



Brexit and Public Services in Northern Ireland Working through uncertainty

Dr. Gordon Marnoch
Reader in Public Policy

ulster.ac.uk

Compare position of three areas of public services in Northern Ireland: NHS, Police and local authorities

- What are the obvious threats?
- Nature of uncertainty facing leaders and staff.
- Structure of uncertainty - time, resources, role change and data.
- Are there also opportunities?
- Negotiation - many of the issues up for negotiation in Brexit impact on these policy areas but they do not fit in to the EU definition of health policy or criminal justice.
- Uncertainty - government will avoid publishing a 'digest of details' that amount to worst case scenarios for fear of impacting negatively on negotiations.

Economic uncertainty and Brexit

- CIPFA – ‘Brexit will add two years of austerity’. Still the case after the election?
- How well do the NHS & care sector, police and local government do in securing a share of reclaimed resources?
- How exposed are they to sector specific economic threats and opportunities?
- The OBR estimates that we will need to increase health spending by tens of billions of pounds over the coming decades to meet growing demand.

Brexit and economic futures. The past matters too. Northern Ireland during austerity – spending 2011-2016 (£m) Treasury - PESA.

Year	2011-12	2012-13	2013-14	2014-15	2015-16
Health	3595	3639	3844	3871	3912 (+9%)
Police	957	917	899	911	820 (-14%)
Local Authorities	558	557	571	575	586 (+5%)

NHS & social care

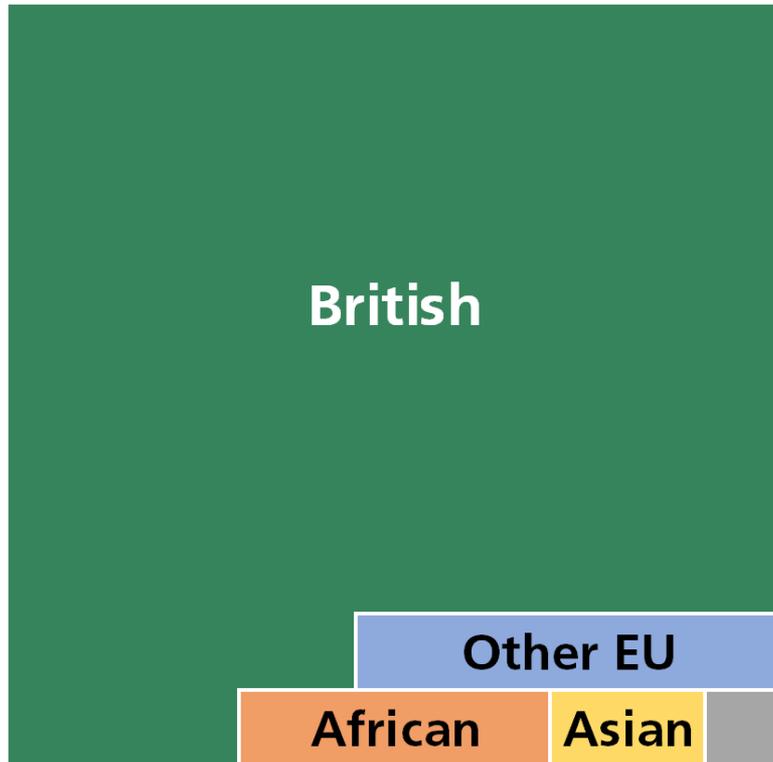
- Reciprocal care. Cost of patients needing care in EU countries and UK. EHIC.
- Cost of more intensive checking of patient eligibility for NHS services, inter-country billing for tourists and temporary residents?
- EU staff in the NHS, social care and academic research roles.
- NI-ROI - access to specialist and other healthcare across the border.
- The prospect of lower levels of EU cooperation on public health?
- EU law - the working time directive, procurement and competition law, regulation of medicines and medical devices and regulation of professional standards and medical education.
- Regulatory institutions – future of European Medicines Agency.
- When can these questions be dismissed or answered?

Reliance on EU staff in NHS and social care

House of Commons Library April 2017

Of every 1,000 NHS staff in England...

- ...877 are British
- ...55 are from other EU countries
- ...41 are Asian
- ...18 are African
- ...8 are from somewhere else



Future recruitment of staff for the NHS and social care from EU - 9% of doctors and 7% of nurses in England

Months	Monthly average of EU nurses and midwives joining the register for the first time
Sept-Dec 2010	226
Sept-Dec 2011	211
Sept-Dec 2012	277
Sept-Dec 2013	527
Sept-Dec 2014	707
Sept-Dec 2015	820
Sept-Dec 2016	204

Data on registration Nursing Midwifery Council. House of Commons Health Committee

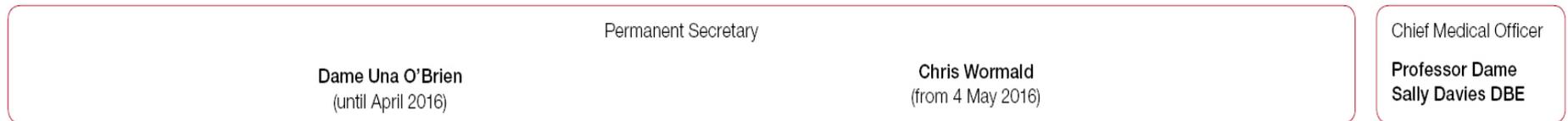
- No panic - the fall is due to the introduction of a language test in January 2016.....
- What happened next? Health Foundation report a '96% fall in registrations to 43 in April 2017'. (FOI)
- The RCN estimate 2000 nursing vacancies in NI NHS and community care and 40,000 in England.
- Longer term just how reliant is NHS and care sector on EU nurses and other clinicians?
- Currently in the English NHS 5.5% of the total workforce are from EU countries and 6.7% from rest of world other than UK.
- Context - nearly 6% of funded posts are currently unfilled.
- Northern Ireland NHS and social care sector similarly exposed but with additional border related issues.
- RCGP in Northern Ireland identify 11% of GPs as EU.

Data gaps

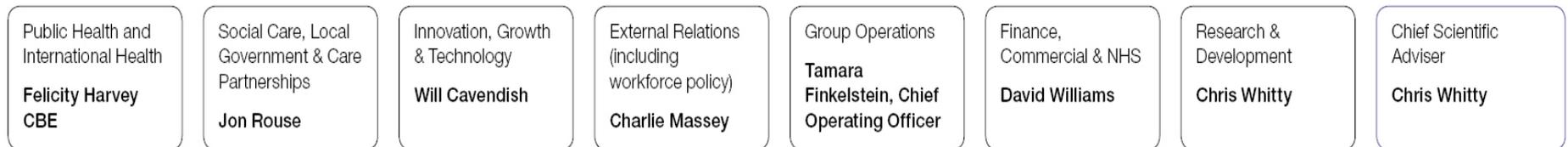
- Data on nationality is self reported. Unknown for 7% staff.
- Large data gaps on key areas of the workforce - primary and community care, agency and bank staff, vacancy rates, and independent and voluntary sector providers.
- The information needed to guide workforce planning at local and national levels has failed to keep pace with the growing plurality of providers. (Kings Fund 2015)
- Is there excessive sense of fear around the possibility of access to data causing 'social fear amplification' - where analysis produces inappropriate intensification of public fears about Brexit?
- Open up data banks so analysts do not need FOI.
- An audit is required.
- Across UK there are big regional differences.
- Northern Ireland and border proximity is a factor.
- Fear of weakening negotiating position may block this exercise.

The Department of Health has been subject to a 26% reduction since 2010. It is now set to fall from 1800 to 1300. How much attention will the Northern Irish health problem receive?

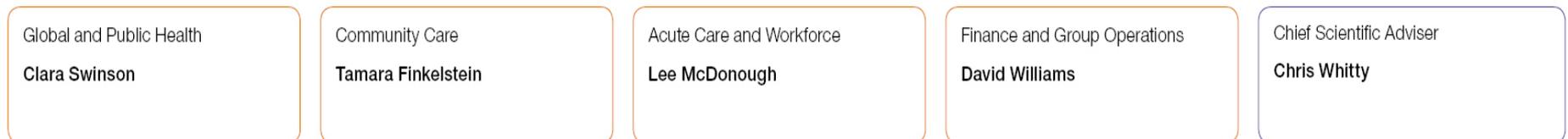
The Department of Health organisational structure



As of 2015-16



As of November 2016



Policing – consequences of leaving EU institutions

House of Lords European Union (Home Affairs) Committee

- Criminal justice closely linked to the EU.
- In 2014 following debates in Parliament the UK opted into 35 police and criminal justice measures.
- EUROPOL. Gathers, analyses shares information and coordinates operations. UK uses it more than anyone. Diminished membership status is inadequate.
- EUROJUST coordinates national investigating and prosecuting in relation to serious crime. Translation and legal advice are significant assets as are JITs.
- SIS II – real time alerts on individuals and objects of interest. 35,000 individuals wanted under EAW. UK joined 2015. Directly accessible by police officers on the street.
- ECRIS – records convictions in member states.
- Intergovernmental agreements negotiated bilaterally with individual EU members are possible but would be a long and complex process.

New roles

- Verifying the residential rights of those living in the UK. Potential flashpoints with both immigrant and host communities.
- Should Brexit lead to a hard/harder border with the Republic:
- PSNI supporting Border Force and UK Visas and Immigration
- Internal demands for the production of documentation.
- Potential risks to civil order in Northern Ireland.
- Associated data needs on populations and trade.
- Data handling capacity.

Local authorities - Brexit exposure

- Procurement changes and shifting market conditions
- Staffing
- Legislative : councils currently ensure compliance with and understanding of thousands of EU regulatory practices - including environmental health, building control and bathing waters

EU Funding:

- PEACE IV - 229 Euro (Local authorities - Children and Young People, Shared Spaces and Services and Building Positive Relations)
- ❖ INTEREG VA – 240 Euro (Local authority cooperation across the border. Example of a large allocation £1m to former Down District Council for energy efficiency project with 10 other local authorities)
- ❖ ERDF – 308 Euro (Local authorities and SME support)

NILGA -EU funds offer local authorities distinct advantages over other domestic programmes:

- A typical PEACE IV allocation - £3m over seven years to Antrim and Newtownabbey. (80% of annual £50m budget spent on waste management and sport/recreation services).
- Funding for projects that would not otherwise exist.
- Stable seven-year programming period.
- Encourage the development of new multi-sector, multi-level partnerships.
- They attract additional private and public sector match funding.
- Provide 'space' for policy innovation.
- Community planning and cross cultural peace and reconciliation work.
- Peace process - value non-monetary?

A Plan B?

- If it looks by June 2018 there will be no agreement by March 2019 can public service leaders expect a credible plan B?
- Costings, timetables, legal and technical analyses, with sufficient detail to base responses if and when needed.

Working through uncertainty

- Central government role - what will be represented, quantified, estimated and communicated to public services in course of negotiations.
- Well written policy often has to be vague to be adaptable.
- What level of uncertainty is acceptable and negotiable in the normal turn of managing?
- Public service leaders may try and extend the period before they need to decide and deliver.
- Risks calculations – likelihoods assessed and outcomes/impacts estimated.
- Structural uncertainties – see the possibility but cannot determine the likelihood of occurrence.
- Unknowables – events unimaginable in advance of occurrence
- Unpredictable driving forces – for example public opinion.
- Are leaders going to take a bet on one future?

Opportunities

- NHS and its space-location issues in Northern Ireland?
- NHS staffing – Brexit pushes recruitment problem over the edge and the need to train a surplus of UK clinicians becomes accepted?
- Police and border crime – a chance to address more effectively?
- Police and data handling capacities – a chance to develop rapidly?
- Police coordinate better with ROI?
- Local authorities – mainstream the type of project supported by EU funds?
- Local authorities - become more attuned to need for evidence on what works?
- Political support for taking the long term perspective?
- The closer Brexit runs to deadlines the more chance of expediency dominating.