



# Standard operating procedure

Procedure: Avian Influenza

Number: V1

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#### **Version control**

Version Number	Revision date	Revision by	Nature of revisions
V0.7	December 2024	Head of EPRR	New standard operating procedure.
V1	November 2025	EPRR Manager	Complete rewrite in consultation with ICB medicines optimisation and RCHT pharmacy team.

### **Contents**

Procedure overview	2
Other (reference documentation)	2
Requirements	
Procedure	3
Supply of antivirals	4
Command and Control	4
Appendix 1 Cornwall and Isles of Scilly avian influenza patient testing pathway	5
Appendix 2 UKHSA guidance on investigation and management of possible human cases of avian influenza	5
Appendix 3 – Prescribing Antivirals for the management of Avian Influenza	7
Appendix 4- Pharmacy action card	8
Appendix 5- Cornwall swabbing activation process	9
Appendix 6- Isles of Scilly swabbing activation	11





#### **Procedure overview**

This operating procedure describes the NHS Cornwall and Isles of Scilly ICS process for dealing with suspected cases of avian influenza.

This Avian Influenza SOP document is the updated process for 2025 -2026 season

## Other (reference documentation)

<u>Influenza: treatment and prophylaxis using anti-viral agents - GOV.UK</u> https://www.nhs.uk/conditions/bird-flu/

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/1045368/Avian\_influenza\_guidance\_and\_algorithms\_for\_managing\_incidents\_in\_birds.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/1069224/Avian Flu algorithm E 120422 1.pdf

#### Search HSE website

https://www.gov.uk/government/collections/avian-influenza-guidance-data-and-analysis

https://www.gov.uk/government/publications/avian-influenza-pre-and-post-exposure-prophylaxis-pgd-template

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/759277/AI\_guidance\_for\_HPT\_2018\_AT26112018.pdf

https://www.gov.uk/government/collections/avian-influenza-guidance-data-and-analysis

Health and Safety Executive advice on protecting workers from avian influenza.

#### NHS website

## Requirements

The UK Health Security Agency (UKHSA) notes that avian influenza is primarily a disease of birds and the risk to the general public's health is very low. The regional UKHSA Health Protection Teams work closely with the Department for Environment, Food and Rural Affairs (DEFRA) to monitor the situation. UKHSA will provide health advice to persons who have encountered infected birds, as a precaution.





The Food Standards Agency has said that based on the current scientific evidence, avian influenza poses a very low food safety risk for UK consumers. Properly cooked poultry and poultry products, including eggs, are safe to eat.

It has been agreed with Community Pharmacy Cornwall that all pharmacies in Cornwall and Isles of Scilly can stock the appropriate antivirals. A claiming process and fees have been agreed with the Medicines Optimisation team at NHS Cornwall and Isles of Scilly ICB.

Prescribing of antivirals for the management of Avian Influenza is not covered under the Selected List Scheme (SLS) and therefore cannot be issued using an FP10 prescription. As a result, all antiviral prescribing for this purpose must be carried out under a Patient Specific Direction (PSD).

To prescribe antivirals for the management of Avian Influenza, a prescribing clinician must complete and sign the PSD. The prescribing clinician must then contact the community pharmacy to ensure that they are aware, do not turn the individual away and are dispensing the antiviral. (This arrangement may not be familiar to all pharmacies as was new in 2023, therefore it may be the first time many will have seen a PSD). If you need a copy of the PSD template, Word and PDF templates may be downloaded from this link to the <a href="Cornwall Formulary">Cornwall Formulary</a>. You can also obtain one from the ICB Medicines Optimisation team CIOSICB.prescribing@nhs.net.

#### **Procedure**

Changes of post-exposure recommendations for exposed contacts routinely working on Animal and Plant Health Agency (APHA) managed infected premises or APHA commissioned collection of wild birds including antiviral prophylaxis will no longer be recommended for exposed people working on infected premises or collecting wild birds when fully compliant with Personal Protective Equipment (PPE), including fit tested Respiratory Protective Equipment (RPE) in line with Health and Safety Executive (HSE) guidance, unless there is a breach in PPE compliance. Secondly, where full compliance with PPE is in place, exposed contacts will be under passive, not active follow up. Exposed contacts should inform the relevant Health Protection Team (HPT) if they develop symptoms, along with their employer and occupational health provider.

Where either a designated bird collector or a member of the public, who has handled dead or sick birds, becomes symptomatic and contacts a healthcare facility, they should be advised to call 111 as per the patient swabbing pathway - See appendix 1.

For activation of swabbing - See appendix 5 for Cornwall and appendix 6 for Isles of Scilly.

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. If the clinician then suspects avian 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 Patient Specific Direction. This should also be reported by the clinician to the UKHSA Centre HPT.

### **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 (Royal Cornwall Hospital Trust/ University Hospitals Plymouth) 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. The cost of antivirals supplied, and applicable dispensing fees are claimed by the supplying community pharmacy via invoice. A template <a href="Invoice to Claim for Supply of Antivirals Against PSD">Invoice to Claim for Supply of Antivirals Against PSD</a> (with instructions for completion and submission) is available for the community pharmacy to download from the Formulary or a copy may be obtained from the ICB Medicines Optimisation team <a href="CIOSICB.prescribing@nhs.net">CIOSICB.prescribing@nhs.net</a>.

Pharmacies can make an emergency wholesale order for a fee, which the ICB On Call Director may be asked to approve. Details of this should be sent to CIOSICB.prescribing@nhs.net. The ICB on-call director can be contacted by calling Bodmin switchboard on 01208 251300.

#### **Command and Control**

The role of the ICB EPRR team will be to advise or co-ordinate any response element requiring a strategic decision.

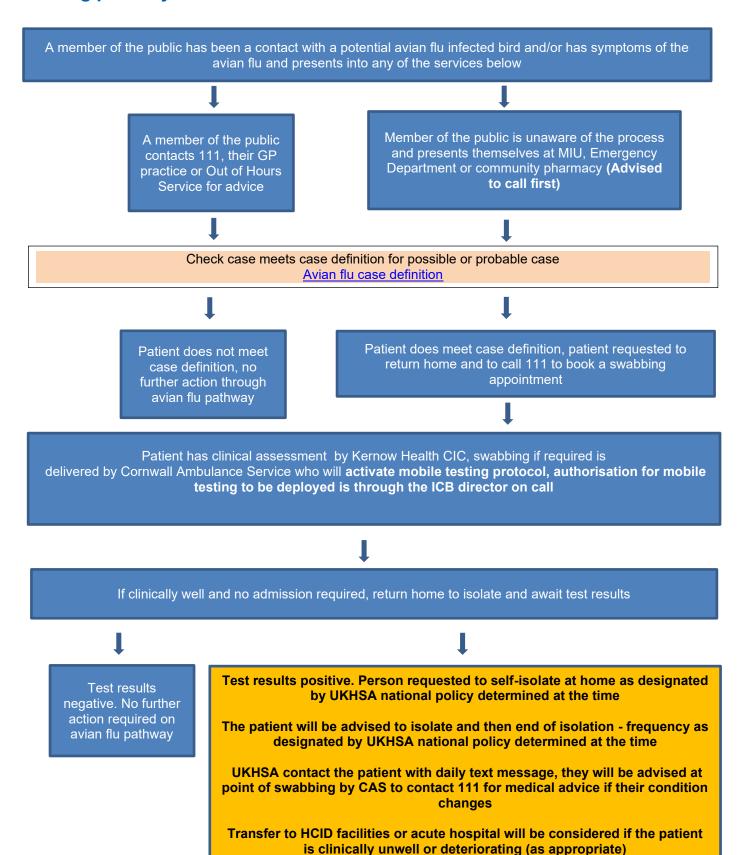
The delivery/operational aspects will be undertaken as follows:

- Cornwall Partnership Foundation Trust (CfT) will be responsible for Tactical co-ordination on the Isles of Scilly.
- Kernow Health CIC/111 for clinical assessment and swabbing activation.
- Cornwall Ambulance Service (CAS) for swabbing.





# **Appendix 1 Cornwall and Isles of Scilly avian influenza patient testing pathway**







# Appendix 2 UKHSA guidance on investigation and management of possible human cases of avian influenza



Investigation and management of possible human cases of avian influenza amongst contacts associated with avian influenza incidents

#### Case definition for possible human cases

- A fever ≥38°C (or history of fever) and/or
- **B** acute onset of at least one of the following respiratory symptoms: cough (with or without sputum), hoarseness, nasal discharge or congestion, shortness of breath, sore throat, wheezing, sneezing **and/or**
- C acute onset of conjunctivitis and/or
- D any other severe or life-threatening illness suggestive of an infection process

Additionally, in the ten days prior to symptom onset, the patient must have been exposed to a confirmed Avian Influenza incident in the UK. This includes direct or close contact with infected birds (unwell or dead birds, or asymptomatic birds that became symptomatic within 48 hours following contact), their faecal matter or contaminated litter/other materials including eggs, and/or parts of infected premises considered contaminated by animal health.

#### Meets case definition

- · notify and discuss with HPT (if not already)
- HPT to complete possible case report form accessed via PDU sharepoint
- start treatment dose antivirals
- · HPT discuss testing with local Public Health laboratory
- arrange for clinical assessment and specimens to be taken by appropriate health professional using recommended infection control measures (see below)

#### Case definition not met

Unlikely to be human case of Avian Influenza, Treat and investigate as clinically indicated using standard infection control measures.

#### Hospitalisation not warranted

The patient should be asked to isolate until laboratory results are available\*. If patient deteriorates and requires hospitalisation.

#### Hospitalisation warranted

Ensure ambulance and hospital aware of infection control advice (below) Infection control measures:

Staff PPE: correctly fitted FFP3 mask, gown, gloves and eve protection.

Patient location: strict respiratory isolation, preferably in a negative pressure room.

Patient: wear surgical facemask if tolerated (but not FFP3).

HPT alert Colindale duty doctor.

# Influenza A positive but unsubtypeable or influenza A (H5) or (H7) positive

PHL Duty Microbiologist/Virologist communicates result to local HPT, referring lab and RVU. All presumptive results should be telephoned and confirmed in writing. Local HPT informs Acute Respiratory team Colindale (or Colindale Duty Doctor at any time if out-of-hours).

#### . Influenza A negative, or

- Influenza A positive subtyped as seasonal H3N2 OR H1N1pdm09, or
- Influenza B positive

PHL Duty Microbiologist/Virologist communicates result to local HPT, referring laboratory. Treat and investigate as clinically indicated.

\*Isolation for asymptomatic contacts is not recommended routinely prior to laboratory results being available.

Avian influenza guidance: <a href="www.gov.uk/government/collections/avian-influenza-guidance-data-and-analysis">www.gov.uk/government/collections/avian-influenza-guidance-data-and-analysis</a> Local public health laboratories: <a href="www.gov.uk/government/collections/public-health-laboratories">www.gov.uk/government/collections/public-health-laboratories</a>

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# **Appendix 3 – Prescribing Antivirals for the management of Avian Influenza**

Prescribing Antivirals for the management of Avian		
Influenza		
1	If there is a requirement to prescribe antivirals for symptomatic cases or for the purposes of prophylactic treatment, the clinician can prescribe antivirals via a Patient Specific Direction (PSD).	
	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.	
2	If a Patient Specific Direction (PSD) is to be issued, a prescriber is needed to complete it. They must then contact the community pharmacy to ensure that they are aware, do not turn the individual away and are dispensing the antiviral. (This arrangement may not be familiar to all pharmacies as was new in 2023, therefore it may be the first time many will have seen a PSD). A copy of the PSD can be found via the following link- Cornwall Formulary.	
3	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. If the clinician then suspects avian 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 PSD. This should also be reported by the clinician to the UKHSA Centre HPT.	
Isles of Scilly	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).	





## **Appendix 4- Pharmacy action card**

not be available from the above in a timely manner.

Ph	Pharmacy action card		
1	If a patient requires antivirals for the management if Avian Influenza, then the clinician must prescribe the medication by using a PSD. The completed PSD should be sent to the organisation that will dispense it. 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.		
	The charge for PSD prescribed antivirals will be processed by NHS Cornwall and Isles of Scilly ICB Medicines Optimisation Team after the event <a href="mailto:CIOSICB.prescribing@nhs.net">CIOSICB.prescribing@nhs.net</a> .		
2	The prescribing clinician must contact the community pharmacy to ensure that they are aware, do not turn the individual away and are dispensing the antiviral. (This arrangement may not be familiar to all pharmacies as was new in 2023, therefore it may be the first time many will have seen a PSD). A copy of the PSD template can be found via the following link- <a href="Cornwall Formulary">Cornwall Formulary</a> .		
3	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, an emergency order may be placed provided that this will arrive within the 48-hour window.		
4	Pharmacies can make an emergency wholesale order for a fee, which the ICB On Call Director may be asked to approve. Details of this should be sent to <a href="CIOSICB.prescribing@nhs.net">CIOSICB.prescribing@nhs.net</a> . The ICB on-call director can be contacted by calling Bodmin switchboard on 01208 251300.		
5	The acute hospital holds a small stock of medication for dispatch in extremis, should stock		





### **Appendix 5- Cornwall swabbing activation**

# **Cornwall swabbing activation process**

This agreement describes the procedures and processes that will be followed within NHS Cornwall and Isles of Scilly ICS to manage any incident (which could include the testing of staff at a poultry farm following a breach of bio security procedures) that requires the implementation of special arrangements by the system to manage an outbreak of Avian Flu.

This plan should be used with:

- NHS Cornwall and Isles of Scilly ICB System Incident Response Plan
- NHS Cornwall and Isles of Scilly ICB Pandemic and High Consequence Infectious Disease (HCID) Plan
- Animal Health Plan (DCIoS LRF) 14/03/2019
- Contingency plan exotic notifiable diseases of animals in England (DEFRA) 05/11/2019

https://collaborate.resilience.gov.uk/RDService/home/8680/Animal-disease-plans

<u>Managing the human health implications of avian influenza - guidance for health</u> protection teams (publishing.service.gov.uk)

Reminder for health professionals on recognising possible human cases of Avian Influenza and accessing testing - GOV.UK (www.gov.uk)

NOTE: Key changes in the interim H5N1 guidance 202305) are:

Introduction of a probable' case definition for birds. This is for situations where a person has exposure to a dead wild bird and where the bird will not be tested for avian influenza by APHA. Once Avian Influenza is identified in a surveillance species, there is no further testing within 3km for 14 days. Previously, the Avian Influenza guidance did not cover circumstances where wild birds may have died from avian influenza but would not be tested by APHA. There will be no further notifications of potential cases either.

Notifications of possible outbreaks may be received from the Council of the Isles of Scilly and Cornwall Council; APHA, DEFRA, UKHSA.

#### In Hours Only – On site swabbing (7 days a week 9am – 5pm)

- Notification received via telephone from UKHSA or Public Health to the dispatch lead at Kernow Health CIC (01872 224042) of outbreak of avian flu and requirement to swab symptomatic staff at site.
- 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 carry out swabbing at scene.





	They will provide details given by UKHSA (including HPZ number).
3	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).
4	CAS/Kernow Health CIC to liaise with point of contact for affected people to arrange an appointment time for staff requiring swabbing
5	Staff to be deployed to the site with all equipment to obtain swabs. The swabber to be in full PPE as per current guidelines.
6	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).
7	The clinician taking the swab will need to contact UKHSA in or out-of-hours on 0300 303 8162 to advise the swab has been completed and is enroute.





### **Appendix 6- Isles of Scilly swabbing activation**

# Isles of Scilly swabbing activation process

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.

This plan should be used with:

- NHS Cornwall and Isles of Scilly ICB System Incident Response Plan
- NHS Cornwall and Isles of Scilly ICB Pandemic and High Consequence Infectious
- Animal Health Plan (DCloS LRF) 14/03/2019
- Contingency plan exotic notifiable diseases of animals in England (DEFRA) 05/11/2019

https://collaborate.resilience.gov.uk/RDService/home/8680/Animal-disease-plans

Managing the human health implications of avian influenza - guidance for health protection teams (publishing.service.gov.uk)

Reminder for health professionals on recognising possible human cases of Avian Influenza and accessing testing - GOV.UK (www.gov.uk)

NOTE: Key changes in the interim H5N1 guidance 202305) are:

Introduction of a probable' case definition for birds. This is for situations where a person has exposure to a dead wild bird and where the bird will not be tested for avian influenza by APHA. Once Avian Influenza is identified in a surveillance species, there is no further testing within 3km for 14 days. Previously, the Avian Influenza guidance did not cover circumstances where wild birds may have died from avian influenza but would not be tested by APHA. There will be no further notifications of potential cases either.

Notifications of possible outbreaks may be received from the Council of the Isles of Scilly and Cornwall Council; APHA, DEFRA, UKHSA.

#### In Hours Only – On site swabbing (7 days a week 9am – 5pm)

Notification received via telephone from UKHSA, Public Health or the Council of Isles of Scilly to the dispatch lead at Kernow Health CIC – (01872 224042) of outbreak of avian flu and requirement to swab symptomatic staff at site.





	Kornow Hoolth CIC to accortain whether the CD proctice on the islands has
	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 carry out swabbing at scene. To note the costing for dispatch to Isles of Scilly must be quoted by CAS as it will exceed the normal budget scope.
	They will provide 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 as per current guidelines.  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 to advise the swab has been completed and is enroute.
Note for ICB DoC	The cost of activation has been agreed through Medicines Optimisation and the Director on Call should sanction the deployment, if requested.
	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.
	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: 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, CAS would 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.