

COVID-19 Brief

coronavirus



Here is the brief for Thursday 1 July 2021.

COVID-19 and current pressures As we are all too aware, cases of COVID-19 are rising as the easing of restrictions provide more opportunities for transmission. As a result, the number of close contacts has risen exponentially, with the consequence that many workplace settings are experiencing significant staff absences as staff self-isolate. Our Chief Executive Caroline Hiscox yesterday reflected that health & social care is not immune to this and, as many of you will be experiencing first hand, there is currently significant pressure in the system due to unplanned absences - compounded by the start of school holidays and planned annual leave.

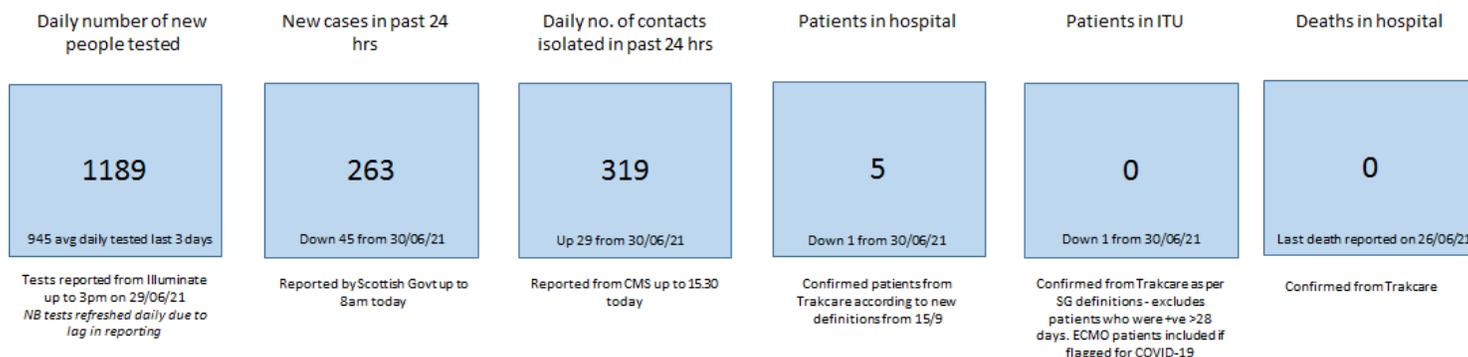
Today we wanted to let you know that a Silver Command has been established and bronze control rooms have been stood-up to bring together leaders from across the system to co-ordinate our response to this situation. As a result of Silver Command's first meeting, it has been agreed that from 12 noon tomorrow only one visitor will be allowed per patient – there's more on this below.

Whilst it has been decided not to move to a formal Civil Contingency position at present, this will remain under review and practical steps to maintain staff and patient safety will continue to be taken where appropriate. Updates will come via this brief and through your local team structures.

Hospital visiting In light of the rapidly rising number of confirmed COVID-19 cases and to protect both patients and staff, from 12 noon tomorrow (Friday 2 July), hospital visiting, at all NHS Grampian hospitals, will be limited to one, named, person per patient. Where possible, this should be the same person for all visits. Should the named visitor become unwell - with symptoms of COVID-19 or any other illness - they should not visit and other arrangements can be made.

We will continue to take a person-centred approach to visiting, especially where patients are vulnerable, have additional support needs, or are receiving End of Life care. Families are encouraged to have a conversation with the appropriate Senior Nurse or Midwife to understand what is possible in individual clinical areas/services before visiting. Virtual Visiting remains an option across NHS Grampian hospitals.

Grampian data Here is the local update for today, including the 7-day rolling positivity rate. As a reminder, this rate is arrived at by dividing the number of positive tests in the past 7 days by the number of tests carried out in the past 7 days. Repeat tests are included in both categories. The figure for the "daily number of new people tested" is only for the number of tests for people who have not been tested previously. A national update is available on the [Public Health Scotland daily dashboard](#).



7 day rolling positivity rate on 29/6
6.85%

Everything you ever wanted to know about PCR testing but were afraid to ask The third wave of COVID-19 has prompted some renewed questions from you about PCR testing – something most of us were blissfully unaware of prior to the pandemic. We've asked Dr Noha El-Sakka (Consultant, Medical Microbiology and Virology) to explain a little more:

What is PCR? Reverse Transcription Polymerase Chain Reaction test (RT-PCR), also known as PCR tests, use a highly sensitive and specific technique which is the gold standard for diagnosing viral infections. The technique identifies and amplifies a specific section of the viral genetic material, known as a target. Each RT-PCR test is designed to detect a target based on the genetic code of the virus.

The virology laboratory in Grampian offers SARS-CoV-2 testing and is working in collaboration with the Scottish Microbiology & Virology Network (SMVN), National Laboratories Programme (NLP), National COVID-19 Quality Group (NCQuaG) and HPS as well as linking in with PHE to ensure that all tests are suitably quality controlled, sensitive, and specific.

How do you know that the RT-PCR test for SARS-CoV-2 is accurate? These tests being used are real-time RT-PCR assays which are used to identify the causative agent of COVID-19 disease, known as SARS-CoV-2 virus, in clinical samples. All these assays have been designed to target a section of the SARS-CoV-2 genetic material which is specific to the virus.

There are a variety of RT-PCR tests currently in use in Scotland to confirm the presence of the virus SARS CoV-2, all of which are regulated and approved by the Medicines & Healthcare products Regulatory Agency (MHRA), and thereafter validated for use by the Scottish laboratory performing the test. Furthermore, many of the commercial assays are used as the primary method for diagnosis by a number of other countries worldwide.

What quality control processes are in place for PCR? NHS laboratories (including our own) perform quality control procedures as part of the routine workflow. These include the use of:

1. Positive control material to show that the assay is working correctly.
2. Internal control material to show that extraction is working correctly. This is not viral material and so cannot be confused with a positive result for SARS-CoV-2.
3. Negative control material to show that cross contamination has not occurred.

NHSG virology Laboratory also take part in external quality control scheme (QCMD).

Your Professional Registration matters – don't let it lapse! If you have a professional registration – for example with the NMC, GMC, or HCPC – and your account was registered with your previous NHS.net email address, **please ensure your contact details are updated as a matter of urgency.** Important information from these bodies, including dates for renewal, may be missed otherwise. Please remember these e-mails may also go into Junk/Spam folders so check those regularly too. A lapsed professional registration will impact on your ability to work and will most likely result in a disciplinary hearing in line with NHSScotland Workforce policies.

Long COVID in NHS Scotland staff – can you help local research? Robert Gordon University and University of Aberdeen are working jointly with colleagues at St Andrews and the Chief Scientist Office to research and understand the impact of Long COVID on people working in the NHS in Scotland. They want to hear from you if you have ongoing symptoms of COVID-19 that have lasted at least 4 weeks after infection, and/or symptoms lasting 12 weeks or longer. Recognising that testing for COVID-19 was not available to everyone at the start of the pandemic, a positive test is not a requirement to take part in this research. [Further information about the study, links to the online survey, and contact information for the study team are all available on this webpage.](#)

National Distribution Centre (NDC) deliveries still running behind schedule All National Distribution Centre (NDC) deliveries are still running behind scheduled delivery to NHS Grampian. This delay is still in the region of one working day behind normal and is expected to continue throughout July. These delays are due to system and staffing related issues which are being addressed with an increase in staff resource. The NDC apologise for the inconvenience and disruption caused to all services and staff. Please keep in mind that this remains only a logistical staffing issue, there is no shortage in stock available. If you would like to discuss your NDC orders, please contact NHS Supply Chain Customer Services (gram.logscustserv@nhs.scot) or your Ward Product Manager.

Thought for the day – are we swimming against the tide? Last night I – like many of you, I suspect, watched Andy Murray at Wimbledon. It was incredibly jarring to see the crowd sitting so closely together, most without masks, after a day at the NHS chalkface. Yes, the championships (along with Euro 2020 fixtures in the UK) are test events and fans have to meet certain criteria to attend. Still, I couldn't shake my discomfort and it seemed a world away from our pandemic experience. Based on the emails and questions we get from you, many of you are feeling the same way. In our workplaces, we don't FRSMs, maintain 2 metre distance, meet constantly on Teams instead of face to face, and lots of us are still at the kitchen table, back bedroom, or wherever else we hastily knocked up a home office in March 2020. Take a trip into the outside world though, and it can feel like everyone has collectively clocked off on COVID-19. It does beg the question, why are we sticking with it? Well, the obvious answer, in the workplace at least, is that we have to. That's the rules. The time will come when the rules will change and our workplaces will, we hope, get back to something akin to normal. However, whether at work or at home, sticking with it is pretty much the only option we have. We need only look at Stonehaven, where a number of businesses have been forced to close due to staff self-isolating and some others have closed voluntarily because of concerns about community transmission. Substitute businesses for hospital wards, clinics, or GP practices and you can see how quickly healthcare could fall apart. We are already bearing the strain of staff absence and increased activity. Continuing to swim – against the tide or not – is the only sensible choice we can make.

Tune of the day We've had a bit of a debate about keeping Tune of the Day going, in light of current circumstances. Many of you have very kindly taken the time to say you like this feature and treat it as bit of 'you-time' to round off – or start – your day, depending on when you read the brief. So, for now, it stays. Teenage me was a big fan of songs you could really give your all to when singing along and luckily in the mid-to-late 90s there were plenty of women creating tunes tailor made for that! [Weak by Skunk Anansie was always a huge favourite and I share it today, with the suggestion that you too give it your all.](#)

Get in touch! If you've got a question, an item to share with people working in health & social care, or just want to suggest a tune of the day, we want to hear from you! Drop us a line via gram.communications@nhs.scot.