

Standard operating procedure

Procedure: 2025 Seasonal influenza (Flu) – response to suspected or confirmed outbreaks in care homes and community institutional settings

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Procedure overview

This operational procedure describes the response to a UKHSA request to assess and intervene in the event of a suspected or confirmed outbreak of seasonal influenza in a care home. This responsibility was given to CCGs in 2017 and transfers to the ICB.

The purpose of this operational procedure is to provide all the information required to ensure that vulnerable contacts of seasonal influenza are clinically assessed and prescribed antiviral prophylaxis in accordance with guidance and the correct legal prescribing method.

Other (reference documentation)

[Services for the provision of antiviral drugs for the treatment and post-exposure prophylaxis of influenza-like illness \(ILI\) in at-risk patients including care home residents](#)

[UKHSA Antiviral Guidance](#)

Requirements

1. An agreed communication cascade initiated by UKHSA
2. Access to a doctor who is able to clinically assess and prescribe
3. Ability to use the correct prescription method depending on infection, season, number of affected individuals, and time and day of need.
4. Ability to collect swabs, package specimens, and transport to the laboratory
5. Access to a supply of medication within 48 hours of symptom onset.

Complexities

- Prescribing methods differ according to current flu season status, in season or out of season. Flu season is declared nationally by the chief medical officer.
- The process differs out of hours.
- The supplier of antiviral medication differs depending on location and number of doses needed.
- The need for swabbing differs depending on what is already known about the cause of symptoms.

Procedure

1. UKHSA receive a report of an outbreak of either confirmed or suspected influenza in a care home or community setting.
2. A clinician is contacted to make an assessment of the affected individuals
3. Swabbing is arranged only if requested by UKHSA
4. A prescription is made for anti-viral medication
5. Supply and collection of medication is arranged
6. Feedback is provided to the UKHSA and local stakeholders.

Procedure Notes

1. UKHSA receive information direct from affected settings or from a hospital which has admitted someone from an affected setting.
2. UKHSA will confirm an outbreak and firstly attempt 'In Hours' to contact the nearest and then next nearest GP Practice of the closest association to the community setting including residential setting for those with additional educational needs.

Health for Homeless provides a service for homeless individuals who are not registered with their own GP.

If no GP is found the search will be passed to NHS Cornwall and Isles of Scilly ICB Primary Care Team to continue contacting practices.

Out of hours UKHSA will contact Cornwall 111. The out of hours service will send a clinician to visit and assess people.

UKHSA will provide:

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

3. 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.

UKHSA provides swabs and advises on specific packaging and transport for the samples to go to the Bristol public health lab for full respiratory virus panel testing.

All care homes are able to conduct swabbing onsite and should swab the five people with the most recent onset of symptoms or as guided by UKHSA.

Other settings may need support to take swabs and this would need to be arranged on an individual basis.

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.

4. If 'Flu Season' has been declared by the issue of the Chief Medical Officer's letter prophylaxis and treatment may be prescribed on FP10 or by EPS. If Flu season has not been declared a Patient specific direction (PSD) is needed to prescribe prophylaxis or treatment.

The word version (for filling out electronically) and the pdf (for printing and completing by hand whilst in the care home) can be found on the [joint formulary](#), along with the claim form for such supplies, emergency ordering fees and delivery fees.

[UKHSA Antiviral Guidance should be used.](#)

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 claim by email to COSICB.prescribing@nhs.net).

The out of hours service will have a list of pharmacies that will be open.

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.¹

Exceptionally, the on-call director may request and authorise a pharmacy to place this 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.

1. ¹ [Pharmacies providing the NHSE specialist medicines service](#) keep some stock of Tamiflu and Relenza which may be enough to start treatment whilst awaiting order. These pharmacies may not be those normally catering to the home and they may not be able to furnish a MARR chart.

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.

PSD will be sent (initially by email to ensure prompt supply, followed by the original by hand or by post) to the relevant pharmacy (if no prior contact has been made to determine stock availability a phone call to alert the pharmacy to the incoming email will ensure prompt response) and a copy of the PSD should be retained in the care home.

6. 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.

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

Contacts

Cornwall 111 Out of Hours (shift manager - 01872 224042)

NHS Cornwall and Isles of Scilly ICB Primary care team: 01726 627711 or CIOSICB.primarycare@nhs.net

NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team
CIOSICB.prescribing@nhs.net

UKHSA: 0300 303 8162.

RCHT Hospital pharmacy:

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) Hospital pharmacy.

Telephone - contact the Derriford switchboard on 01752 202082 and ask for the pharmacy team (in hours) and out of hours ask 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, Level 5, Derriford Hospital, Plymouth, PL6 8DH.

Cornwall Health for Homeless 8 City Road, Truro,
TR1 2JJ Call: 01872 221 240

[NHS England — South West » South West Community Pharmacy Information](#)