

Here is the brief for Monday 1 March 2021.

**Chief Executive's update** Interim Executive Nurse Director June Brown takes the reins for this week's update. June has special responsibility for Objective One of Operation Snowdrop – reducing the risk of infection posed by COVID-19 and keeping us safe in the workplace, and this week's video focuses on the Safer Workplaces project. To watch the video, click [here](#). Remember, you can get in touch with Caroline Hiscox at any time via [gram.grampianchiefexecutive@nhs.scot](mailto:gram.grampianchiefexecutive@nhs.scot)

**Brazil variant detected in Grampian** As you will have seen across local and national media, it was confirmed yesterday that three cases of a COVID-19 Variant of Concern have been detected in Grampian. The majority of people living and working in the region should be reassured that they will not be directly affected by these cases. However, it must be remembered that COVID-19, no matter which variant it is, spreads in the same way. Everyone must continue to observe the current restrictions and follow the FACTS guidance to reduce their risk of being infected with any strain of COVID-19. Here is some further information about the variant and the measures taken to date:

## 1. Why is this described as a Variant of Concern?

This variant has been designated 'of concern' as it shares some important mutations with the variant first identified in South Africa (B.1.351), such as E484K and N501Y. There is some data to suggest that this variant may be more likely to cause Covid-19 infections in people who have been vaccinated or who had been infected with one of the earlier strains of "wild-type" Covid-19.

The P1 "Brazilian" variant is a descendent of B.1.1.28 and was first detected in Japan but is most closely associated with the second wave epidemic in Manaus, Brazil. This variant has been designated 'of concern' as it shares some important mutations with the variant first identified in South Africa (B.1.351), such as E484K and N501Y. It is possible that this variant may respond less well to current vaccines but at this time there is a high degree of uncertainty and we await clinical and trial data is awaited to understand this better.

## 2. When did you identify these cases?

The cases were confirmed as the variant VOC 202101/02 (P.1, Manaus) on 27 February 2021

## 3. Were they found as part of routine testing?

Yes.

## 4. Are the cases linked?

The three cases returned from Brazil at the same time and isolated together on their return to the Grampian region, in managed accommodation arranged by their employer.

## 5. What are the measures you're taking?

Health protection specialists have assessed the cases and, as part of the Test & Protect strategy, their close contacts have been followed up and are being offered COVID-19 testing as usual. As an additional safety measure, the Health Protection team are also working to identify those with whom the close contacts may have been in contact. These people are best described as the contacts of contacts. All will be offered a COVID-19 test. This is not standard procedure but is being undertaken in this exceptional circumstance to be absolutely sure all possible precautions are being taken.

## 6. Could there be more cases?

This is something that we are closely investigating. Currently there is no evidence that we have community transmission of this variant in Scotland but we continue to monitor all variants here and will take any public health actions necessary.

## 7. Is there any connection to the cases of this variant detected in England?

No. Public Health England has identified three cases of the variant in England, but these are **not** linked to these three Scottish cases. Scotland and England are working together to ensure that a consistent UK approach is taken to managing such incidents.

**Grampian data** The local figures for today (and over the weekend) and the 7 day rolling positivity rate are shown below. 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, whereas the figures we show here only record new tests.

	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 27/02	302	19	24	20	3	0
Sun 28/02	367	22	60	20	3	0
Mon 01/03	358	13	51	22	3	0

  

342 avg daily tested last 3 days	Down 9 from 28/02/21	Down 9 from 28/02/21	Up 2 from 28/02/21	No change from 28/02/21	Last recorded death 24/02
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Tests reported from Illuminate up to 3pm on 27/02/21 <i>NB tests refreshed daily due to lag in reporting</i>	Reported by Scottish Govt up to 8am today	Reported from CMS up to 15:30 today	Confirmed patients from Trakcare according to new definitions from 15/9	Confirmed from Trakcare as per SG definitions - excludes patients who were +ve >28 days. ECMO patients included if flagged for COVID-19	Confirmed from Trakcare
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7 day rolling positivity rate on 28/2 1.39%
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**Acute staff support at Maggie's centre** This is no longer a drop-in service, however 1:1 sessions with a psychologist are available for acute staff via booking on [gram.support.acute@nhs.scot](mailto:gram.support.acute@nhs.scot) where a time can be arranged for a session on Teams or face-to-face at Maggie's centre, Foresterhill Health Campus.

**Health Protection call room marks 1<sup>st</sup> anniversary** To help with the Health Protection COVID-19 response the call room was established on 26 February 2020. Staff were pulled from across Public Health, mostly Health Promotion and Healthpoints, to take all calls into the team. In the past year, the call room team have risen to every challenge laid before them, adapted to every change in guidance and policy, and adapted to new ways of working and IT systems. The skill and confidence amongst the call room staff has developed to the point that very few calls are left to be answered by the wider team.

At the height of the response in excess of 300 calls were handled per day by the team. A fantastic team work ethic, mixed with hilarious sense of humour and the odd cake, has helped the team deliver the excellent, professional, solution focused service they have. It is only because of the work of the call room team that the wider Health Protection team are able to deliver the pandemic response across Grampian. The part that they have played in the response may appear small but should not be underestimated. Although we celebrate this milestone, we are all agreed that none of us want to still be here celebrating the next! (Helen Corrigan, Health Protection Nurse Specialist)

**PPE donning & doffing training – date change** For one week only, there will be **no** PPE donning and doffing training session tomorrow; instead, it will take place on Wednesday 3 March at 11am. The following week it will return to the usual Tuesday at 11am. The sessions are open to all health & social care staff and delivered via MS Teams, email [gram.ipc-donn-doff-training@nhs.scot](mailto:gram.ipc-donn-doff-training@nhs.scot) to book a place.

**Tribute to Professor John Mallard** Shortly after we issued the brief on Friday, we learned that Professor John Mallard had died at the age of 94. Prof Mallard was, of course, the ‘father’ of MRI scanning. Under his leadership, the University of Aberdeen team built the first whole-body MRI scanner which Aberdeen clinicians were then able to use to carry out the world's first body scan of a patient from Fraserburgh. The scanner they built is now housed in the Suttie Arts Space in ARI. MRI scanning is now used around the world for diagnosis and treatment of a wide range of conditions. Prof Mallard also pioneered PET imaging and brought Scotland's first PET scanner to Aberdeen in the 1980s. Our thoughts are with the Mallard family and all those who knew and worked with the Professor.

**Thought for the day** It is 12 months to the day since the first case of COVID-19 was identified in Scotland. In the coming days and weeks, we will see more anniversaries – the first case in Grampian, the start of lockdown – and this will undoubtedly be a period of much reflection for all of us. The greatest irony of all over this last year is we do not know what we have done. We know the failures, we know the deaths, we know the missteps. We know the cost – the families denied a proper goodbye, the distance we have from our own loved ones, the time our young people have lost in education. What we do not know – will probably never be able to know – are our successes. This is because the ultimate measurement of success is those who did not get sick and how can we ever know that number? Perhaps it is better to measure our success in terms of our worst fears going unrealised. If you think back to March 2020 and some of the very difficult conversations and plans we were all having to make, how much of that did not come to pass?

**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.