**Supplementary material 2:** VERN Executive Committee member average scores (n=12) for COVER Tier 1 question responses when asked about the perceived significance of each response in terms of service reduction/change. For each response, ‘0’ represents the least perceived change and ‘3’ represented the most perceived change. \*indicates responses for which a pre-specified score was mandated.

AAA = abdominal aortic aneurysm, CCU = coronary care unit, CLTI = chronic limb threatening ischemia, HDU = high dependency unit, ITU = intensive care unit, MDT = multidisciplinary team, ST.DEV = standard deviation, TEVAR = thoracic endovascular aortic repair, TIA = transient ischemic attack.

|  |  |  |  |
| --- | --- | --- | --- |
| QUESTION & HEADLINE RESPONSE | SPECIFIC RESPONSE | MEAN | ST.DEV |
| **Have you modified the working pattern for consultants/attending/faculty within your unit?** |  |  |  |
| YES | Consultants asked to support other specialties | 2.58 | 0.51 |
|  | Reduced elective activity | 1.75 | 0.84 |
|  | Urgent intervention only | 2.25 | 0.62 |
|  | Doubled up on call / shadow on call | 1.54 | 0.71 |
|  | Reduced number of consultants in hospital | 1.38 | 0.71 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Have you or members of your junior team been asked to cross cover other surgical specialties** |  |  |  |
| YES | Yes, to medical specialties | 2.42 | 0.80 |
|  | Yes, to the emergency department | 2.25 | 0.75 |
|  | Yes, to ITU / HDU | 2.17 | 0.72 |
|  | Yes, to surgical specialties | 1.17 | 0.39 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Have you modified the outpatient clinics within your unit?** |  |  |  |
| YES | Video/Telephone consultation for all | 1.83 | 0.58 |
|  | All cancelled | 3.00 | 0.00 |
|  | Video/Telephone consultation for triaged patients only | 2.21 | 0.58 |
|  | Triage of referrals and then review those eligible in person | 1.33 | 0.49 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Are you running an emergency or ‘hot’ clinic for urgent referrals?** |  |  |  |
| YES | Yes, 1 - 2 days per week | 1.36 | 0.79 |
|  | Yes, 3 - 4 days per week | 1.64 | 0.67 |
|  | ≥5 per week | 2.00 | 1.26 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Are you participating in a face-to-face MDT?** |  |  |  |
| YES\* |  | 0.00 | 0.00 |
| NO\* |  | 1.00 | 0.00 |
| ***If you are not running a face-to-face MDT how have you replaced this?*** |  |  |  |
|  | Not being replaced\* | 3.00 | 0.00 |
|  | Video conference / teleconference | 1.55 | 0.52 |
|  | Limited Core team attending, others dialling in as required | 1.55 | 0.69 |
|  |  |  |  |
| **Is your primary cross-sectional imaging service available as normal?** |  |  |  |
| YES\* |  | 0.00 | 0.00 |
| NO |  | 2.58 | 0.65 |
|  |  |  |  |
| **If you have a AAA screening programme, is this still running as normal?** |  |  |  |
| YES\* |  | 0.00 | 0.00 |
| NO | No, Stopped | 2.67 | 0.49 |
|  | No, Reduced | 1.58 | 0.51 |
| (Do not have a screening programme\*) |  | 0.00 | 0.00 |
|  |  |  |  |
| **Do you still have a service running to image patients after an EVAR?** |  |  |  |
| YES\* |  | 0.00 | 0.00 |
| NO | No, Stopped | 2.42 | 0.51 |
|  | No, reduced | 1.33 | 0.49 |
|  |  |  |  |
| **Is there a full endovascular aortic service available?** |  |  |  |
| YES | Running as normal in hours | 1.18 | 0.82 |
|  | Running as normal 24hours/day\* | 0.00 | 0.00 |
|  | Yes but Ad hoc | 1.63 | 0.54 |
|  | Reduced due to COVID related sickness/absence of staff | 2.33 | 0.66 |
| NO | No (only for urgent cases) | 2.54 | 0.47 |
|  |  |  |  |
| **Are you relying on an increased endovascular strategy service first for CLTI?** |  |  |  |
| YES\* |  | 1.00 | 0.00 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Do you have vascular specific inpatient beds?** |  |  |  |
| YES\* |  | 0.00 | 0.00 |
| NO\* |  | 1.00 | 0.00 |
| ***% fall in inpatient vascular beds (compared to normal)*** |  |  |  |
|  | 0 - 25% | 0.96 | 0.85 |
|  | 26 - 50% | 1.83 | 0.61 |
|  | 51 - 75% | 2.46 | 0.50 |
|  | 76 - 100% | 2.75 | 0.62 |
|  |  |  |  |
| **Have you changed your operative practice for elective AAA surgery?** |  |  |  |
| YES | Symptomatic/ruptured only | 2.92 | 0.29 |
|  | Yes, >6.5cm Asymptomatic | 2.04 | 0.62 |
|  | >7cm Asymptomatic | 2.59 | 0.66 |
|  | EVAR only (i.e. only EVAR if anatomically suitable) | 2.42 | 0.64 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **In general, have you changed your CLTI revascularisation strategy?** |  |  |  |
| YES | Tissue loss only | 2.50 | 0.80 |
|  | Rest pain or worse | 1.92 | 0.74 |
|  | Increased endovascular strategy | 1.79 | 0.75 |
|  | More conservative decision making | 2.08 | 0.79 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **In general, have you altered how you manage symptomatic carotid disease?** |  |  |  |
| YES | Crescendo TIA only | 2.58 | 0.51 |
|  | Case-by-case | 1.71 | 0.81 |
| NO (still following national/international guidelines) \* |  | 0.00 | 0.00 |
|  |  |  |  |
| **In general, have you modified your acute aortic syndrome pathway (type B aortic dissection etc.)?** |  |  |  |
| YES | Conservative management, unless ruptured | 2.00 | 0.67 |
|  | Conservative management in a non-ITU/CCU bed | 2.42 | 0.64 |
|  | Early TEVAR and discharge | 1.96 | 0.92 |
| NO\* |  | 0.00 | 0.00 |
|  |  |  |  |
| **Do you have access to a dedicated vascular surgery list daily?** |  |  |  |
| YES | Elective vascular lists\* | 0.00 | 0.00 |
|  | Reduced but still some during the week | 1.50 | 0.50 |
|  | Urgent theatre cases only | 2.75 | 0.45 |
| NO vascular specific slots/lists |  | 2.42 | 0.50 |
| ***If YES - is this running at normal capacity? Any changes to staffing (e.g. theatre team, anaesthetic cover)?*** |  |  |  |
| Running at normal capacity/no changes\* |  | 0.00 | 0.00 |
| Any change specified in free text response\* |  | 1.00 | 0.00 |
|  |  |  |  |
| **If you had access to a hybrid theatre before the pandemic, do you still have normal access to it now?** |  |  |  |
| YES | Normal access\* | 0.00 | 0.00 |
|  | Reduced access | 1.83 | 0.58 |
| NO | No access at all | 2.83 | 0.39 |