Brexit Update

On 21 February, European Commission (EC) Vice-President, Maroš Šefčovič and Secretary of State for Foreign, Commonwealth and Development Affairs, The Rt Hon Elizabeth Truss met in Brussels for the ninth meeting of the Withdrawal Agreement (WA) Joint Committee, which provides a forum to discuss the implementation of the WA and its Northern Ireland (NI) Protocol. In a joint statement, both parties expressed the 'ongoing determination of both parties to ensure that the outstanding issues in the context of the protocol are addressed, and durable solutions found for the benefit of citizens, businesses and stability in Northern Ireland.'

Maroš Šefčovič stated that the UK is breaching the WA with its treatment of EU nationals and does not provide any concrete proposals to resolve the outstanding post-Brexit differences on NI trade rules. He added that the outcome of the meeting is 'neither a breakthrough nor a breakdown.'

Under the UK's EU Settlement Scheme (EUSS), EU citizens who settled in the UK before Brexit and lived in the country for less than five years can be granted pre-settled status, allowing them to preserve their rights to live, work and access UK public services. However, the EU has for many months fought the UK’s decision to require this group to make a second application within five years of the granting of pre-settled status. If they fail to do so, the Home Office will consider them unlawfully present in the UK and no longer entitled to exercise residence rights. According to the EC, approximately 2 million EU citizens might be affected by this requirement. EC Vice-President also raised concerns about the UK's decision to split EU citizens into two cohorts — indistinguishable on the basis of their EUSS status — depending on whether they had private health insurance during periods of their residence when they were economically inactive. The EC will now consider whether to launch consultations on citizens’ rights and could ultimately trigger an arbitration process. There is no timeline available for such actions but the EC advised that it might happen before the outcome of judicial review proceedings on the second application requirement, launched last December by the Independent Monitoring Authority (IMA), a body that seeks to ensure the rights of EU citizens settled in the UK before Brexit are respected.

The UK side raised the following three areas of concern: the lack of an adequate appeal process in some EU countries for British citizens who are refused residence status; problems with paperwork proving peoples' right to be other countries; and people being asked to prove things they shouldn't have to in order to access their rights. The EU officially noted the issues and promised to make progress in these areas.

Maroš Šefčovič advised that the issues over the supply of medicines from Great Britain (GB) into NI have been solved (however this is yet to be confirmed by the UK Government) and he referred to the recently published factsheets on the NI Protocol in the areas of medicines supply, customs, sanitary and phytosanitary goods (SPS) and stakeholder engagement.

He concluded that officials are expected to redouble their efforts in the coming weeks to reach practical solutions to their outstanding differences over customs requirements and SPS checks. However, the ongoing talks are expected to enter a quieter phase due to the Northern Ireland election taking place on 5 May.

The BMA is monitoring the situation and its impact on members and the wider health and social care sector and will engage with the Cavendish Coalition, of which the BMA is a member, and the Home Office directly on these matters.
COVID-19 Response

The EC recently proposed to extend the EU Digital COVID Certificate for a further year until 30 June 2023. The proposal also includes the following amendments: to add high-quality laboratory-based antigen tests among the types of test for which a test certificate can be issued; to ensure that the vaccination certificate contains the correct overall number of doses administered in any member state; to allow certificates to be issued to individuals whose vaccines were administered under clinical trials.

The European Parliament (EP) recently established a new special committee to look into lessons learned from the coronavirus pandemic. The COVID-19 committee will comprise 38 members and will be tasked with investigating the European response to the pandemic in the areas of health, democracy and fundamental rights, economy and society, and the EU’s global relationships. EP’s special committees have a 12-month term, which can be extended up to a maximum of 18 months.

Vaccine producer Valneva has announced that it has received the European Medicines Agency’s (EMA) initial assessment of its coronavirus vaccine and expects a positive recommendation for conditional approval by the end of March. The initial assessment is part of the EMA’s rolling review process. The EC signed a contract with Valneva last November that foresees the supply of 60 million doses over two years. Valneva is also seeking regulatory approval in the UK and has started building a plant near Edinburgh. This comes in the aftermath of the termination by the UK Government of its contract with Valneva for allegedly breaching its supply obligations.

The Randomised Evaluation of COVID-19 Therapy (RECOVERY) trial recently published its findings stating that baricitinib, a drug used to treat rheumatoid arthritis, has shown to be effective at reducing the risk of death in people hospitalised with severe COVID-19. Among patients treated with baricitinib, the risk of dying fell by 13% compared with those not given the drug. In addition, the benefits were seen irrespective of which other treatments patients were receiving for their condition, including steroids, another rheumatoid arthritis drug or an antiviral. RECOVERY advised that this result opens up the possibility of using combinations of anti-inflammatory drugs to further drive down the risk of death for some of the sickest patients. In UK hospitals, doctors are already using tocilizumab and sarilumab to treat severe COVID-19. Regarding routine use of baricitinib, UK Health Secretary Sajid Javid said ‘medical and scientific experts will now consider the results before any decisions are made on next steps.’

Experts advising the World Health Organisation (WHO) on the composition of new COVID-19 vaccines stated that more evidence is needed on the efficacy of variant-specific vaccines in vaccinated and unvaccinated people before making a decision on next COVID vaccine composition. In its second statement since being appointed by the WHO last September, the Technical Advisory Group on COVID-19 Vaccine Composition (TAG-CO-VAC) again called for vaccine manufacturers to supply clinical data on monovalent jabs that target the Omicron variant of the coronavirus, for example, as well as for multivalent jabs. While existing vaccines continue to protect well against severe disease and death, the group advised that new vaccines should be improved, including preventing infection and transmission.

Updates on the BMA’s extensive work and guidance on this area can be found here with updates on the EU’s response here, from the ECDC here, from EMA here and from WHO Europe here.

Horizon Europe Update

The UK Government recently published a report from the first meeting of the Specialised Committee on Participation in Union Programmes (SCPUP), established under the UK-EU Trade and Cooperation Agreement (TCA), which provides a joint forum between the UK and the EU to address matters relating to participation in EU programmes. The report refers to a number of concerns on the UK side, including the continuing delay in formalising the UK’s association in Horizon Europe and the impact this is having on scientific research and longstanding UK-EU collaborations. The UK presented its unilateral steps to mitigate the damage of delays, including the UK guarantee fund as reported in January 2022 European Brief, and required the Protocols to now be adopted. The EU acknowledged the concerns raised by the UK and stated that the delay is caused by the current political situation and the ongoing dispute over the implementation of the WA and the TCA.

As previously reported, the BMA, together with our European partners, co-signed a statement calling on the EU to formalise the UK’s association to Horizon Europe without further delay. BMA Chair of Council, Dr Chaand Nagpaul, recently signed a
pan-European campaign, ‘Stick to Science’, initiated in a response to ongoing delays to signature of association agreements with the UK and Switzerland.

**Public Consultation on Food Information to Consumers**

The BMA responded to an EU public consultation on EC plans to revise EU legislation on the provision of food information to consumers (EU Regulation 1169/2011), which will continue to apply to NI post-transition as listed in the NI Protocol (page 34). The future revision includes front-of-pack nutrition labelling; origin labelling and date marking; and the labelling of alcoholic beverages. The EC, in its future legislative proposal, is expected to propose harmonised mandatory front-of-pack nutrition labelling across EU member states.

The BMA’s response calls for mandatory requirements, covering the entirety of the alcohol industry, requiring producers to comply with Regulation 1169/2011 and list ingredients and nutritional information per 100ml on products’ labels. It adds that it should be mandatory for alcohol products to show unit information, alcohol consumption guidelines, a health warning message, and advice not to drink during pregnancy. This information should also be readily available at the point of sale and in all printed and electronic material relating to the product.

The BMA also called for a standardised, consistent approach to food labelling based upon the traffic-light front-of-pack labelling, including Guideline Daily Amount (GDA) information. It adds that traffic-light labelling, comprehensive nutritional information and clearly visible portion size information should be mandatory on all pre-packaged food and drink products in retail outlets, so that consumers are able to make informed choices. Additionally, there should be information on high-sugar products.

**Humanitarian crisis Following the War in Ukraine**

As the invasion by Russian forces continues to threaten the lives of millions of civilians still in the country, the world, including the EU, is looking to respond to the growing exodus of those who managed to escape. Over two million refugees have left Ukraine, with more than a million fleeing to Poland, according to the latest figures from the United Nations High Commissioner for Refugees. EU Health Commissioner Stella Kyriakides recently visited Poland and announced that the EU has secured over 10,000 hospital beds across member states for patients who have fled the war in Ukraine and confirmed setting up a European system which allows transferring those patients in need of treatment, including sick children, cancer patients, patients with burns or those needing intensive care. In addition, Poland’s Ministry of Health is making vaccines available for children arriving from Ukraine.

The pandemic, which until now has taken a back seat to the unfolding events, risks becoming a new front line in Ukraine and in the region. Hans Kluge, WHO director for Europe, advised that, remarkably, Ukraine has continued its COVID-19 surveillance and response system. He added that last week 731 deaths were reported, and that that number will rise due to ongoing oxygen shortages and low vaccination rates in vulnerable groups. Only a third of those over the age of 60 are fully vaccinated.

The European Centre for Disease Prevention and Control (ECDC) stated in its report that refugees in reception centres may be at risk of outbreaks of pathogens like the coronavirus or seasonal influenza. The report also raises concerns that coronavirus is not the only public health threat posed by the war, as experts worry about potential measles and polio outbreaks due to low vaccination rates, as a national vaccination campaign started on 1 February was disrupted by the war. Brigitta Sáfár, head of disaster management of the Hungarian Red Cross advised that its members working at the border are wearing full personal protective equipment and added: ‘obviously, no one asks for a PCR from refugees escaping from an armed conflict country.’

To date, 16 Russian attacks on healthcare facilities in Ukraine have been confirmed resulting in multiple deaths and injuries. The BMA called for the principle of medical neutrality to be respected and the issue has also been raised by the WHO, World Medical Association (WMA) and WMA and Standing Committee for European Doctors (CPME).

Given the scale of the unfolding humanitarian crisis as a result of the war and huge displacement of people, the BMA has committed £25,000 to support the British Red Cross Ukraine Crisis Appeal. Donations are focused on providing those in need with essentials such as food, water, first aid, medicines, warm clothes, and shelter. Both the UK Government and Polish Embassy in the UK have been promoting donations of money rather than items. The BMA has also written to The Rt Hon. Elizabeth Truss requesting specific medical supplies for Ukraine following a request from the Ukrainian Medical Association via the WMA.
The WMA, European Forum of Medical Associations (EFMA) and CPME have set up a taskforce to coordinate the support from the medical community. This initiative aims at raising funds, establishing routes to send medical supplies through Poland and Slovakia and providing relevant contacts.

The BMA has also been promoting the BMA's wellbeing support services and workplace support services for affected UK-based doctors and medical students.

The BMA will closely monitor developments on the situation in Ukraine and continue with its efforts to mitigate the repercussions of the ongoing humanitarian crisis following the war.

For further information on any of these news items, please contact:
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