. The quality of care available at the end of life affects everyone deeply.

Exit from the EU has the potential to create major challenges for the whole health and care sector. The delivery of care for people nearing the end of life is no exception. There is some evidence that uncertainties relating to Brexit may have already contributed to a sharp decrease in the numbers of nurses from the EU registering to practice in the UKⁱⁱ.

People who are dying require the support of a varied workforce across different care settings. Relevant sections of the workforce include:-

- relatively small numbers of highly qualified and specialist palliative medicine doctors
- large numbers of general nursing and medical staff working in hospitals. One in three hospital beds in Scotland is used by people in their last year of lifeⁱⁱⁱ
- large numbers of general nurses and GPs working in the community. On average in Scotland people spend 87% of their last 6 months of life at home or in a community setting^{iv}
- very large numbers of care workers in care homes and domiciliary care services. Whilst often perceived as being “unskilled and unqualified”, the care and compassion provided by this poorly paid group can make a big difference to people and their families.

Currently this workforce includes significant numbers of people from the EU who have chosen to work in Scotland, and who are able to do so largely without barriers and with the benefit of a range of rights and entitlements. Whilst good data is not available, Scottish Government estimates that 4% of nurses and midwives in NHS Scotland are non-British EU nationals, as are 1400 doctors.

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Scottish Care, which represents independent sector care providers, estimates that 6% of their members' care home workforce are non-British EU nationals^v.

During the Brexit negotiations we ask that you attach due weight to sustaining an adequate health and social care workforce to provide good care for people reaching the end of their lives. Underlying demographic change means that there is little if any capacity to absorb detrimental impacts resulting from an inadequately considered or negotiated Brexit. We also ask that in developing any new immigration arrangements you avoid burdening employers in the health and social care sectors with time consuming and costly bureaucracy which detracts from the resources available for care.

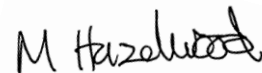
In addition to workforce issues we ask that you ensure that opportunities for vital scientific research into improving end of life care are not curtailed by reduced access to EU research funding and reduced opportunities for cross-border collaboration. Clinical medicine and biosciences research are the two areas which currently receive the biggest amounts of EU research funding, well over £200 million in 2014/15^{vi}.

Finally we ask that you ensure that any new arrangements designed to supersede existing relations between the MHRA and the European Medicines Agency do not result in delayed patient access to new drugs.

Yours sincerely



Kenny Steele
Chairman



Mark Hazelwood
Chief Executive

On behalf of the Council
Scottish Partnership for Palliative Care

ⁱ National Records Scotland. July 2017. <https://www.nrscotland.gov.uk/files//statistics/weekly-monthly-births-deaths-data/2017/July/month-2017-july-tab4.pdf>

ⁱⁱ Nursing and Midwifery Council Report on EU Nurses and Midwives. May 2017. <https://www.nmc.org.uk/globalassets/sitedocuments/special-reports/nmc-eu-report-june-2017.pdf>

ⁱⁱⁱ Imminence of death among hospital inpatients: Prevalent cohort study
David Clark et al. 2014 & 2017.
<http://journals.sagepub.com/doi/pdf/10.1177/0269216314526443>

^{iv} Information Services Division. May 2017. <http://www.isdscotland.org/Health-Topics/Health-and-Social-Community-Care/Publications/2017-05-30/2017-05-30-End-of-Life-Report.pdf>

^v Scottish Care. Care Home Workforce Data Report July 2017 <http://www.scottishcare.org/wp-content/uploads/2017/07/Care-Home-Workforce-Data-2017.pdf>

^{vi} <http://www.raeng.org.uk/news/news-releases/2017/may/new-report-uk-universities-and-eu-funding>