European and External Relations Committee

The EU referendum and its implications for Scotland

Written submission from the Health and Social Care Alliance Scotland

The ALLIANCE welcomes the opportunity to brief the Committee on our members’ views of the implications of withdrawal from the European Union. In the aftermath of the “Brexit” vote, we carried out a members’ survey to establish their members’ reactions to the referendum result and inform potential future work for the ALLIANCE.

The survey received 91 responses. 77 responses coming from ALLIANCE members, including disabled people, people who live with long term conditions, unpaid carers, representatives of third sector organisations working in health and social care and people who work for statutory bodies who deliver health and social care services.

Case studies on how the prospect of a withdrawal from the EU is affecting Scotland

Asked about the impact the UK’s decision to leave the EU would have on health and social care in Scotland, a significant majority (69 per cent) felt it would be negative, 26 per cent felt it would be neutral whilst a small minority of 6 per cent said it would have a positive impact.

Economic and impact on services

Several respondents stressed that a change in economic climate caused by the referendum result would have either a direct or indirect impact on health and social care support and services. Some indicated that this would be felt most strongly by the third sector:

- “Uncertainty for the future isn’t good for funders and for those looking to receive funding.”
- “There will be a knock on effect for the third sector, with increased demand and decreased funding, as a result of a shrinking economy and the loss of European funding to the third sector.”
- “Third sector is critical, yet funding always temporary and ever uncertain. Loss of EU funding opportunities can only place further strain on the sector.”

Workforce

Many participants highlighted their concerns about the potential loss to the health and social care workforce of people from across the EU when the UK leaves. They noted the value of people from across the EU in ensuring that health and social care support and services are delivered. Others said that leaving the European Union could add to the existing difficulties of recruitment:
• “It is hard enough now to find sufficient qualified staff and without EU migrants we will be struggling more.”

• “Non-UK nationals have made an enormous contribution to the provision of health and social care as healthcare workers. My former partner and I could not have managed without the help of paid staff from Latvia, Estonia, Lithuania, Ukraine, Russia, Poland, Portugal and South Africa as well as Scotland and rest of UK. Not all EU citizens, but an illustration of lack of capacity in Scottish workforce to provide the care and support needed.”

• “Our organisation currently employs a number of nurses from elsewhere in the EU. Given the difficulties recruiting nurses at present, we are particularly concerned about the impact that leaving the EU could have on our staffing. We have a number of concerns regarding the status of these staff after leaving the EU, and how our ability to attract and recruit staff will be affected in future.”

Some participants said that there could be an adverse impact on the number of staff working in health and social care who can speak various languages:

• “This could limit the number of staff who can speak languages other than English which currently helps with communication with people who use services who do not have a good grasp of English language.”

One respondent said that their organisation’s identity was tied closely to its links across the EU and that many volunteers from EU countries supported the running of the organisation:

• “Our continuing deep links with Europe are a fundamental part of our identity and… continue to be a living demonstration to the world of what can be achieved by those of different nationalities, religions and cultures working together inspired by common values. (We) rely upon links with Europe for supply of short term volunteers. These are usually young people (employed) for between a year and 18 months.”

Research

Several participants highlighted research as a key issue, focusing on the impact of the loss of funding and shared research findings:

• There are key issues which the EU focusses on - public health; mental health, Dementia and pandemics and it would be a great loss not to be at the table and to influence and benefit from sharing/learning and education.”

• “A lot of research for a variety of medical conditions is carried out in the EU and I think that we will no longer be privy to that research.”

• “I worry about research for rare health conditions a lot of which has links to the EU.”
Some third sector organisations noted that the referendum result destabilised their existing relationships and work across Europe which was unhelpful to their overall work plans.

“I work with a family of rare genetic conditions. At all levels from information and research through to advocacy and lobbying we work closely with other patient groups around Europe. The organisation which facilitates this receives European Union money. The loss of UK contributions and the destabilising of the entire EU caused by Brexit must surely put the level of that support in doubt. The anti-European message that the vote causes also damages the willingness of other EU countries to think of working with us.”

**EUPATI UK**

The EUPATI National Platform (ENP) in the United Kingdom brings together patient, academic and industry representatives who want to work in partnership to promote patient education and enhance patient involvement in the British medicines research and development (R&D) process. This is supported by representatives of the ALLIANCE, the University of Leeds, the Central Manchester University Hospitals NHS Foundation Trust (CMFT), and GSK.

On 24 June 2016, EUPATI UK, in partnership with the Association of British Pharmaceutical Industries (ABPI), hosted a one-day patient involvement conference. The purpose was two-fold, first to highlight the EUPATI toolbox and resources now available to empower patients and patient organisations to be better informed and involved in all aspect of medicine development. Second to facilitate how industry might strengthen the patient voice and bring the lived experience, to enrich the medicines development process and ensure a person-centred approach.

Despite being the day after the UK Brexit decision there was commitment and enthusiasm to continue to work together to share knowledge and experience and to find solutions to common problems. The ALLIANCE is committed to an agenda that puts people at the heart of all we do and to work together to ensure that they are full partners in their health and wellbeing.

**Human Rights**

A number of responses expected there to be a long term impact on the rights of people living in the UK. Some saw the UK’s membership of the EU as having been important to fighting for the rights of people who use support and services. Respondents also noted their concerns that leaving the EU would enable a retraction in people’s rights.

Respondents highlighted particular concerns about the impact for:

- Human rights
- Employment rights
- Rights to justice
- Rights to equality
Others highlighted the political situation in the UK as a cause for concern and suggested that the UK Government was already considering overturning human rights legislation before the referendum, but that the result gave them “increased latitude” to do so.

Some responses highlighted an increase in discrimination since the referendum:

- “I'm concerned about the withdrawal of human rights legislation, and increase in hate and stigmatisation of already vulnerable people.”

**European Economic and Social Committee**

The ALLIANCE’s Director Irene Oldfather is a UK representative, nominated by the Scottish third sector, on the European Economic and Social Committee (EESC), a consultative body that gives representatives of Europe's socio-occupational interest groups and others, a formal platform to express their points of views on EU issues. Its opinions are forwarded to the Council, the European Commission and the European Parliament and it has a key role in the Union's decision-making process.

Through its’ commitment to European integration, the EESC contributes to strengthening the democratic legitimacy and effectiveness of the European Union by enabling civil society organisations from the Member States to express their views at European level. Without this membership, Scotland will lose the ability to shape outcomes that impact its economic and social institutions, potentially leading to further inequalities and poverty.

In July 2016, Irene Oldfather tabled a debate on the matter of future co-operation and actions on dementia. Over 7 million European citizens have dementia and this was an opportunity to share the highly developed policy framework in Scotland, including the Charter of Rights for People with Dementia and their Carers. Also, amended Fighting Poverty report to Dutch Presidency to highlight links to poverty and health inequalities and identify National Link Worker programme, based at the ALLIANCE, as case study/example good practice contributing to narrowing gap.

**Too early to say**

A significant minority of respondents noted that it was “too early to say” what sort of impact the UK leaving the EU would have on health and social care in Scotland.

- “As a self-employed practitioner, I don't feel I have all the information. I'm not sure anyone does.”

- “It is too early to speculate, we do not know yet how this will affect health and social care.”

- “Currently the future is unknown and we shall have to wait till we see what arrangements are negotiated in the lead up to leaving the EU.”

Control and localised decision making
A minority of respondents highlighted that leaving the EU was an opportunity for the UK to “take control” and “self determine support and services without external input or interference”.

- “The potential to decentralise outweighs any likely benefit arising from membership”

- “The sector in Scotland is pretty strong and innovative and there should be no major changes except for not being able to access EU funding and perhaps the government will allocate some of the funds coming back in from the EU to support the sector.”