

Rt Hon Boris Johnson MP

Prime Minister's Office
10 Downing Street
London
SW1A 2AA

Monday 9 March 2020

Dear Prime Minister

Re. EU trade negotiations

I am writing to you on behalf of the BMA (British Medical Association) as your government starts negotiations with the EU to determine the nature of our country's future relationship with the bloc.

Having noted your view that the future relationship be "based on friendly cooperation between sovereign equals for the benefit of all our peoples", the BMA has clear priorities which need addressing during negotiations to ensure that the medical profession can continue treating its patients to the highest possible level beyond the end of the transition period.

With over 22,000 EEA qualified doctors currently licensed in the UK, we urge your negotiating team to secure "a pathway for the mutual recognition of professional qualifications" so "that qualification requirements do not become an unnecessary barrier" to the UK's ability to recruit and retain doctors from Europe.

Patient safety across the UK and EU will be enhanced by ongoing participation (until the end of the transition period) in the Alert Mechanism, and we agree that in order to "protect public safety...(t)he parties should explore how competent authorities could recognise applicants who demonstrate that they meet the host states' standards."

We acknowledge your statement that the Comprehensive Free Trade Agreement (CFTA) "must respect the sovereignty of both parties and the autonomy of our legal orders" and "cannot therefore include any regulatory alignment". However, such regulatory divergence, as it will be ultimately be, risks raising trade barriers which may delay or disrupt the flow of essential health supplies and could severely limit the UK's ongoing ability to collaborate closely with the EMA (European Medicines Agency). As such collaboration helps deliver timely access to innovative medicines and medical devices for our patients, and maintain robust pharmacovigilance systems, we would urge your government to pursue an agreement which maximises these levels of cooperation for the benefits of patients in the UK and across Europe. For example, via the negotiation of a formal agreement for the UK to continue to support and participate in EMA assessments and for mutual recognition/ongoing participation in the CE-mark (Conformité Européenne) scheme for medical devices.

The development of innovative treatment and research in our world-class universities would not be possible without the invaluable input of those thousands of EEA nationals - 17% of the total workforce - working as academic staff in the UK. In addition to delivering the necessary frictionless



visa-free travel and reciprocal social security – including healthcare – rights necessary for such experts and other healthcare professionals to choose to work in the UK, retaining our country's position as a world leader in medical research will further require the closest possible level of involvement with the EU's research networks and funding programmes.

You will be aware that the impact of the UK's departure from the EU will be most keenly felt on the island of Ireland where EU legislation and funding has played a complementary role in the development and delivery of vital cross-border health services, as well as in bringing peace to the island. Accordingly, we call for the UK government's full support for the successful delivery of the PEACE PLUS Programme and the cross-border healthcare projects that it will support in due course.

Noting the complexity of the Northern Ireland/Ireland Protocol, we would also call for your government's support in ensuring that its implementation does not result in delays to the importation of vital medicines to Northern Ireland from Great Britain.

As our members' pan-European efforts to tackle COVID-19 demonstrate all too clearly, it is critical that the terms of the future relationship do not reduce the ability of UK bodies and the European Centre for Disease Prevention and Control to cooperate and tackle pandemic threats.

With the full understanding that the depth of the trading relationship between the UK and the EU is the fundamental question at the heart of negotiations, it is imperative that the agreement does not restrict – via liberalisation of the healthcare sector or investor protection mechanisms – future Governments' freedom to develop reform of the NHS, and the interface between health and social care, towards a more collaborative model.

We are also extremely concerned that your statement that the "agreement...cannot therefore include any regulatory alignment" may signal intent to diverge from the existing "high standards of free and fair trade and workers' rights, consumer and environmental protection", which your government committed, in the Revised Political Declaration, to safeguard.

Accordingly, we would request that your government, either within the scope of the CFTA or separately within domestic legislation, commits to maintaining workers' rights beyond the end of the transition period at the current EU level, by, for example, retaining the existing equalities protections from EU law and upholding the provisions within the UK WTR (Working Time Regulations), which has reduced fatigue amongst doctors and improved their safety and that of their patients in the UK.

Having been explicit about the damaging consequences that a 'no deal' Brexit will have for patients, the health workforce and health services across both the UK and Europe, we note with concern that the ambitious timeline for completion of the negotiations means these fears are still held.

Therefore, I urge your government to secure a CFTA with the EU that permits our members' continued treatment of their patients to the highest possible level beyond the end of the transition period.

I do hope that this letter is useful in your negotiating team's preparations and can advise that we would be happy to meet with them to discuss these matters in person.

Yours sincerely



Dr Chaand Nagpaul CBE

BMA chair of council