

Here is the brief for Monday 11 January 2021.

**Chief Executive's update** Caroline Hiscox has given up her slot in the brief and instead asked members of the senior team to provide a number of updates this week and there is more on this below. Remember, you can get in touch with Caroline at any time, via [gram.grampianchiefexecutive@nhs.scot](mailto:gram.grampianchiefexecutive@nhs.scot).

Before Christmas, our Director of People & Culture, Tom Power, wrote an open letter to all NHS Grampian employees explaining the need for temporary deployment as we work through winter with COVID-19, and seek to scale up our Test and Protect, Vaccinations and Staff Health & Wellbeing support. As the lead for the Operation Snowdrop Staff Health & Wellbeing programme and our Deployment arrangements, Tom has filmed [this short video](#) explaining a bit about temporary deployment, and what kind of help will be needed via the Deployment Cell to support health, safety and wellbeing over the coming weeks.

**Changes to the COVID-19 Vaccination dosing schedule** We got off to a strong start with the COVID-19 vaccination Programme. A significant number of frontline staff vaccination has been completed by peer to peer vaccinators as well as the special clinics set up for all front facing health and social care staff, including the staff of older people's care homes.

As you will be aware, instead of starting second dose vaccinations last week we were instructed by Scottish Government, on the advice of the JCVI, to reschedule second doses to the twelfth week following initial dose and maximise the number of at-risk individuals receiving the first dose of vaccine. This instruction and its application in NHS Grampian has caused both disappointment and some concerns amongst both vaccinators and staff. Clearly, everyone involved had been operating in good faith, with NHS Grampian information provided to staff indicating a 21-28 day interval between first and second doses. Consent for vaccination was provided on the basis of a two dose schedule meeting JCVI and manufacturer guidance.

It is highly unusual for a vaccination schedule to be amended during its delivery and to be applied retrospectively for patients who had already received their first dose. However, these are very exceptional times. Whilst NHS Grampian would, under normal circumstances, do everything within its power to honour its original timetable of vaccination, the instruction from the Chief Medical Officers, on behalf of the UK Governments, made it clear that the change was required to reduce potentially avoidable significant COVID-19 related harm.

NHS Grampian remains committed to delivering the two-dose schedule that staff consented to. It recognises the trade-off between the protection offered by the first dose (90% estimated for Pfizer) and the post second dose protection (95%), with the public health priority of protecting as many at risk individuals as possible and reducing the incidence of serious illness requiring hospitalisation. This trade off and the maximisation of first dose vaccinations should ultimately deliver better population level protection than delivering a shorter two dose schedule to a smaller number of people.

Concerns have been raised both about the efficacy offered by the first dose compared to after the full schedule. Some staff have also expressed feeling let down by the organisation through not delivering the vaccination schedule within the original timelines. Please click [here](#) to read the latest letter from the CMO, Dr Gregor Smith. This contains links to further information which you may find useful.

**COVID-19 vaccine and anaphylactic allergic reactions** As previously highlighted, the Pfizer vaccine is unsuitable for people with a particular history of anaphylactic allergic reactions to medicine and unknown products. If you have declined/been declined at a Planned Clinic/ Peer to Peer appointment/not requested a vaccine appointment on this basis, please email [gram.aricovidvacc@nhs.scot](mailto:gram.aricovidvacc@nhs.scot) to request an appointment to be vaccinated with the Oxford/AstraZeneca vaccine. Please note, this is only for those staff members whose anaphylactic allergic reaction history prevents them from receiving the Pfizer vaccine. All other vaccine requests should be made using the appropriate form, available [here](#).

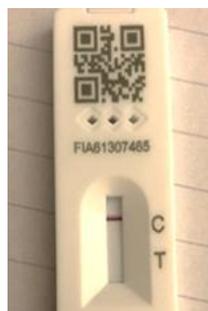
**COVID-19 vaccine - for the attention of Aberdeen City H&SC staff** A large number of staff are currently being allocated vaccination appointments on both the ARI and RCH site as well as the Health Village. We are trying to bring forward as many appointments as possible and using capacity across the whole system helps us to do that. Please accept your appointment regardless of where you are offered. Thank you for your support in this matter.

**Grampian data** The local figures for today and over the weekend are shown below. Following feedback, we have also included information on the positivity rate in Grampian. If you click [here](#) you can visit the Public Health Scotland website, which includes neighbourhood figures for all local authority areas in Scotland.

	Daily number of new people tested	New cases in past 24 hrs	Daily no. of contacts isolated in past 24 hrs	Patients in hospital	Patients in ITU	Deaths in hospital
Sat 09/01	627	199	112	89	11	4 <small>1 further death on 07/01 and 3 on 08/01</small>
Sun 10/01	726	187	154	94	15	2 <small>10/01</small>
Mon 11/01	720 <small>691 avg daily tested last 3 days</small>	121 <small>Down 66 from 10/01/21</small>	148 <small>Down 6 from 10/01/21</small>	98 <small>Up 4 from 10/01/21</small>	13 <small>Down 2 from 10/01/21</small>	0 <small>Last recorded death 10/01</small>
	<small>Tests reported from Illuminate up to 3pm on 09/01/21 NB tests refreshed daily due to lag in reporting</small>	<small>Reported by Scottish Govt up to 8am today</small>	<small>Reported from CMS up to 15.30 today</small>	<small>Confirmed patients from Trakcare according to new definitions from 15/9</small>	<small>Confirmed from Trakcare as per SG definitions - excludes patients who were +ve &gt;28 days. ECMO patients included if flagged for COVID-19</small>	<small>Confirmed from Trakcare</small>

**7 day rolling positivity rate on 11/1**  
9.49%

**Staff Lateral Flow Testing** We have been made aware that some batches of our Lateral Flow Device test kits have serial numbers with the format of 3 letters followed by 8 numbers (see below),



The results e-portal [www.covidtestingportal.scot](http://www.covidtestingportal.scot) will only allow users to enter 1 letter followed by 8 numbers; if you have such a batch number, please note that the workaround solution is to enter the FIRST LETTER followed by the 8 numbers (i.e. ignore the 2<sup>nd</sup> and 3<sup>rd</sup> letters).

**Primary Care update** Across Grampian Primary Care providers have been asked to look at all the services they provide in light of the new 'lockdown' restrictions. GPs have been issued with an 'escalation' guide which will help them to identify which services are critical and which less so. Each GP practice is unique, and each practice will have to make some difficult decisions about some of the services they currently offer.

What will continue across Grampian is the role of the GP as first point of contact for patients. GP practices will continue to triage calls and ensure that people receive the right care at the right time and crucially from the right person. Where clinically required, practices will continue to provide face to face appointments - the right person could well be an ANP, AHP or a community pharmacist. GP practices also support the COVID hubs, and with greater rates of infection in the community the ask from the hubs to GPs is increasing. These Hubs manage all COVID-19 queries referred through NHS 111. Likewise, many practices are looking at ways to potentially support the roll-out of the COVID-19 vaccination programme for the over 80s initially which could have a knock on impact on the day-to-day services they could provide. Unlike the general lockdown of March/April 2020 national screening programmes such as Cervical Screening will continue.

**Hospital & care home visiting** The move to a temporary lockdown does not change visiting status in hospitals – at present we may arrange Essential Visits only. All arrangements for essential visits remain the same and must be arranged in discussion with the Nurse in Charge of the Ward/Clinical Area before visiting. We know this is very difficult for patients and their loved ones but is a necessary measure to protect patients, their visitors and families. We are grateful for your continued co-operation and support at this time.

Guidance has been circulated to our colleagues in the care home sector to advise them of the current position, as follows:

- visiting a loved one in care homes is classed as essential travel – exempt from travel restrictions
- indoors: essential visits only.
- outdoors: visits to the care home to see loved ones via garden or window visits, arranged with care home in advance. As a result of the additional risk posed by the new variant, garden visits should now be limited to one visitor and visits by children and young people should be suspended.

For more information on [care home visiting](#) and [hospital visiting](#), please click the appropriate link to read the Scottish Government guidance in full.

**Social media – remember to think before you post** Social media is an amazing tool for communication and something we as an organisation use to keep the general public informed. It is not without its pitfalls however – we have all seen examples of it going terribly wrong for celebrities, world leaders, and ordinary people alike. We have guidance on the personal use of social media (available [here](#)) and we would encourage you to take a look. Professional bodies also provide information and guidance and this should be consulted by those of you with professional registrations.

**Thought for the day – a thirst for knowledge** It is ok not to know. This may seem like a strange thing to write at the end of such a packed brief but bear with us. While much of this second wave is different (better and worse) than the first, what is unchanged is the speed of developments, the amount of information that is available to or is thrown at us. While at the brief we do believe knowledge is power, too much can bog down our thinking and lead to worrying about things that we can do nothing about. So, if it all becomes too much and you find yourself hitting information overload, then stop. Concentrate on your own job, the information you need to do it, stick to trusted sources, and focus on what is in your power.

**Questions to ask? Information to share?** If you have particular questions – or are aware of questions coming from friends and family – please share them with us. We may not be able to answer every question and it may take us time to get a proper answer, but we will endeavour to respond and share the answers. You can get in touch with us via [gram.communications@nhs.scot](mailto:gram.communications@nhs.scot). Please also use that email address if you have items for consideration for future briefs.