

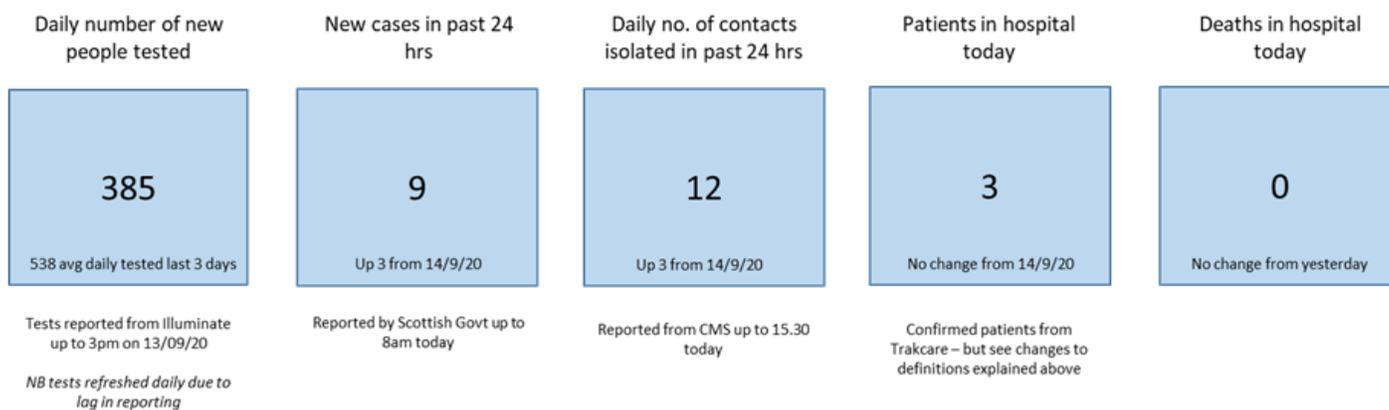
# COVID-19 Brief

coronavirus



Here is the brief for Tuesday 15 September 2020. Please ensure that you share this brief with colleagues and staff who do not have access to email, especially if they are self-isolating, otherwise working from home or do not have ready access to a PC. Briefs are shared on our dedicated website [covid19.nhsgrampian.org](https://covid19.nhsgrampian.org) which is updated continuously.

**Grampian update – change in reporting** The most up-to-date Grampian data about COVID-19 new cases, contacts and care in Grampian hospitals is shown below. Until today, all boards in Scotland were advised to report patients in hospital with COVID-19 if they had a positive test **at any stage**. This has become a less reliable indicator of virus-related hospital care with many patients who had previously tested positive now in hospital for another reason. **New definitions have been introduced from today which mean that we will only include patients who first tested positive within 14 days before admission or during the current hospital stay.** Patients who first tested positive more than 28 days before their admission, or the date of the first positive test (whichever is most recent), will be excluded. This change means that we are reporting 3 patients in hospital at 8am today compared to 20 using the old definition.



National data is provided by Public Health Scotland. You can view that [here](#).

**Staff testing** The NHS testing system is experiencing increasing demand, requiring stricter adherence to the eligibility criteria. Symptomatic staff are to isolate and seek testing for any of the symptoms listed in the [FAQ](#). However, asymptomatic staff only have to isolate if a household member has a fever, new continuous cough, and/or loss of taste or smell. Asymptomatic staff can continue to go to work if a household member has any other symptoms. Household members will only be tested if they have a fever, new continuous cough, and/or loss of taste or smell.

**The Protect Scotland app and your data – what you need to know** Yesterday we asked what the major concerns were for those of you who have not downloaded the Protect Scotland app. The results speak for themselves:

# Please rank your reasons for choosing not to download the Protect Scotland app. You do not need to rank all options.



The Protect Scotland website has an extremely detailed section on what is done with the data collected and you can read that [here](#); these are the key points:

- The app does not collect your name, age, or address.
- The app does not hold your phone number.
- It cannot be used to track your location.
- It cannot be used to check if you are self-isolating.
- It cannot reveal the identities of close contacts.
- It cannot reveal the identities of people who have tested positive for COVID-19.
- It will only share anonymised information from your phone if you give it permission to.

We aren't here to 'hype-up' the app; downloading it is completely voluntary. It won't magically make the virus disappear. What it will do is support the Test & Protect programme, by rapidly alerting people who have been in close contact with a detected case, allowing them to start self-isolation sooner and take the steps they need to protect others in their household.

**Remobilisation – GP update – Dr Denise McFarlane** “GP Practices have remained open throughout the pandemic, speaking to, and seeing patients via video consultations and, when clinically required, face to face by appointment only. Urgent medical problems are still dealt with quickly by GPs, nurses, paramedics and other trained staff. They should still be the first port of call for any medical concerns, keeping our hospitals free to deal with emergency care.

“We are moving into a phase of living with this virus. Patient concerns, worries and symptoms will continue to be managed by the team at their General Practice, this will be by phone or eConsult – an online (email) communication with your practice. The GP team will then decide whether a Near Me consultation, a phone consultation or a face-to-face appointment is most appropriate. Patients who need to be seen in person are being asked to wear a face mask and the appointments are short, as the clinician will already have most of the information they need. Where necessary, practices are making adaptations for those patients who cannot wear masks.

“It is vital both patients and staff feel safe working in GP practices, so physical distancing and the appropriate use of PPE is in place throughout primary care. This does change the look and feel of a GP appointment, but what hasn't changed is the standard of care.”

**Clarification - Eye & face protection** We have been asked to repeat this item from yesterday's brief, with additional clarification.

The PPE cell has recently considered all eye & face protection currently available within Grampian. This included a review of safety, suitability, and supply chain. As full-face visors can be utilised for both droplet and airborne precautions, and current supply is maintained, it is recommended that full face visors should be the first-choice stock item for both ensembles throughout Grampian. **This does not alter the current substantive advice to protect from transmission of infectious organisms via the respiratory tract. Fluid repellent surgical masks (FRSMs) for droplet precautions or FFP3 masks for airborne precautions as per the National Infection Prevention & Control Manual should remain in use**

**PPE Donning & doffing training – new dates** Training on the correct way to don and doff PPE is being provided via MS Teams – dates below. To book, just email [gram-uhb.ipc-donn-doff-training@nhs.net](mailto:gram-uhb.ipc-donn-doff-training@nhs.net).

Date	Time
Wednesday 16 September	11-11.45am
Tuesday 22 September	11-11.45am
Thursday 24 September	11-11.45am
Tuesday 29 September	11-11.45am

**Thought for the day – don't stand so close to me** Physical distancing is not easy. As human beings, we are naturally social creatures. When first introduced to someone, our instinct is to offer a hand in greeting. Now, more than ever before, we need to define (and defend) our personal space. This might come very easily to some of us, but others may find it challenging or worry they are being rude. Rest assured, it is not rude to take a step back from someone, or to ask them to respect your boundaries. It isn't rude to ask someone to leave a delivery at your door. It isn't rude to decline an invitation into someone's home. It isn't rude to smile warmly, rather than shake hands. You aren't accusing that person of having the virus, you're minimising the opportunities for the virus to spread. If we have learnt one thing over the past 6 months, it is that COVID-19 will take any invitation for transmission it is offered. Let's limit those invitations as much as we can.

**Comments? Suggestions?** If you have feedback about this brief or questions about the content please do not hesitate to get in touch via [gram-uhb.staffquestions@nhs.net](mailto:gram-uhb.staffquestions@nhs.net)