Reporting and Management of Respiratory Illness’s including Influenza Like Illness (ILI) and Covid in Care Homes December 2022

Care Home has residents or staff with respiratory illness but cause is not known → Isolate

Test using LFD test to rule out Covid-19 → LFD positive- follow care home guidance for the management of Covid and report it to UKHSA

Covid Guidance here

COVID-19 supplement to the infection prevention and control resource for adult social care - GOV.UK

Influenza Like Illness (ILI)

Case Definition
Oral or tympanic temperature of ≥37.8°C PLUS acute onset of at least one of:
- cough
- hoarseness
- sore throat
- nasal discharge/congestion
- wheezing
- sneezing
- shortness of breath
- chest pain

OR an acute deterioration in physical or mental ability without other known cause

ILI or COVID-19 Suspected Outbreak Definition
Two or more cases that meet the clinical case definition of ILI or COVID-19, in individuals (resident or staff) with an epidemiological link to the care home and onset dates within 14 days but without laboratory confirmation

LFD Negative but symptomatic of Influenza Like Illness

THINK FLU!

Setting contacts UKHSA Health Protection Team (HPT) EastOfEnglandHPT@UKHSA.gov.uk or 0300 303 8537 and provides details of:
- No of suspected cases (incl. staff)
- Date of onset of first case
- Date of onset of last case
- Presenting Symptoms
- Details of influenza vaccination
- Any confirmed flu cases (e.g. admission into hospital)

HPT will determine if the situation meets the definition of a suspected ILI

Yes

HPT will declare an “Acute Respiratory Infection (ARI) Suspected Outbreak Situation”

HPT gather information
- Email address for CH
- Layout of CH
- Numbers of residents and staff
- Details of any COVID-19 swabbing and results
- Flu vaccination status of residents and staff
- Details of any recent swabbing
- Details of any planned flu vaccination clinics
- Any operational difficulties

HPT organises respiratory testing for up to 5 symptomatic residents (and anti virals where indicated) via the Commissioned Provider (CP) the three additional action box’s below take place

HPT carries out risk assessment and provides advice on whether
- Setting should discuss admissions/discharge arrangements with ICB
- Depending on flu circulation in the community, Antivirals may be indicated before or following results of swabbing
- Any other control measures indicated due to attack rate or other factors

HPT Advice verbally and via email
- IPC Advice
- Testing arrangements
- Links to relevant guidance
- Information about follow up arrangements
- Additional advice as per risk assessment
- If anti-virals will be recommended
- CP prescribes and provides antivirals

Follow Up Arrangements
- HPT informs LA SPOC of situation who will support as per local arrangements
- CP provides test results to CH
- CH will update HPT with results once known
- UKHSA HPT informs LA
- CP or LA to escalate any public health concerns to HPT as per escalation criteria

No further action. Monitor individuals and contact GP as necessary. Staff should not be in the setting if unwell

Isolate