

Standard operating procedure

Procedure: 2022-2023 Influenza (including avian flu) standard operating procedure.

Number: 0.4

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Date: 24 August 2022

Review date: 23 August 2023

Procedure overview

This operating procedure describes the NHS Cornwall and Isles of Scilly ICS process for the assessment of outbreaks of respiratory symptoms including confirmed or suspected Influenza in a care home and residential schools for disabled children and young people. It also covers the process for dealing with suspected cases of avian influenza.

This responsibility was given to CCGs in 2017 the two letters in appendix item 1.

This Influenza SOP document is the updated process for winter 2022-2023.

Other (reference documentation)

[UKHSA Antiviral Guidance](#)

Requirements

- The UK Health Security Agency (UKHSA) recommends a model of a single clinician assessing an affected setting.
- Some areas have a system whereby one GP practice covers each entire care home.
- The below procedures are separated by flu season and in or out of hours. UKHSA antiviral guidance can be found in appendix item 2. Pharmacists expected to keep a supply of antivirals are listed in appendix item 3.

Procedure

CCG on call action card

This action card includes details of what actions need to be followed following a receipt of a potential outbreak notification from UKHSA.

ACTION CARD (Out of hours specific)	On receipt of a potential influenza notification from UK Health Security Agency (UKHSA)
1	<p>Ask if the current national flu status is 'in season' or 'out of season' and refer to Influenza standard operating procedure (SOP). This document can be found in the 'library' in the electronic on-call folder. Apply either process for either 'in hours, out of season', 'in hours, in season', or 'out of hours'.</p> <p>For avian flu, this coincides with the in-season processes. Note there is no out of hours provision for mobile swabbing; this service operates 9am-5pm 7 days a week.</p> <p>Below is a brief outline of the SOP for out of hours.</p>
2	UKHSA should contact the out of hours service (111).
3	<p>The out of hours service will send a clinician to visit and assess people.</p> <p>For avian flu, please see process involving swabbing of symptomatic patient by Wheal Prosper staff.</p> <p>Reminder for health professionals on recognising possible human cases of Avian Influenza and accessing testing - GOV.UK (www.gov.uk)</p>
4	If appropriate, prescriptions will be made on either an FP10 or Patient Specific Direction (PSD), dependant on national flu status.
5	Community pharmacy should be the first choice for the supply of medication (wholesaler emergency ordering is paid for by NHS Cornwall and Isles of Scilly ICB – submit claims to CIOICB.prescribing@nhs.net).
6	The out of hours service will have a list of pharmacies that will be open.
7	Exceptionally, the on-call director may direct a pharmacy to place a chargeable emergency order with a pharmaceutical wholesaler or to deliver medicines (to another pharmacy or patient/care home). Reasonable approved out of pocket expenses thus incurred by the pharmacy may be reclaimed.
8	<i>ICB-commissioned service will provide a clinician to assess exposed persons for antiviral treatment or prophylaxis. The clinician will complete a patient specific direction (PSD) for those individuals who require antivirals, and the PSD will be sent to the relevant pharmacy (a copy should be retained by the care home). The ICB-commissioned clinician provides contact information to the institution if there any queries to be addressed</i>

<p><i>regarding the clinical assessments they have made. This clinician should also have a process for ensuring that patients' GPs are aware of any antivirals which have been authorised in this way."</i></p>

The charge for this will be processed by the ICB medicines optimisation team after the event has occurred – CLOSICB.prescribing@nhs.net.

Process: in hours, out of season

Notification

Following a report of acute respiratory illness from a localised community setting (e.g., a care home, residential schools for disabled children and young people) UK Health Security Agency (UKHSA) Health Protection Team will confirm an outbreak and firstly attempt 'In Hours' to contact the GP Practice of the closest association to the community setting.

UKHSA will provide:

- care home details and contact
- the number of residents
- the number of affected individuals
- any known lab results
- any other additional information.

Assessment

For governance purposes, a summary (by risk group and patient/carer status) of the number of individuals who have been assessed and the number supplied with antiviral treatment or prophylaxis should be provided to the UKHSA Centre HPT.

Prescribing

Patient specific direction (PSD) is needed as FP10 cannot be used outside of flu season. PSD template can be found in appendix item 4.

UKHSA guidance on use of antivirals can be found in appendix item 2.

Supply of antivirals

Community Pharmacy is the preferred option.

NHS Cornwall and Isles of Scilly ICB can authorise and will pay for a community pharmacy to dispense against a PSD.

"if the community pharmacy has insufficient stock and cannot obtain a supply via their usual mechanism within 48 hours, an emergency order may be placed provided that this will arrive within the 48 hour window"

As a last resort, a hospital pharmacy can dispense against a PSD making use of the UKHSA stock they hold. The charge for this will be processed by the NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team after the event has occurred – CIOICB.prescribing@nhs.net .

Under exceptional circumstances, out of pocket expenses, such as wholesaler emergency order fees, or delivery cost where a pharmacy is directed to make a delivery, may be claimed by the pharmacy. Claims are made via the ICB medicines optimisations team.

Using PSD with hospital pharmacy - last resort

- RCHT Hospital.
Telephone contact should be made with the on-call pharmacist by contacting the Switchboard on 01872 250000.
Email the PSD to rch-tr.GeneralPharmacy@nhs.net followed by the original in the post to Hospital Pharmacy, RCHT, Treliske, Truro, TR1 3LJ.
- University Hospital Plymouth (Derriford).
Telephone contact 01752 202082 for the East Locality (on call pharmacist).
Provide the PSD to plh-tr.PharmDispatchOffice@nhs.net followed by the original in the post to Pharmacy Department, Derriford Hospital, Plymouth, PL6 8DH.

PSD will be sent (initially by email to ensure prompt supply, followed by the original in post) to the relevant Hospital Pharmacy and a copy of the PSD should be retained in the care home.

The clinician will provide contact information to the institution should there be any queries to be addressed regarding the clinical assessments they have made. This clinician should also have a process for ensuring that patients' GPs are aware of any antivirals which have been authorised in this way.

Swabbing

Most outbreaks will not require swabbing where there has already been a confirmed index case, however if the infection responsible for symptoms is not known UKHSA may request swabbing.

The HPT now has a system in place whereby the care home uses Pillar 2 covid swabs, the HPT advises on specific packaging and transport for the samples to go to the Bristol public health lab for full respiratory virus panel testing (as opposed to the Pillar 2 covid labs). Where point of care tests are used to confirm or exclude Influenza, swabs will still need to be sent to the laboratory regardless of point of care result.

All homes can now use their own staff.

Test five most recently symptomatic.

Additional information

The UKHSA Centre HPT follows its existing procedures for reporting, follow-up, and closure of the localised outbreak.

If any exposed person develops symptoms while on antiviral prophylaxis, this should be reported to the same out of hours clinician or the patient's GP by the contact person at the affected institution. If the clinician then suspects influenza, they should recommend the exposed person is switched to a course of treatment dose antivirals.

If further antivirals are needed for this purpose for the exposed person, then this will require a further FP10 ('In Hours/In Season') or PSD ('Out of Hours/Out of Season'). This should also be reported by the clinician to the UKHSA Centre HPT.

Avian Influenza on site (mobile) testing

Action card		Avian FLU OUTBREAK In hours (for onsite swabbing)
1	<p>This agreement describes the procedures and processes that will be followed within NHS Cornwall and Isles of Scilly ICS to manage any incident that requires the implementation of special arrangements by the system to manage an outbreak of Avian Flu.</p> <p>This plan should be used with:</p> <ul style="list-style-type: none">• NHS Cornwall and Isles of Scilly ICB Incident Response Plan• Animal Health Plan (DCIoS LRF) 14/03/2019 and• Contingency plan exotic notifiable diseases of animals in England (DEFRA) 05/11/2019 <p>https://collaborate.resilience.gov.uk/RDService/home/8680/Animal-disease-plans</p> <p>Managing the human health implications of avian influenza - guidance for health protection teams (publishing.service.gov.uk)</p> <p>Reminder for health professionals on recognising possible human cases of Avian Influenza and accessing testing - GOV.UK (www.gov.uk)</p> <p>NOTE: Once a protection zone has been declared in an area DEFRA will not test further and any dead birds MUST be assumed to contain the avian flu strain that brought in the protection zone. There will be no further notifications of potential cases either.</p> <p>Notifications of possible outbreaks may be received from the Council of the Isles of Scilly and Cornwall Council; APHA, DEFRA, UKHSA.</p>	
	In Hours Only – On site swabbing (7 days a week 9am – 5pm)	
2	Cornwall	

	<p>Notification received via telephone from UKHSA or Public Health to the dispatch lead at Kernow Health CIC – 07731 998755 (or 01872 224042 if mobile not answered) of outbreak of avian flu and requirement to swab symptomatic staff at site.</p> <p>NHS Cornwall and Isles of Scilly ICB Director on Call receives a call from Kernow Health CIC, via Bodmin switchboard (01208 251300), with a request to activate Cornwall Ambulance Service (CAS) to site to undertake mass swabbing at scene.</p> <p>They will provide details given by UKHSA (including HPZ number).</p> <p>The Director on Call agrees the activation of CAS mobile testing unit to collect swabs from notified individuals. (Please ensure that CAS is given the HPZ number as needs to go on the microbiology form).</p> <p>CAS/Kernow Health CIC to liaise with point of contact for affected people to arrange an appointment time for staff requiring swabbing.</p> <p>Staff to be deployed to the site with all equipment to obtain swabs. The swabber to be in full PPE inc. fit tested FFP3 masks and eye protection.</p> <p>2X 5 sets of swabs suitable for avian flu, including packaging will be held (1 set each) on the Isles of Scilly and at Kernow Health CIC, complete with a sheet of instructions on use.</p> <p>The swabbing process is the same as for COVID-19 – i.e., nose and throat swab, but there may also be a requirement for conjunctival swabbing. The swabs can be returned via a priority post box or via a courier (arranged by the HPT).</p> <p>Working with the UKHSA, CAS will ensure that all swabs carry the relevant HPZ reference and have the bio secure avian influenza packaging. Microbiology will advise on kits and where they can be sourced from. Further kits can be accessed via the HPT at the time of an incident (via courier).</p> <p>The clinician taking the swab will need to contact UKHSA in or out-of-hours on 0300 303 8162.</p>
3	<p>Isles of Scilly</p> <p>The GP practice on the islands issue prescriptions for either pre or post exposure antivirals. The local pharmacy holds a small stock and can order more via the wholesale supplier. (They are not currently commissioned nor expected to hold stock of antivirals).</p> <p>If mobile swabbing is required this service the following process should be followed:</p> <p>Notification received via telephone from UKHSA, Public Health or the Council of Isles of Scilly to the dispatch lead at Kernow Health CIC – 07731 998755 (or 01872 224042 if mobile not answered) of outbreak of avian flu and requirement to swab symptomatic staff at site.</p>

Kernow Health CIC to ascertain whether the GP practice on the islands has been contacted and is able to prescribe (where the issue of pre-emptive antivirals are deemed appropriate). Kernow Health CIC to call the NHS Cornwall and Isles of Scilly ICB Director on Call for authorisation to activation CAS.

NHS Cornwall and Isles of Scilly ICB Director on Call receives a call from Kernow Health CIC, via Bodmin switchboard (01208 251300), with a request to activate Cornwall Ambulance Service (CAS) to site to undertake mass swabbing at scene. CAS have agreed, in principle, that they will deploy to the islands if needed.

The initiating requestor will provide the details given by UKHSA (including HPZ number).

The Director on Call agrees the activation of CAS mobile testing unit to collect swabs from notified individuals. (Please ensure that CAS is given the HPZ number as needs to go on the microbiology form).

CAS/Kernow Health CIC to liaise with point of contact for affected people to arrange an appointment time for staff requiring swabbing.

Staff to be deployed to the site with all equipment to obtain swabs. The swabber to be in full PPE inc. fit tested FFP3 masks and eye protection.

Swabbing protocol

- Ideally TWO nose and throat swabs (just for clarity that means one swab used for nose and throat, then another swab used for taking another nose and throat sample). But if you can only get one nose and throat sample, that's ok.
- Transport Packaging for UN 3373 Substances.
- Any packaging for biological substances must include three components:
A primary receptacle: the tube, vial or other container typically made of glass or rigid plastic (including the stopper, cap, or other closure elements) that is in direct contact with the specimen.
A secondary packaging (including cushioning and other materials) that fully encapsulates the primary receptacle.
An outer packaging for shipping or transit.
- Components must meet specific requirements, including being capable of passing specific test procedures based on receptacle or packaging type. In addition, compliance with the regulations is based, in part, on overall performance; so, there can be no substitutions of a component from one manufacturer with a similar – but untested – component from another manufacturer.
- The postal swab kits that are used by HPT and PHL are compliant – 5 swabbing kits are pre-located at Kernow Health CIC and on the Isles of Scilly, in case of need. (Category B packaging).
- The PHL has agreed that if courier transport is required from Cornwall or Isles of Scilly to the lab, they would be willing to pay the costs.

Working with the UKHSA, CAS will ensure that all swabs carry the relevant HPZ reference and have the bio secure avian influenza packaging.

Further kits can be accessed via the HPT at the time of an incident (via courier).

	The clinician taking the swab will need to contact UKHSA in or out-of-hours on 0300 303 8162.
4	<p>The cost of activation has been agreed through Medicines Optimisation and the Director on Call should sanction the deployment, if requested.</p> <p>Activation will be between 9am and 5pm 7 days a week, although calls seeking permission to activate may be received out of hours. Kernow Health CIC will complete and send the referral form and CAS will action the following morning.</p> <p>The current price on a page (for Cornwall) is to supply a qualified swab technician, all insurances, all PPE, and all clinical equipment required. This quote will also include mainland travel to and from the airport. For deployment to the Isles of Scilly there will be additional costs, as detailed below:</p> <p>Parking fees, return transport fees to the island, travel around the island, accommodation/subsistence (if required), and carriage costs/insurance of samples back to the mainland. In addition, in the event of bad weather, we will continue to claim the same day rate until the staff member can return to the mainland. These will all be included on the invoice from CAS sent to the ICB.</p>
5	Prescriptions will be made on either an FP10 or Patient Specific Directive (PSD).
6	<p>Community pharmacy should be the first choice for supply of medication.</p> <p><i>"A list of pharmacies routinely carrying limited stock can be found here: NHSE Specialist Medicines Service list Other pharmacies may have stock available and should be able to obtain supplies from their wholesaler on a next working day basis if required."</i></p> <p><i>Wholesaler emergency ordering is paid for by NHS Cornwall and Isles of Scilly ICB – submit claims to CIOSICB.prescribing@nhs.net</i></p> <p>The acute hospital holds a small stock of medication for dispatch in extremis, should stock not be available from the above in a timely manner.</p>
7	<p>Pharmacies can make an emergency wholesale order for a fee, which the On Call Director may be asked to approve. Details of this should be sent to CIOSICB.prescribing@nhs.net</p>
8	<p>Out of Season a PSD must be used to obtain a supply from a community pharmacy..."</p> <p>The charge for this will be processed by NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team after the event CIOSICB.prescribing@nhs.net as will any activation fee for the stand up of CAS which should be sent to CIOSICB.EPRR@nhs.net</p> <p>The Director on call to ensure that they notify medicines optimisation and EPRR of the detail of the activation, by email ASAP after activation request granted. Please copy ciosicb.headofipc@nhs.net and louise.dickinson2@nhs.net into the email.</p> <p>The completed PSD should be sent to the organisation that will dispense it (such as a community pharmacy or a hospital pharmacy). Where circumstances mean that it will not arrive promptly an electronic copy can be used to give advance notice of the supplies required, but the signed original must also be sent.</p>

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Process: in hours, in season

Notification

Following a report of acute respiratory illness from a localised community setting (e.g., a care home, residential schools for disabled children and young people) UK Health Security Agency (UKHSA) Health Protection Team will confirm an outbreak and firstly attempt 'In Hours' to contact the GP Practice of the closest association to the community setting.

UKHSA will provide:

- care home details and contact.
- the number of residents.
- the number of affected individuals.
- any known lab results.
- any other additional information.

Assessment

UKHSA will contact a GP able to provide treatment and prophylaxis to all patients and staff.

UKHSA contact number: 0300 303 8162.

1. Best case scenario

UKHSA will give the care home details (contact, number of residents, number of confirmed/suspected cases and any other additional information) to the GP practice.

The GP will then confirm if a GP is able to visit the home, assess every patient and provide treatment or prophylaxis antivirals on FP10 via local pharmacy (or nearest specialist medicines pharmacy).

The pharmacy will then dispense and deliver antivirals.

2. Alternative scenario

On confirmation on outbreak, UKSHA contacts the nearest GP practice, however, the GP practice is unable to contact or mobilise a GP. UKHSA will then contact the next nearest GP practice.

UKHSA will then contact NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team. The Medicines Optimisation Team will contact practices to confirm if a GP will be available and if not, will contact the Prescribing and Locality Leads in the area to find a GP able to assess the patients. A GP is then found, and the process continues as above in 1.

NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team: 01726 627953 or CIOStCB.prescribing@nhs.net

3. Worst case scenario:

UKHSA contact the GP practices and then NHS Cornwall and Isles of Scilly ICB (as above process '2'). If there is no GP available in the locality and it is still 'In Hours' – the communication for a GP then extends to surrounding areas. On a Friday afternoon with spilling into 'Out of Hours', every effort should be made to get a GP to visit in the evening or next day.

UKHSA will contact the NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team and provide information of the location of the outbreak, the approximate number of individuals that need to be assessed for antivirals within the outbreak and the details of the relevant contact person within the affected setting.

Swabbing

Most outbreaks will not require swabbing where there has already been a confirmed index case, however if the infection responsible for symptoms is not known UKHSA may request swabbing.

The HPT now has a system in place whereby the care home uses Pillar 2 covid swabs, the HPT advises on specific packaging and transport for the samples to go to the Bristol public health lab for full respiratory virus panel testing (as opposed to the Pillar 2 covid labs). Where point of care tests are used to confirm or exclude Influenza, swabs will still need to be sent to the laboratory regardless of point of care result.

All homes can now use their own staff.

Test five most recently symptomatic.

Avian Influenza on site mobile testing

This is the same as the action card detailed for in hours, out of season.

Prescribing

In season GPs can prescribe on FP10.

UKHSA guidance on use of antivirals can be found in appendix item 2.

Supply of antivirals

Community Pharmacy is the preferred option. *“if the community pharmacy has insufficient stock and cannot obtain a supply via their usual mechanism within 48 hours, and emergency order may be placed provided that this will arrive within the 48 hour window”*

As a last resort an acute hospital pharmacy (RCHT/UHP) can dispense making use of the UKHSA stock they hold. The charge for this will be processed by the NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team after the event has occurred.

Under exceptional circumstances, out of pocket expenses, such as wholesaler emergency order fees, or delivery cost where a pharmacy is directed to make a delivery, may be claimed by the pharmacy. Claims are made via the ICB medicines optimisation team.

Additional information

The UKHSA Centre HPT follows its existing procedures for reporting, follow-up, and closure of the localised outbreak.

If any exposed person develops symptoms while on antiviral prophylaxis, this should be reported to the same Out of Hours clinician or the patient's GP by the contact person at the affected institution. If the clinician then suspects influenza, they should recommend the exposed person is switched to a course of treatment dose antivirals.

If further antivirals are needed for this purpose for the exposed person, then this will require a further FP10 ('In Hours/In Season') or PSD ('Out of Hours/Out of Season'). This should also be reported by the clinician to the UKHSA Centre HPT.

Process: out of hours

Notification

Following a report of acute respiratory illness from a localised community setting (e.g., a care home, residential schools for disabled children and young people).

UK Health Security Agency (UKHSA) Health Protection Team will confirm an outbreak and will, out of hours, contact Cornwall 111 and provide:

- care home details and contact.
- the number of residents.
- the number of affected individuals.
- any known lab results.
- any other additional information.

Assessment

Cornwall 111 Out of Hours (shift manager - 01872 224042) will then either send a Clinician if available OR find a GP able to visit and assess patients.

For governance purposes, a summary (by risk group and patient/carer status) of the number of individuals who have been assessed and the number supplied with antiviral treatment or prophylaxis should be provided to the UKHSA Centre HPT.

UKHSA Out of Hours contact number: 0300 303 8162 and this will connect you to the out of hours provider.

Swabbing

Most outbreaks will not require swabbing where there has already been a confirmed index case, however if the infection responsible for symptoms is not known UKHSA may request swabbing.

The HPT now has a system in place whereby the care home uses Pillar 2 covid swabs, the HPT advises on specific packaging and transport for the samples to go to the Bristol public health lab for full respiratory virus panel testing (as opposed to the Pillar 2 covid labs). Where point of care tests are used to confirm or exclude Influenza, swabs will still need to be sent to the laboratory regardless of point of care result.

All homes can now use their own staff.

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Avian Influenza, out of hours

If there is a symptomatic patient not requiring clinical assessment but needing an urgent swab out of hours this can be done by Wheal Prosper Ward, RCHT, via the Emergency Entrance or ideally through the window of a car at this location. If the patient is in the north or east of the county this will be UHP Derriford facing, and you will need to contact them to ascertain their requirements for site attendance.

In terms of arranging the swab, the preference is for UKHSA to contact the Wheal Prosper Ward Nurse in Charge with the patient details, and they can then ring the patient back to arrange the logistics and timing of the swab being taken. This validates that the request is genuine and has been through the appropriate UKHSA triage process.

Wheal Prosper have instructions for accessing their emergency entrance with photos that they can email to the patient attending if required.

The swab would then be sent to the relevant UKHSA lab, via the local lab, or directly by courier.

Prescribing

In season GPs can prescribe on FP10.

FP10 cannot be used outside of flu season.

Out of season Patient specific direction (PSD) is needed (appendix item 4).

UKHSA guidance on use of antivirals can be found in appendix item 2.

Supply of antivirals

Community Pharmacy is the preferred option.

NHS Cornwall and Isles of Scilly ICB can authorise and will pay for a community pharmacy to dispense against a PSD.

“if the community pharmacy has insufficient stock and cannot obtain a supply via their usual mechanism within 48 hours, and emergency order may be placed provided that this will arrive within the 48 hour window”

As a last resort a hospital pharmacy can dispense against a PSD making use of the UKHSA stock they hold. The charge for this will be processed by the NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team after the event has occurred.

Under exceptional circumstances, out of pocket expenses, such as wholesaler emergency order fees, or delivery cost where a pharmacy is directed to make a delivery, may be claimed by the pharmacy. Claims are made via the ICB medicines optimisation team.

Using PSD with hospital pharmacy - last resort

- RCHT Hospital.
Telephone contact should be made with the on-call pharmacist by contacting the Switchboard on 01872 250000.
Email the PSD to rch-tr.GeneralPharmacy@nhs.net followed by the original in the post to Hospital Pharmacy, RCHT, Treliske, Truro, TR1 3LJ.
- University Hospital Plymouth (Derriford).
Telephone contact 01752 202082 for the East Locality (on call pharmacist).
Provide the PSD to plh-tr.PharmDispatchOffice@nhs.net AND plh-tr.pharmacydispensary@nhs.net followed by the original in the post to Pharmacy Department, Derriford Hospital, Plymouth, PL6 8DH.

PSD will be sent (initially by email to ensure prompt supply, followed by the original in post) to the relevant Hospital Pharmacy and a copy of the PSD should be retained in the care home.

The clinician will provide contact information to the institution should there be any queries to be addressed regarding the clinical assessments they have made. This clinician should also have a process for ensuring that patients' GPs are aware of any antivirals which have been authorised in this way.

Additional information

The UKHSA Centre HPT follows its existing procedures for reporting, follow-up, and closure of the localised outbreak.

If any exposed person develops symptoms while on antiviral prophylaxis, this should be reported to the same Out of Hours clinician or the patient's GP by the contact person at the affected institution. If the clinician then suspects influenza, they should recommend the exposed person is switched to a course of treatment dose antivirals.

If further antivirals are needed for this purpose for the exposed person, then this will require a further FP10 ('In Hours/In Season') or PSD ('Out of Hours/Out of Season'). This should also be reported by the clinician to the UKHSA Centre HPT.

Appendix

- Item 1 – NHS England letter to CCGs in 2017.

The clinician will provide contact information to the institution should there be any queries to be addressed regarding the clinical assessments they have made. This clinician should also have a process for ensuring that patients' GPs are aware of any antivirals which have been authorised in this way.

Additional information

The UKHSA Centre HPT follows its existing procedures for reporting, follow-up and closure of the localised outbreak.

If any exposed person develops symptoms while on antiviral prophylaxis, this should be reported to the same Out of Hours clinician or the patient's GP by the contact person at the affected institution. If the clinician then suspects influenza, they should recommend the exposed person is switched to a course of treatment dose antivirals.

If further antivirals are needed for this purpose for the exposed person, then this will require a further FP10 ('In Hours/In Season') or PSD ('Out of Hours/Out of Season'). This should also be reported by the clinician to the UKHSA Centre HPT.

Appendix

- Item 1 – NHS England letter to CCGs in 2017.
[NHS England Localised community outbreaks of influenza, letters to CCGs](#)
- Item 2 – UKHSA antiviral guidance.
[UKHSA Antiviral Guidance](#)
- Item 3 – Pharmacists that keep antivirals.
[NHSE Specialist Medicines Service list](#)
The list of participating pharmacies in Cornwall can be found [here](#).
- Item 4 – Patient specific direction (PSD) template.
[PSD for Antivirals Template 2022 v0.4.docx](#)

For printing [PSD for Antivirals Template 2022 FINAL PROTECTED V1.0.pdf](#)